

EXECUTIVE SUMMARY
The Development of the
Better Beginnings, Better Futures
Integrated Model for Primary Prevention

John C. Sylvestre & Kathleen Brophy
Better Beginnings, Better Futures
Research Coordination Unit
University of Guelph

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EXECUTIVE SUMMARY

1.0 OVERVIEW

The “Better Beginnings, Better Futures” Project, first announced by the Ontario Government in November 1989, has three major goals:

- * prevent serious social, emotional, behavioural, physical and cognitive problems in young children;
- * promote the social, emotional, behavioural, physical and cognitive development of these children; and
- * enhance the abilities of socio-economically disadvantaged families and communities to provide for their children.

The Project is being funded by three Ontario provincial Ministries (Community and Social Services, Health, and Education) as well as the Federal Department of Indian and Northern Affairs. Better Beginnings is the first long-term research demonstration project of its kind in Canada.

The focus is on children up to the age of eight years old, living in eleven socio-economically disadvantaged communities/ neighbourhoods in Ontario. These communities are being funded to provide services tailored to local circumstances over a 5 year period, including one year of program planning and 4 years of implementation. The progress of children and their families will be followed for an additional 20 years.

Better Beginnings, Better Futures grew out of a Coordinated Primary Prevention Initiative established by the Ontario Ministry of Community and Social Services (MCSS) in 1987. The Coordinated Primary Prevention Initiative was the culmination of nearly a decade of interest in prevention as a policy for children by MCSS.

To determine the direction of the project, a 25 member Technical Advisory Group, consisting of key program directors and researchers from across the province, was convened in the Spring of 1988. This multi-disciplinary group was organized into 5 subcommittees to review the literature and specific Ontario programs on prevention for young children living in

economically disadvantaged communities. Three of the five subcommittees were structured to cover different age periods of children: Prenatal/Infant, Preschool, and Primary School Age. The topics of the remaining two subcommittees were Community Involvement and Research Issues. Subcommittee deliberations and reports were then discussed by the Technical Advisory Group as a whole to determine important program and research criteria of prevention programs for children 0-8 years old.

The Technical Advisory Group recommended that an Ontario prevention initiative with children be based on a model which included three major characteristics: a) high quality programs, b) integrated programs (integrated across time and across services/resources), and c) local citizen involvement (parents and other community members). This model, referred to as the Better Beginnings, Better Futures Model for Primary Prevention, draws on the “holistic” or “ecological” theory of child development which asserts that children must be viewed in the context of their families and families must be viewed in the context of their community. Therefore, strategies which focus on individual children must be integrated with strategies which improve each part of the environment within which the children spend their time - homes, child care, neighbourhoods, and schools.

The purpose of the present report is to document the development of the Better Beginnings, Better Futures Integrated Model for Primary Prevention (hereafter referred to as the Better Beginnings Model). It is written from the perspectives of the people who played an integral part in the creation of the Better Beginnings Model that was to be demonstrated at sites across the province. The report is divided into two sections. The first, “Early Beginnings”, is a brief sketch of the interest and activities of the Ministry of Community and Social Services in primary prevention. Key events and documents preceding the establishment of the Coordinated Primary Prevention Initiative are described. The second section, “The Process of Developing the Integrated Model” highlights the process by which the Better Beginnings Model was created and the document Better Beginnings, Better Futures: An Integrated Model of Primary Prevention of Emotional and Behavioural Problems (MCSS, 1990) compiled. Interviews with eight members of the Technical Advisory Group (TAG) to the CPPI were conducted.

2.0 EARLY BEGINNINGS

2.1 State of the Art: A Background Paper on Prevention

Shortly after the inauguration of the Children's Services Branch of the Ontario Ministry of Community and Social Services in 1977, State of the Art: A Background Paper on Prevention (MCSS, 1979) was released. This document influenced subsequent MCSS prevention activities. In terms of the Better Beginnings Model, The State of the Art document is notable for its discussion of a number of key themes which resurfaced as elements in the Better Beginnings Model:

- ! multi-disciplinary approaches to the design and implementation of primary prevention initiatives,
- ! a focus on different levels of intervention and evaluation (individual, group, community and society),
- ! a focus on development of programming appropriate to different age groups,
- ! coordination among service and community groups in the planning and implementation of prevention programs,
- ! the importance of evaluation research,
- ! high quality programming, and
- ! focus on high-risk populations.

Particularly interesting in terms of current Better Beginnings, Better Futures activities, is the proposal of a "Scenario for a Community Prevention Program" (MCSS, 1979, pp. 77-86) which details a strategy for implementing a primary prevention program in a community populated by a high percentage of high-risk families. Policy recommendations were also made concerning greater collaboration with local community groups in the design and implementation of prevention programs, and specifically for the assessment of program models in target communities which may prove effective for larger populations.

2.2 MCSS Primary Prevention Demonstration Projects

In the early 1980s, eight primary prevention programs from across Ontario received program assessment awards from the MCSS. These awards were provided to community agencies to assess programs which featured the application of proven prevention strategies in new settings, and the use of existing knowledge in the formulation of a workable prototype, or program model.

Recommendations based on experience gained from the implementation and evaluation of these projects included:

- ! optimizing the fit between perceived community needs and goals and the design of prevention programs
- ! creating linkages among local service providing agencies
- ! allowing sufficient program start-up time
- ! implementing both process and outcome evaluation
- ! measuring of both individual and community level change

2.3 The Coordinated Primary Prevention Initiative (CPPI)

In 1987, The Coordinated Primary Prevention Initiative (CPPI) was mandated to investigate prevention as a policy for the MCSS. Though designed initially to coordinate the activities of several of its own ministerial branches, the CPPI envisioned coordinating its efforts with those of other provincial ministries as well. One of the objectives of this initiative was to evaluate primary prevention models for high-risk communities, and to recommend the best approach for generalization across Ontario. A number of principles were established for the design of this program model including individual and systemic approaches, community-wide programming, community development, valid and reliable evidence of program effectiveness, demonstration of long- and short-term effects and cost-effectiveness, generalizability to other Ontario communities, evaluability, promotion of intra- and inter-ministerial coordination and cooperation. Another design principle was later added to this list, inter-agency/community service coordination and cooperation.

CPPI held a number of consultations soliciting feedback concerning the draft terms of reference, and the formation of an expert Technical Advisory Group (TAG) to CPPI. Following the CPPI consultations, the Technical Advisory Group was convened and began to work toward a comprehensive research and program review, and the development of principles concerning community involvement and research. Based upon the recommendations of the TAG, a program model for primary prevention would be proposed.

2.4 Conclusions

Two consistent themes evident in this review are summarized in this section:

A Generalizable Program Model

Since 1979, the MCSS has been interested in identifying an effective primary prevention program model which could be implemented throughout Ontario. In the 1979 State of the Art document, it was recommended that the MCSS pursue a proven effective program model for use throughout Ontario. The early 1980's program assessment awards were described as less than successful in identifying such an appropriate program model. Thus, an explicit goal assigned to CPPI was to develop and evaluate a model which would be based upon CPPI's design principles, and on the TAG research and program review and recommendations.

Recurrent Features of a Primary Prevention Program Model

From the 1979 State of the Art document to the design principles articulated by CPPI, it is evident that particular features of primary prevention program models have been of interest to the MCSS. Specifically, these program features include: high quality and theoretically sound programs, community involvement, interagency cooperation and collaboration, comprehensive programs, evaluability, and programs which could be implemented throughout Ontario.

Though the Better Beginnings Model should be seen as an outgrowth of earlier MCSS activities and experience, it should not be concluded that the Better Beginnings Model was decided upon prior to the completion of the TAG's work. In fact, the Better Beginnings Model proposed by the TAG differs from CPPI's design principles.

Prior to the development of the Better Beginnings Model, the MCSS had been searching for a generalizable program model to be implemented in local communities. The Better Beginnings Model, however, may be more accurately characterized as a flexible strategy for the design of community primary prevention program models than as a clear, operational model. The Better Beginnings Model makes only limited provisions about the actual program activities to be carried out in communities (e.g. two types of integration). Some confusion concerning the Better Beginnings Model may be due to the manner in which it represents a shift in MCSS thinking about primary prevention away from generalizable program models toward a flexible framework for the design and implementation of primary prevention programs in Ontario.

2.5 Implications

The main implication of the new framework for the Demonstration Project concerns the role communities play. Communities are being asked to implement a model which is of fairly recent origin. Because the model has not yet been implemented, it is difficult to predict the particular difficulties the communities will face in putting it into practice. The practical experiences gained in the effort may provide information which can be used to design a common strategy for implementing primary prevention programs in communities throughout Ontario.

3.0 THE PROCESS

As was made clear in the Better Beginnings, Better Futures document (MCSS, 1989), the TAG review and recommendations were grounded in the goals and principles established by the MCSS, and within the framework of the objectives established by the TAG (p.7). The TAG was mandated to perform two tasks: 1) to provide a comprehensive review of programs and research; and 2) to recommend to the MCSS specifications in order to achieve the goals established for the CPPI. The TAG operated both as a large committee and as five smaller subgroups. Three of these groups were charged with the task of reviewing programs and research pertinent to three age groups: Infant/Pre-Natal, Preschool and School Age children. The other two groups were asked to develop guidelines concerning community involvement and research and evaluation of primary prevention programs. A chairperson was appointed for each subgroup, and each subgroup named a group member to act as a liaison with the other four subgroups. After the reports of the individual subgroups were completed, the entire TAG made recommendations to the CPPI Steering Committee concerning the final program model.

3.1 Methodology for TAG Member Interviews

Eight former TAG members were interviewed for this report, selected so that:

- P all subgroups would be represented (i.e., Pre-Natal/Infant, preschool, School Age, Community Involvement and Research Issues)
- P a variety of professionals would be included
- P both academics and practitioners from different backgrounds were interviewed
- P all were accessible to the interviewer who was based at the University of Guelph.

TAG members were contacted by the interviewer; if they consented to participate, an interview time was set. Before the interview a summary of the questions to be asked was sent. The interviews were designed to clarify the processes through which the TAG had reached its conclusions, and the major issues with which it had grappled. We posed questions about how and why the respondents had been involved, how their subgroups had worked and the issues that arose there, and how the final report had been developed out of the diverse viewpoints arrived at by the subgroups.

At the time of the interview TAG members were asked to sign a consent form. Seven of the TAG members agreed to have the interview audio-taped. Their transcriptions, along with the interviewer's written notes formed the basis for this report.

The interview used for this report underwent several modifications over the course of the actual interviews. Largely these modifications centred on improving the wording and precision of the questions. A few questions were added or deleted from the interview schedule in order to probe more deeply several themes and issues which had emerged in earlier interviews, but which were not foreseen when the interview schedule was initially prepared.

4.0 ISSUES EMERGING IN DISCUSSIONS WITH TAG MEMBERS

A number of issues emerged through interviews with the eight TAG members.

4.1 Issues Relating to the Process Through Which the Work of the TAG Would be Accomplished

Diversity. The TAG was comprised of a mix of academics and researchers, program planners and administrators, educators and government representatives. Most TAG members interviewed for this report commented on the diversity in the TAG membership. These TAG members noted differences in perspectives between the members of TAG, and difficulties in reconciling these diverse points of view. These comments did not seem to convey a scepticism of the utility of convening such a multi-disciplinary group, but rather, a recognition of the difficulties that may be encountered as professionals from diverse backgrounds learn to work collaboratively.

Breaking Down into Subgroups. A few members of the TAG commented on the breakdown of the TAG into subgroups. One noted that this breakdown invited questions about whether compatible reports would be produced by the individual subgroups, while another noted that this process seemed fragmented. Yet, another member expressed faith in the process and in the abilities of the individual members of the various subgroups.

Language and Communication. The TAG members also noted struggles which occurred around language and communication. Sometimes these struggles involved difficulties in reconciling the philosophies and approaches of the various professionals engaged in the process. Time was necessary so that the TAG members could learn and come to appreciate the language and the perspectives of those with other professional experiences. Members of the Community subgroup mentioned difficulties encountered with respect to fully articulating their recommendations. One TAG member noted the challenges inherent in describing the Better Beginnings, Better Futures project in simple language to community members.

Changes in the Direction of the Project. During interviews for this report, the TAG members were asked if they recalled a point in time when the direction or focus of the project changed in some way. Two TAG members noted a shift toward an approach based on the principles of community involvement. Another TAG member noted that, rather than a shift in direction, a broadening of understanding occurred among the members of the TAG such that they began to appreciate the value of the perspectives and contributions of others.

Conclusions

The diversity of the TAG's membership appears to have been its most important characteristic. While this diversity initially invited some difficulties, most notably around the communication of ideas, it seemed to bring to the project a broad and comprehensive perspective that is sometimes absent from other primary prevention programs. Criticisms on the breakdown of the work into subgroups seemed to centre on a desire for more collaboration in order to foster greater appreciation for other perspectives. Thus the TAG process demonstrates that although there may be initial difficulties in multi-disciplinary collaborations, such a process can produce work which is sensitive to a broad range of issues and agendas.

Implications for the Better Beginnings Better Futures Communities

One implication for the Better Beginnings, Better Futures communities centres on the process in which they are currently engaged. This early phase of the project involves a process of collaboration among people of diverse backgrounds in the development and implementation of their program models. At each site, community residents, professionals, and researchers are engaged in this collaborative process, perhaps for the first time. This process must inevitably go through a period where a common language, or frame of reference is created. If the TAG process is a good indication of such a process, it suggests that although this process may be at times conflictual, a spirit of collaboration may result in a program model sensitive to the issues and agendas of all involved in the process.

4.2 Issues Relating to Community Involvement and Research

Community Involvement. The members of the community subgroup interview-ed for this report described the subgroup as being in agreement about the principles they proposed. The prominent role of communities in this project was acceptable to most of the TAG members interviewed for this report, though some expressed some lingering uncertainty over community involvement.

Research. There was some disagreement among the members of the TAG interviewed for this report about the role of research in the project. While one TAG member noted that the effectiveness of primary prevention still needs to be documented, another commented that there has already been much research and that the agenda should move toward direct action. There was also disagreement concerning the role of research in the determination of the project model.

Another issue discussed was the importance of both process and outcome evaluation in this project. One concern that emerged was how to reconcile the requirements of a rigorous outcome evaluation with community involvement in the design of the local programs. Other comments centred on the evaluability of the project due to its size and the ambiguity evident in some of its key concepts (such as integration).

Conclusions

Unresolved issues remain with respect to community involvement and research. All the TAG members agreed that community involvement was integral to the success of these primary prevention projects. However, to some it was not clear how communities were actively going to be involved in these projects and how the process of community involvement would result in high quality programs amenable to rigorous evaluation. Some members of the TAG would have preferred the community subgroup to provide more explicit frameworks for community involvement.

Community subgroup members wanted complete community involvement in the determination of the local program models. They were as much concerned with the process of designing programs as with the actual features of programs. They hoped that such an open and flexible process would lead to programs appropriate for individual communities. Members of the TAG's age subgroups devoted their energies to reviewing research concerning effective programs and were perhaps more sensitive to essential features of high quality programs. Some age subgroup members questioned whether a process of community involvement would result in programs which had in place the features associated with high quality programs.

A similar debate characterized research issues. An early concern within the TAG had to do with whether research concerns would lead or follow from the determination of the program model. The recommendations were that the research protocol whether research concerns would lead to or follow from the program model. Rather than determining the preventive activities in the communities, researchers have been called upon to become partners with communities in the development of programs and research protocols.

A question which remains unanswered, however, is whether the products of such a process, which calls for shared power among researchers and community groups in the definition of the programmatic activities, will ultimately be compatible with the needs of rigorous outcome evaluation research. There was a particular concern about the potential lack of comparability among Better Beginnings, Better Futures programs. While this process of community involvement may have diminished the comparability among projects for the purposes of outcome research, it has certainly highlighted the importance of process evaluation. This unique process of community

involvement, and its accompanying process evaluation, was frequently cited by the TAG members as an important aspect of the project.

Implications for the Better Beginnings Better Futures Communities

The content of these interviews suggests that the Better Beginnings, Better Futures communities need to become aware of the unresolved issues surrounding the model that they are attempting to implement. These issues centre on reconciling the process of community involvement with the initiation of high quality programs and the need for rigorous research.

The TAG members felt that it was important for the communities to participate as full partners in the process of determining the local program model although they were uncertain what the final outcome of such a process would be. This local participation was essential so that the local concerns and needs would be reflected in the final program models.

However, the communities should also be aware that other agendas need to be considered in this process. First, they must recognize that it is hoped that the programs and services that they will initiate will reflect programs grounded in sound theory and incorporate elements that are proven to be effective. Thus the translation of goals into services and programs must be informed by the knowledge of program professionals. It is hoped that neither the community member nor the professional will dominate this process, but that they will collaborate and educate one another toward the fulfilment of shared goals.

Communities should also be aware of the important role of research in this project, and how research will be called upon to demonstrate effective practices for use throughout Ontario. The TAG members were concerned about whether the local program models created through the involvement of communities would be amenable to rigorous evaluation. Both researchers and community members need to work collaboratively to develop research protocols that will provide solid evidence of program effectiveness but still remain sensitive to the local community context.

4.3 The Better Beginnings Model

The Process of Formulating Recommendations for the Final Model. Some TAG members noted that when the TAG began to meet as a full committee to hear reports of work in the

subgroups, there was some conflict. A number of TAG members attributed this conflict to the age groups' concerns that their findings be reflected in the final model. Most TAG members, however, indicated that the final model did reflect a consensus of the TAG group.

Impressions of the Better Beginnings Model. The TAG members were satisfied that the Better Beginnings Model was a fair representation of the TAG work. One member expressed uncertainty, however, over the contributions of the TAG to the final model compared to issues advanced by MCSS. A common theme in the interviews was the ambiguous nature of the Better Beginnings Model. One TAG member noted that the model had to be flexible enough to accommodate the unique needs and qualities of individual communities. Another member suggested that a flexible model may have been called for in the TAG mandate, while others were concerned with the model's lack of clarity.

Integration. The integrated component of the final model was frequently commented upon during interviews for this report. To one member of the TAG, the integrated aspect of the project was evident prior to his involvement and motivated him to become involved in the project. However, for some there was a lack of clarity and some lingering confusion over the two meanings of integration expressed in the model.

1. Interagency Integration

Of the two meanings of integration, interagency integration appeared to be better understood. According to one TAG member, interagency integration was a theme which emerged in one subgroup's review. Though conceptually this notion of integration appealed to the TAG members, some were unsure of the shape this notion of integration would take in practice.

2. Systemic Integration Across Age Groups

Although for some TAG members this second meaning of integration was initially puzzling, they suggested that it was appropriate considering other recommendations such as a long-term interventions which would cut across developmental periods, comprehensive programming and the ecological perspective. Other TAG members saw this notion of integration as a compromise between the age subgroups, since each wanted to see its age group of interest reflected in the final model.

Ecological Perspective. The TAG members appeared to be united in advocating the model's ecological perspective. It was identified as a unique and distinctive feature of the Better Beginnings, Better Futures Model. The ecological perspective was not only advocated in some of

the research reviewed, but also was seen as providing a framework which could accommodate the differing perspectives of the various TAG members.

Universal versus High-risk Approaches. The TAG members had differing views of the merits of universal and high-risk approaches. Despite the Better Beginnings, Better Futures assertion of the necessity to move away from exclusively high-risk approaches, one TAG member clearly felt that Better Beginnings communities would reflect the characteristics of high-risk communities as suggested by the Ontario Child Health Study. One TAG member remarked that universal access to programs might present some difficulties for the evaluation of these programs. It appears that this topic may not have been completely resolved and that elements of both approaches are evident in the Better Beginnings, Better Futures model.

High Quality Programs. There was diversity in TAG member opinions about what constituted quality in programs. An early and consistent concern of MCSS was to base its primary prevention activities on sound theory, solid evidence of effectiveness, and program experience. This concern was shared by a number of the TAG members as well. One TAG member suggested that there was agreement on what constituted quality in programs. Another TAG member suggested that within the TAG there was less of a focus on the features of high quality programs, and more on how individual programs would fit into the existing structure of the community. A final concern with respect to high quality programs had to do with the relationship between high quality programs and community ownership of programs. Specifically, there was a concern about how community groups would develop quality programs without some formal knowledge and professional experience with quality programs.

Conclusions

The process through which the TAG carried out its work influenced the design of the Better Beginnings Model. First, it is clear that some members of the TAG believed that one meaning of integration was introduced in order to reduce conflict between the three age groups. Second, the ecological perspective was selected as a framework which enabled the various professional orientations to be incorporated into the model. Both integration and the ecological

perspective were also supported by the TAG literature review, and were consistent with other features of the Better Beginnings Model.

Most of the TAG members were unsure what the integration of services would look like in practice and the meaning of integration was considered to be ambiguous. Although the ecological perspective was frequently mentioned in these interviews, it remains unclear how the ecological perspective would be expressed in actual programs and services. The meaning of ecological, itself, also remains somewhat ambiguous.

Some tensions remain concerning high-risk and universal approaches. It appears that the focus within the MCSS is shifting away from high-risk approaches toward more universal approaches. Better Beginnings, Better Futures appears to value universal programs within high-risk communities. There remain differences of opinion concerning high quality programs. Some TAG members worried that the important features of quality programs might not be recognized and implemented - either due to the communities' lack of knowledge concerning the features of quality programs or due to lack of funds to fully implement all required components of the model, or to provide sufficient services.

Implications for the Better Beginnings Better Futures Communities

The main implication to be drawn from this section of the report is that the Better Beginnings Model is very complex. Additional issues not discussed here will be understood or confronted only through attempts to implement and work with the model. Communities experiencing frustration in implementing this model should take some comfort in knowing that even those who were involved in formulating the model find some elements confusing and are unsure how the model will work in practice. Concepts such as the integration of programs and services appealed to members of the TAG, and were supported by their literature review, but some still wonder how this integration will look in practice.

5.0 GENERAL CONCLUSIONS

This report had two goals: 1) to document the roots of the Better Beginnings Model in previous MCSS prevention activities; and 2) to highlight some themes which emerged in

discussions with members of the Technical Advisory Group to the Coordinated Primary Prevention Initiative. With respect to this first goal, it can be said that previous MCSS activity in the area of prevention was influential in helping to shape the final Better Beginnings Model. It is equally clear that the TAG work was influential in clarifying and modifying directions for the MCSS.

With respect to the second goal, the incorporation of certain elements of the Better Beginnings Model not only resulted from the TAG's five independent literature and program reviews, but also by the character of the TAG multi-disciplinary membership. Although there was consensus among these TAG members about the basic directions of the Better Beginnings Model and most of its features, there were some unresolved issues and some lingering confusion. These ambiguities need to be monitored, in light of the efforts of the Better Beginnings, Better Futures communities currently implementing this Better Beginnings Model.

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