GUIDEBOOK

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Families and Schools Together

Reviews: March 2017; November 2019

Note on provider involvement: This provider has agreed to EIF's terms of reference, and the assessment has been conducted and published with the full cooperation of the programme provider.

Families and Schools Together (FAST) is a multi-family group approach designed to build protective factors for children. The programme's key objective is to build stronger families and communities. This community strengthening programme is based on the social ecological theory of child development, family systems theory, family stress theory, attachment theory, and social learning theory.

Evidence rating: **2+**

FAST is a universal programme, and so is open to all families and participation is strictly voluntary. FAST's target population is children between the ages of three and eight years old.

Cost rating: 1

Families graduate from the programme at the end of eight weeks and then participate in monthly follow-up meetings called FASTWORKS. These ongoing meetings (that continue for two years or more) sustain the relationships between parents and children, as well as the relationships formed between families and the school. With team support, parents design the FASTWORK agenda to meet the needs of their families.

EIF Programme Assessment

Families and Schools Together has **preliminary evidence** of improving a child outcome, but we cannot be confident that the programme caused the improvement.

Evidence rating: **2+**

What does the evidence rating mean?

Level 2 indicates that the programme has evidence of improving a child outcome from a study involving at least 20 participants, representing 60% of the sample, using validated instruments.

This programme does not receive a rating of 3 as its best evidence is not from a rigorously conducted RCT or QED evaluation.

What does the plus mean?

The plus rating indicates that a programme's best available evidence is based on an evaluation that is more rigorous than a level 2 standard but does not meet the criteria for level 3.

Cost rating

A rating of 1 indicates that a programme has a low cost to set up and deliver, compared with other interventions reviewed by EIF. This is equivalent to an estimated unit cost of less than£100.

Cost rating: 1

Child outcomes

According to the best available evidence for this programme's impact, it can achieve the following positive outcomes for children:

Enhancing school achievement & employment

Improved academic performance (teacher-report)

Based on study 1

Preventing crime, violence and antisocial behaviour

Reduced behavioural difficulties (teacher-report)

Based on study 2

This programme also has evidence of supporting positive outcomes for couples, parents or families that may be relevant to a commissioning decision. Please see the 'About the evidence' section for more detail.

Key programme characteristics

Who is it for?

The best available evidence for this programme relates to the following age-groups:

Primary school

How is it delivered?

The best available evidence for this programme relates to implementation through these delivery models:

Group

Where is it delivered?

The best available evidence for this programme relates to its implementation in these settings:

Primary school

The programme may also be delivered in these settings:

Primary school

How is it targeted?

The best available evidence for this programme relates to its implementation as:

Targeted selective

Where has it been implemented?

Australia, Brazil, Canada, England, Germany, Iran, Kazakhstan, Kurdistan, Netherlands, Northern Ireland, Pakistan, Scotland, United States, Uzbekistan, Wales

UK provision

This programme has been implemented in the UK.

UK evaluation

This programme's best evidence includes evaluation conducted in the UK.

Spotlight sets

EIF includes this programme in the following Spotlight sets:

 parenting programmes with violence reduction outcomes programmes for children with recognised or possible special education needs

About the programme

What happens during delivery?

How is it delivered?

 FAST is delivered in eight sessions of 2.5 hours' duration each by a trained, multi-agency team of professionals from education, community, and parents from the school as partners, to groups of children after school.

What happens during the intervention?

- A series of structured family activities take place, which involve communication, listening, turn-taking, community-building, meal-sharing, and relationship-building.
- Practitioners use a technique called 'table-based coaching', whereby they
 pass all instructions for children and other family members through the
 parent.
- FAST activities consistently promote the development of relationships: parent-to-child, parent-to-parent, parent-to-school, and parent-to-community.

What are the implementation requirements?

Who can deliver it?

- The practitioners who deliver this programme are a trained, multi-agency team of professionals from education, community, and parents from the school as partners. The team must be culturally representative of the families being served by the programme.
- The team is comprised of a member of school personnel, with NFQ level 4 qualifications, a community partner (someone who lives or works in the community), with NFQ level 4 qualifications, and two parents (of children at the participating school).

What are the training requirements?

- The practitioners have 25 hours of programme training each. Booster training of practitioners is not required.
- FAST facilitators are trained to coach and support parents through each activity.

How are the practitioners supervised?

 It is recommended that practitioners are supervised by one host-agency supervisor (qualified to NFQ level 7/8) with 77 hours of programme training.

What are the systems for maintaining fidelity?

- Training manual
- Other printed material
- Other online material
- Video or DVD training
- Face-to-face training
- Supervision
- Fidelity monitoring

Is there a licensing requirement?

Yes, there is a licence required to run this programme.

How does it work? (Theory of Change)

How does it work?

- Parent-child attachment and family relationships reduce conflict in the family and improve child behaviour at home and school.
- FAST aims to improve family communication and strengthen parent's bonds with their child, each other, their school and their community.
- In the short term, FAST parents/carers have increased confidence, increased involvement in schools and their communities. Children will be better able to self-regulate.
- In the long term, the benefits of FAST impact on the home and school through better relationships and parental engagement in their child's education which results in improved school attendance and educational attainment. In addition, children will be less likely to misuse substances, and engage in antisocial behaviour.

Intended outcomes

Supporting children's mental health and wellbeing Enhancing school achievement & employment

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About the evidence

FAST's most rigorous evidence comes from two RCTs, one conducted in the USA and the other in the UK. These studies identified statistically significant positive impact on a number of child and parent outcomes.

The conclusions that can be drawn from these study are limited by methodological issues pertaining to high differential attrition, hence why a higher rating is not achieved.

Study 1

Citation: Moberg et al (2007)

Design: RCT

Country: United States

Sample: 473 children between 6 and 9 years old, from 10 urban schools which

serve low-income children from mixed cultural backgrounds

Timing: Immediate post-test, one-year follow-up, two-year follow-up

Child outcomes:

Improved academic performance (teacher-report)

Other outcomes:

 Improved parent involvement in school (parent-report) Reduced parent-reported social support available to family in the community

Study rating: 2+

Moberg, D. P., McDonald, L., Posner, J. K., Burke, M. L., & Brown, R. L. (2007). Randomized Trial of Families and Schools Together (FAST): Final Report on NIDA Grant R01-10067.

Available at

http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.357.3226&rep=rep1&type=pdf **Study design and sample**

The first study was a cluster RCT, with randomisation at the level of the classroom. Classrooms of children were randomised to either the FAST intervention, or to a low-dose control – i.e. 8 behavioural parenting pamphlets with active follow-up phone calls to check that they had been read

This study was conducted in the USA. Children from 10 predominantly African American or Latino schools in Milwaukee were recruited into the study. Children were all in grades 1–3 at the beginning of the study, and so were between 6 and 9 years old. 58% of these children were at the borderline clinical threshold for externalising and/or internalising behaviours.

Measures

Child problem behaviours, socio-emotional problems, and academic performance were assessed using the teacher-reported Child Behaviour Checklist. Child problem behaviours and socio-emotional problems were also assessed using the parent-reported version of this measure. Children's social skills in the classroom, as well as their academic competence, were assessed using the teacher-reported Social Skills Rating System (SSRS). Children's academic achievement was also assessed using their third- and fourth-grade standardised test scores. A number of family-level and parent-level outcomes were also assessed using a variety of measures: family attachment was assessed using the Family Attachment and Changeability Index measure; family social support was assessed using the Social Support Index measure; family functioning was assessed using the Structural Family System Rating Scale (SFSR); parental self-efficacy was measured using the Generalized Expectancy of Success Scale; and parents' involvement in their children's school was assessed using the Parent-School-Community Involvement Survey.

Findings

This study identified statistically significant positive impact on a number of child outcomes. At post-test, there were statistically significant differences between the intervention and control groups favouring the intervention group on parental involvement with school. At the two-year follow-up, statistically significant differences were identified on teacher-rated academic performance.

Note: Additional subgroup findings from this study for Latino children are reported here: https://doi.org/10.1093/cs/28.1.25

Study 2

Citation: Lord et al., 2018

Design: Cluster RCT

Country: United Kingdom

Sample: 7207 children between 5 and 7 years old, from 158 schools across the UK with

more than 20% of pupils eligible for free school meals.

Timing: Post-test; One-year follow-up

Child outcomes:

Reduced behavioural difficulties (teacher-report)

Other outcomes:

None measured

Study rating: 2+

Lord, P., Styles, B., Morrison, J., White, R., Andrade, J., Bamford, S., Lushey, C., Lucas, M., Smith R. (2018). Families and Schools Together (FAST) Evaluation report and executive summary. **Available at:**

 $https://educationendowment foundation.org.uk/public/files/Projects/Evaluation_Reports/FAST.pdf$

Study design and sample

The first study was a cluster RCT, with randomisation at the level of the school. 158 schools were randomised to either the FAST intervention or to a control group.

This study was conducted across England, including urban and rural territories. Recruited children (N=7207) were in Year 1 and aged between 5 and 7 years old at the beginning of the study. All participating schools (n=158) were state schools, with greater than 20% of pupils eligible for free school meals.

Measures

Children's academic attainment was assessed by Key Stage 1 results in reading and mathematics. Children's behavioural and prosocial outcomes were measured using the Strengths and Difficulties Questionnaire.

Findings

This study identified statistically significant positive impact on children's total behavioural difficulties at post-test.

It is worth noting that the study did not demonstrate any significant impact on children's attainment at the one-year follow-up, and a negative impact was identified on children's prosocial behaviour at the one-year follow-up. However, concerns are mitigated by the fact that this was only observed at follow-up, and so when study findings were subject to greater attrition.

The conclusions that can be drawn from this study are limited by methodological issues pertaining to high attrition and non-blind data collection, hence why a higher rating is not achieved.

Other studies

The following studies were identified for this programme but did not count towards the programme's overall evidence rating. A programme receives the same rating as its most robust study or studies.

Kratochwill, T. R., McDonald, L., Levin, J. R., Scalia, P. A., & Coover, G. (2009). Families and schools together: An experimental study of multi-family support groups for children at risk. Journal of School Psychology, 47(4), 245–265 - **This reference refers to a quasi-experimental design, conducted in the USA.**

Kratochwill, T. R., McDonald, L., Levin, J. R., Bear-Tibbetts, H. Y., & Demaray, M. K. (2004). Families and schools together: An experimental analysis of a parent-mediated multi-family group program for American Indian children. Journal of School Psychology, 42(5), 359–383 - **This reference refers to a randomised control trial, conducted in the USA.**

McDonald, L., & Fitzroy, S. (2010). Families and Schools Together (FAST) Aggregate FASTUK Evaluation Report of 15 Schools in 15 Local Education Authorities (LEAs) across the UK.

Crozier, M., Rokutani, L., Russett, J. L., Godwin, E., & Banks, G. E. (2010). A multisite program evaluation of families and schools together (FAST): Continued evidence of a successful multifamily community-based prevention program. School Community Journal, 20(1), 187–207 - This reference refers to a pre-post study, conducted in the USA.

Knox, L., Guerra, N. G., Williams, K. R., & Toro, R. (2011). Preventing children's aggression in immigrant Latino families: A mixed methods evaluation of the Families and Schools Together program. American Journal of Community Psychology, 48(1–2), 65–76 - This reference refers to a randomised control trial, conducted in the USA.

Guidebook

The EIF Guidebook provides information about early intervention programmes that have at least preliminary evidence of achieving positive outcomes for children. It provides information based on EIF's assessment of the strength of evidence for a programme's effectiveness, and on detail about programmes shared with us by those who design, run and deliver them.

The Guidebook serves an important starting point for commissioners to find out more about effective early interventions, and for programme providers to find out more about what good evidence of impact looks like and how it can be captured. As just one of our key resources for commissioners and practitioners, the Guidebook is an essential part of EIF's work to support the development of and investment in effective early intervention programmes.

Our assessment of the evidence for a programme's effectiveness can inform and support certain parts of a commissioning decision, but it is not a substitute for professional judgment. Evidence about what has worked in the past offers no guarantee that an approach will work in all circumstances. Crucially, the Guidebook is not a market comparison website: ratings and other information should not be interpreted as a specific recommendation, kite mark or endorsement for any programme.

How to read the Guidebook

EIF evidence standards

About the EIF Guidebook

EIF

The Early Intervention Foundation (EIF) is an independent charity and a member of the What Works network. We support the use of effective early intervention for children, young people and their families: identifying signals of risk, and responding with effective interventions to improve outcomes, reduce hardship and save the public money in the long term.

We work by generating evidence and knowledge of what works in our field, putting this information in the hands of commissioners, practitioners and policymakers, and supporting the adoption of the evidence in local areas and relevant sectors.

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