

# Evaluation of the Preparing for Life Irish Early Intervention Programme

11<sup>th</sup> July 2012



**preparing for life**  
Early Childhood Intervention



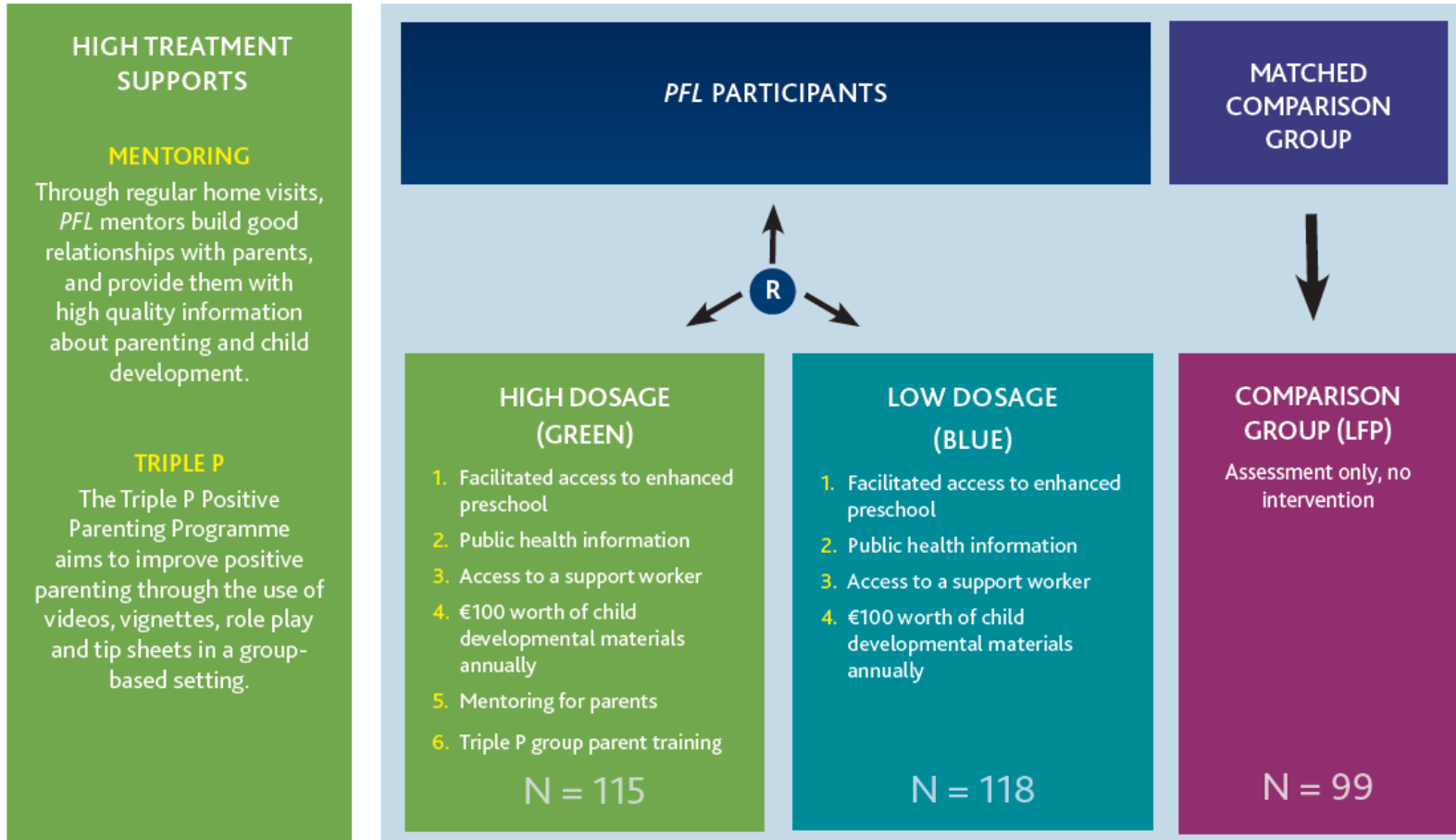
# *Preparing for Life Programme*



- One of the first experimental early childhood intervention in Ireland
- Funded by Irish Government (DCYA) & The Atlantic Philanthropies and operated by Northside Partnership in Dublin
- **Aim:** Improve levels of school readiness by assisting parents in developing skills to prepare their children for school
- **Duration:** Pregnancy until school entry (age 4/5)
- **Evaluation:** Randomised Control Trial design



# Design of *Preparing for Life*





# PFL Evaluation



## Impact Evaluation

- **Data collection:** Pre-intervention (baseline), 3 mnts (WASI), 6mths, 12mths, 18mths, 24mths, 3yrs, 3.5yrs, 4yrs
- **Informant:** Mother is the primary informant, but also fathers, child, other independent data sources (birth records)

## Implementation Evaluation

- **Aim:** Delve into the blackbox of programme effectiveness & evaluate fidelity to the PFL model
- **Data collection:**
  1. Implementation data on the Database Management System
  2. Focus groups with participants
  3. Semi-structured interviews with mentors/IO

# + Recruitment & Baseline Assessment



## ■ Recruitment:

- Cohort of pregnant women residing in *PFL* catchment area between Jan 2008-August 2010
- Population-based recruitment rate, *based on all live births during the recruitment phase*, was **52%**

## ■ Randomisation: Unconditional probability randomisation strategy

- 115 allocated to **High** treatment group
- 118 allocated to **Low** treatment group

## ■ Baseline assessment:

- No statistical differences between the high treatment group and low treatment group on 119/123 measures (97%)
- No statistical differences between the *PFL* group and the Comparison group on 86/114 measures (75%)

# + Summary of 6 month results

- A few significant differences identified (23/160 =14%)

## PARENTING

More appropriate child eating patterns

Higher immunization rates

More and higher quality parent-child interactions

Less parental hostility

## HOME ENVIRONMENT AND SAFETY

Safer home environment

Higher quality home environment

More appropriate learning materials and childcare

## MATERNAL HEALTH AND PREGNANCY

Less maternal hospitalisations after birth

Lower parental stress

## SOCIAL SUPPORT

Mothers more likely to be socially connected to their family and community

- Majority of the results for High V's Low are in hypothesized direction
- In line with other home visiting programmes