Developing an Evidence-Based Rationale for a Children's Zone Approach

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Abstract: The Harlem Children's Zone (HCZ) is arguably one of the most extensive extended education approaches established to date. It has sought to create a seamless programme of support for children living in Harlem, from birth to early adulthood, in family, school and community settings. The evidence on HCZ's impacts is limited, but its approach nonetheless has many proponents internationally, who see it as a means to further an extended education agenda. In this paper, given the lack of robust evidence on HCZ, we seek to advance an evidence-based rationale for adopting a 'children's zone' approach. We conclude it may have the potential to achieve greater impacts than more limited school-led approaches to extended education.

Keywords: Harlem Children's Zone, extended services, research evidence

1   Introduction

With a focus on the Harlem Children's Zone (HCZ) in New York (see www.hcz.org), in this paper we raise strategic questions for scholars and policy makers internationally about the scope and scale of extended education initiatives. HCZ is given specific attention for two reasons. Firstly, it is arguably one of the most extensive extended education approaches to be established anywhere to date. It focuses intensively on a specific neighbourhood and seeks to provide seamless support for children from birth to early adulthood, and across all the contexts in which they learn and develop. In its target neighbourhood, HCZ runs its own kindergartens and charter schools called 'Promise Academies', which also have an extended education offer. It also runs an extensive range of family and community programmes, addressing issues from foster care prevention, to diet and nutrition, community safety, and housing (see www.hcz.org for a full list of programmes).

Secondly, HCZ's influence extends far beyond its target area. Its approach is being rolled out across the US through federally-funded Promise Neighborhoods[1] and internationally, it has been seen as a way of furthering existing approaches to addressing the link between poor educational outcomes and disadvantage (see for instance, Edgar 2010). In England, leading national charities including Save the

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[1]   See https://www2.ed.gov/programs/promiseneighborhoods/index.html?exp=0.

Children are in the process of setting up pilot 'zones' (Dyson et al 2012) and HCZ's approach has also been advocated in working papers commissioned by Ofsted – England's national school inspectorate (Mongon 2013). In Hungary, links to HCZ appear even closer; as Martin (2010) reports:

With the help of the US government, Hungary is hoping that it will be able to replicate the HCZ's success by applying the program as its own aptly-named Rising Kids Zone designed to empower Roma youngsters.

Dobbie/Fryer (2010, p.2) also note '…Israel, the Netherlands, Uganda and South Africa are developing plans similar to the HCZ model'.

What is particularly notable about this is that HCZ is stimulating debate and informing wider action, despite limited evidence of its ability to achieve impacts. As Hanson (2013) explains:

The Zone is still relatively new…so drawing firm conclusions from the available data is difficult. Some programs have simply not operated long enough for their lasting impact on student achievement or the community as a whole to be evaluated adequately, and some are not easily evaluated due to their novel structures.

Furthermore, while data from HCZ's schools are readily available, data on its community programmes are lacking. This has led to calls for more extensive evaluation of HCZ before its approach is adopted elsewhere (Whitehurst/Croft 2010). It is, however, not always possible for policy makers and practitioners to wait for research to catch up with the need to find new ways of tackling disadvantage and poor educational outcomes – and given some of the evaluative challenges indicated above, the wait for evidence in relation to HCZ could be considerable.

Our view is that in the absence of an overarching evaluation of HCZ, it should nonetheless be possible to explore whether a children's zone approach ought to achieve better outcomes for disadvantaged children. The key to this is to examine the rationale underpinning a children's zone approach and to consider whether there is sufficient evidence to suggest that, by acting on this, it is both possible and likely to achieve better outcomes.

As such, this paper sets out to develop an evidence-based rationale for a children's zone approach. To do so, firstly, we will situate HCZ's approach in the wider field of extended education to explore its potential for impact in comparison to other extended education approaches. Secondly, we will unpack some of the core assumptions on which a children's zone approach rests – namely, that interventions are required, simultaneously, in school, family, and neighbourhood contexts; that interventions in one aspect of a child's life can have positive impacts on other aspects; and that interventions can have more powerful effects if used in combination. In doing so, we will seek to establish whether there is sufficient evidence to support these assumptions, and will draw on: i) evidence that there is a relationship between disadvantage, place and educational outcomes; ii) evidence that aspects of this relationship can indeed be disturbed through currently available interventions, and iii) evidence that these interventions are more powerful in combination than in isolation.

To be clear, we are not setting out to present a comprehensive review of the research on the wide range of interventions a children's zone approach might employ. Rather we are setting out to explore whether a children's zone approach ought, in principle, to 'work'. In doing so, this paper has an important contribution to make

to international debates on extended education by considering if the wider use of a children's zone approach appears justified.

2   Locating HCZ in the Field of Extended Education

As *Ecarius et al.* (2013) note, internationally, there is a common expectation that extended education will bring about:

Improvements in the scholastic support of lower as well as higher achieving students…a better utilisation of the educational potential of all social classes, a reduction in social inequalities in acquiring education… (p. 7)

They go on to note that:

In almost all countries not only educational policy arguments, but also questions of the employment market and family policy, play an essential role in the justification of out-of-school programmes and activities. (p. 8)

As this indicates, there is a widespread belief that extended education is necessary to tackle social inequalities and requires some engagement with contexts outside school. It also suggests a focus on addressing the impacts of socio-economic disadvantage on educational outcomes. In England, for example, the creation of a national, school-led 'extended offer', was seen as a way of addressing the impacts of social factors (poor family support, low incomes, poor living conditions and a lack of access to opportunities) on outcomes in education, and health and employment (*DfES 2005*). To achieve this, extended schools were required to provide: extra-curricular opportunities for children; parenting support and childcare provision; adult and community leisure and learning opportunities; and improved access to specialist services. Similar approaches have been pursued in other administrations, for example, as 'SchoolsPlus' in Saskatchewan (*Tymchak 2001*) and 'Full Service Schools' in South Africa (*Department of Education, Republic of South Africa 2005*).

HCZ, like such school-led initiatives, is committed to tackling inequalities. However, it differs fundamentally by pursuing a comprehensive area-based strategy. In his 2007 speech 'Changing the Odds for Urban America', President Obama summarised the rationale behind this:

If poverty is a disease that infects an entire community in the form of unemployment and violence; failing schools and broken homes, then we can't just treat those symptoms in isolation. We have to heal that entire community. And we have to focus on what actually works... We know Harlem Children's Zone works.

Distinctively, while HCZ involves schools as a key element of its strategy, it is not based on or led by schools. Rather, it operates as an independent charitable foundation focusing on an approximately 100 block area of Harlem. The resident population is predominantly low-income black families, and HCZ provides them with access to an interlocking network of education, health, family, and social welfare services. These are not simply 'add on' out-of-hours opportunities as in the English model of extended schools. Rather, HCZ has a long-term strategic plan for transforming its target community. Firstly, it is developing a 'seamless pipeline' of sup-

port for children at every stage of their schooling: from parenting support for 0-3 year olds, to high quality kindergarten programmes, to Promise Academy schools, to programmes to support transition to employment and college entry. Secondly, throughout their schooling, HCZ aims to support children in out-of-school contexts. As such, it runs family and community programs intended to support positive outcomes across a wide range of domains – health, education, housing, employment. (Throughout, we will use the term 'doubly holistic' to capture this dual strategy, as it is holistic both in addressing a child's whole school career, and school, family and community contexts.)

In taking this approach, HCZ is setting out to make much more than the modest improvements in outcomes typically associated with extended schools (see *Cummings/Dyson/Todd 2011*). Ultimately, it is aiming to change the culture of its target neighbourhood, so that it reaches a 'tipping point' where 'children are surrounded by an enriching environment of college-oriented peers and supportive adults, a counter to "the street" and a toxic popular culture' (http://www.hcz.org/about-us/the-hcz-project). In principle, therefore, HCZ should be well placed to address some of the known limitations of school-led extended education. These include: the limited positive impacts of extended activities at school and community levels (*Cummings/Dyson/Todd 2011*); and a tendency for schools to remain narrowly focused on teaching and learning, and on making short-term gains in attainment, without also seeking to address the underlying causes of poor outcomes, or to engage with wider social agendas (*Ainscow et al. 2008, Dyson 2008*).

HCZ's approach therefore appears to have considerable potential. To explore this more fully, we will now turn to consider whether an evidence-based rationale can be advanced in support of a children's zone approach.

3   Building Rationale for a Children's Zone Approach

In building a rationale for a children's zone approach, we start by considering two of the central assumptions on which HCZ is based – namely that to improve children's outcomes it is necessary to:

 (i) acknowledge the importance of family, school and neighbourhood contexts; understand how these interact to shape children's lives; and to intervene in these contexts to strengthen those factors which help children to do well, and offset those which put them at risk of doing badly.
(ii) adopt an explicitly spatial framing. This assumes that where children live is important in shaping their outcomes – not just their individual and family circumstances.

Taking these in turn, below we consider whether they present a plausible basis for action.

Intervening in the Relationship between Disadvantage and Poor Outcomes

There is a strong evidence base which shows that children and young people experiencing socio-economic disadvantage, tend, as a group, to do less well than their more advantaged peers – both over time and in relation to a wide range of outcomes (*OECD 2008*). But while the link between socio-economic disadvantage and poor outcomes is unequivocal, it seems unlikely that one causes the other in any simple way. Instead, research evidence points to mediating factors which, in the ways in which they influence people's lives, seem likely to link the two. These factors may include: a lack of material resources, parental attitudes and behaviours, children's own attitudes and behaviours, access to good schools, the characteristics of the neighbourhoods where children live, and parents' levels of education (*Chowdry/Crawford/Goodman 2009*).

While the causal links between these factors and their relative contributions to poor outcomes are not yet clearly understood, there are nonetheless conceptual frameworks which can be drawn on to help make sense of this complexity. These can be advanced as part of a theoretical rationale for a children's zone approach. One such model is Bronfenbrenner's 'ecological systems theory' (*Bronfenbrenner 1979*) which sees the child as interacting with a series of 'systems' – the family, the school, the neighbourhood, and the wider social and cultural context in which these are located, and the links between these different levels and contexts. Together these systems can be considered to form a 'social-ecology' which influences the child's outcomes (*Crowson 2001*). These different 'systems' may influence the child directly, but they can also have an indirect influence as one system interacts with another.

From this perspective, it cannot simply be said that the family 'causes' the child to do better or worse, or that schools 'produce' educational outcomes. Rather, each system plays its part – some with powerful direct effects, some with weaker and more indirect effects. Understanding the social-ecology in which children's lives are embedded, and the complex interactions between the different systems within these ecologies, therefore becomes central to explaining outcomes. Finding ways to intervene effectively in these interactions then becomes central to improving outcomes.

A second powerful theoretical framework explores factors in social-ecologies linked to 'risk', 'protection' and 'resilience' (*Schoon 2006*). This has often been used to understand why some individuals do better than would be expected given their background, and is concerned to identify factors in people's lives which: (i) lead to an increased risk of poor outcomes; (ii) can offset risks and protect against poor outcomes; and (iii) can be strengthened to promote resilience to potential risks. Lifecourse studies, for instance, have traced associations between the outcomes achieved by individuals and groups, and various factors in their family and social backgrounds. For example, in discussing the factors affecting children's outcomes, *Siraj-Blatchford et al.* (2011) draw attention to the importance of: encountering supportive schools and teachers, accessing enriching extra-curricular activities, and parents who are able actively to 'cultivate' their children's learning by accessing high-quality pre-school provision. They go on to argue:

it is never 'just' the one factor of child, family or school, or broader social context that brings about success or failure in an academic trajectory. Rather, it appears to be the particular eco-

logical niches that arise through the active reciprocal interactions between these factors that determine the parameters for children's pathways to academic success. (p. 71)

This has two important implications: firstly, that poor outcomes are not an inevitable consequence of disadvantage; and secondly, that it is possible to develop interventions which can reduce risks in children's social-ecologies and strengthen the protective factors which help them to be resilient to those risks. In principle at least, children's ecologies could be changed to improve the chances of their doing well, by strengthening families, improving schools, enhancing access to supportive adults, developing better health provision and so on. A children's zone approach suggests it might be possible to achieve this strategically and at scale by drawing together an ecological understanding of how outcomes arise, with a risk and resilience framework. Rather than simply addressing specific issues within specific aspects of children's lives, it suggests that a 'seamless' programme of interventions can be developed to address multiple factors in the interacting family, school and neighbourhood contexts, which make up a child's social-ecology.

The Importance of Neighbourhood Contexts

Where a child lives, and the neighbourhood 'system' they experience, are particularly important in a children's zone approach. Although children experiencing socio-economic disadvantage tend to do worse regardless of where they live, 'place' also plays a role in shaping their experiences and outcomes. There are particular places where poor families appear in particularly high concentrations (*Dorling/Pritchard 2010*) and emerging evidence to suggest that such concentrations may create 'neighbourhood effects' which compound the disadvantages people experience, as different places may attract different populations, services, reputations, and employment and leisure opportunities (see *van Ham et al. 2012*).

In-depth studies have also repeatedly found that experiences of living in areas that appear to be similarly disadvantaged are in fact markedly different. For instance, *Kintrea et al.* (2011) found that young people's aspirations were shaped significantly by a wide range of characteristics in their neighbourhoods, rather than simply by the level of disadvantage. This led them to conclude: 'places with a shared status of deprivation can be quite different in their social make-up and the way that this plays out in the life experiences of residents' (p. 7). One implication of such studies is that to improve children's outcomes in disadvantaged neighbourhoods, it is necessary to intervene in neighbourhood dynamics as these form an integral element of children's social-ecologies. It also suggests that standard policies and standard interventions are not always appropriate for different places, and some strategies to tackle the impacts of disadvantage on educational and wider outcomes may need to be developed on a place-by-place basis.

This forms a second important part of the rationale for a children's zone approach. It suggests that interventions in children's social-ecologies must also be interventions in particular places. This is because to offset the risks children face, and to build their resilience, it is necessary to engage with the factors and processes which operate in particular places to generate poor outcomes.

4   Considering Indicative Evidence Around Impact

While there is a strong rationale for a zone's neighbourhood focus and its emphasis on intervening in school, family and community contexts, a children's zone approach must also be able to demonstrate that it has the potential to impact significantly on outcomes. To identify the full range of impacts a children's zone might have is a complex task, and needs to consider:

• the impacts of any single-issue interventions a zone uses to address 'risk factors' within a child's social-ecology
• the interactions between different interventions and outcomes
• a zone's impacts on children (with different experiences of 'risk' factors)
• a zone's impacts on different systems in children's social-ecologies – i.e. their families, schools, and communities.

In order to consider all of these points, in the following sections, we will draw on a wide range of evidence. For instance, there is already a considerable body of knowledge on single issue interventions (see, for example, Higgins et al's review of effective interventions to raise the attainment of low attaining students), out-of-hours programmes (Afterschool Alliance 2013) and extended schools (Cummings/Dyson/Todd 2011). To supplement this, we have also searched specifically for evaluative reports on initiatives – in addition to HCZ – which are: area-based; have multiple strands of action attempting to improve a range of outcomes simultaneously; have explicitly employed strategies to improve children's outcomes, including educational outcomes; have had sufficient time to at least begin to become embedded in practice; and have been subject to (relatively robust) evaluation. We have focused primarily on: (i) the UK, where, as we have previously reported (Dyson et al. 2012), the emphasis on extended schools and nationally-mandated area-based strategies has supported the emergence of 'zone like' approaches; and (ii) the U.S., where, in addition to HCZ and Promise Neighborhoods, there are other high profile initiatives, for instance, the Chicago Community Schools Initiative and City Connects.

By searching academic publication databases including ERIC and the British Education Index, we identified 39 evaluative reports relating to 12 different initiatives. We also searched wider 'grey literatures' where, for instance, evaluative findings have been included in reports to trustees. For each initiative identified, we produced a summary detailing: evidence for outcomes (from separate activities within the initiative and from the interaction of different activities); any explanation of how these outcomes were produced; and any details of the evaluation methodology used. Although the number of 'zone-like' initiatives we identified is modest, it is worth restating that our purpose in this paper is to consider the rationale for a children's zone approach and whether there is sufficient evidence to support this. As such, these studies form an important – if not widely reported – part of a much larger body of evidence and experience relating to different aspects of a children's zone approach.

We will now turn to explore the possibility and likelihood of a children's zone's approach achieving positive impacts on outcomes. We will begin with what is known about ways of improving individual outcomes through single-issue interventions, and build up step-by-step to what is known from the initiatives we have reviewed for this paper, which share some of the complexities of a children's zone approach.

'Standalone' Single-Issue Interventions

The rationale underpinning a children's zone approach suggests that to be effective, zones will need to offset 'risk' factors, and strengthen those protective factors in a child's social-ecology which can promote their resilience. It is therefore important that initiatives following a children's zone approach seek to identify effective interventions which can impact positively on these particular factors. A considerable evidence-base already exists on the effectiveness of many 'standalone' single-issue interventions – i.e. interventions used to target short-to-medium term outcomes in a single aspect of a child's life. For instance, there is good evidence on the effectiveness of different parenting support programmes (Moran et al., 2004), of approaches to health promotion in schools (Stewart-Brown, 2006), and of interventions to develop speech language and communication skills (Law et al., 2012).

On one level, this suggests that a children's zone approach could achieve a wide range of positive impacts simply by bringing together a range of high quality interventions to address particular 'risk' and 'resilience-building' factors in children's social-ecologies. However, the situation is more complex than this, not least because there are known limitations to single-issue initiatives. These include the 'fade out' of gains over time, the fact that interventions may not 'work' equally well in different contexts, and the destabilising situation – not least in terms of 'initiative overload' and of contradictory goals – which can result if multiple uncoordinated interventions are introduced into an area (see, for example, *Ainscow et al. 2008*). Most importantly perhaps, while standalone interventions are typically aimed at single outcomes and implemented and evaluated in well-controlled conditions, this is unlikely to be the case when trying to intervene in complex social-ecologies. Rather, an ecological understanding suggests that tackling problems one at a time is likely to be ineffective because other negative aspects in children's ecologies may undermine any gains. It may be that if a children's zone approach is able to employ interventions strategically to engage with the complex, open and interrelated nature of children's ecologies, that some of the known limitations of single-issue interventions could be overcome.

Transferred Outcomes

In seeking to engage with the complex nature of children's social-ecologies, a zone approach anticipates that particular outcomes in one aspect of a child's life can influence their outcomes in other aspects. It is therefore important to establish whether interventions aimed at particular aspects of children's lives can indeed generate 'transferred' outcomes – i.e. outcomes in aspects of children's lives that are not the immediate target of the intervention, and which may be achieved over a much longer time scale than the duration of the intervention itself.

Some forms of transfer are straightforward. For instance, HCZ has an asthma initiative with the primary aim of improving health outcomes for children with the condition. However, in addition, the initiative has been found to improve school attendance for its target group (*Nicholas et al., 2005*), which, in turn, seems likely to support improvements in attainment. In the same way, programmes of 'out-of-hours' activities can enrich pupils' experiences and offer them an alternative to potentially more risky activities outside school. Meta-analyses suggest they can achieve a wide

range of positive outcomes including improvements in: school attendance, engagement in learning, attainment, health, and even in parents' attendance at work (*After-school Alliance 2013*).

Other studies have explored 'transfer' over longer time periods. For instance, Huang et al. (2011), in evaluating the long established LA's BEST program (a structured programme of afterschool homework help, extra-curricular activities, nutrition, and access to supportive adults; see Huang in this issue) were also able to demonstrate a link with school completion. They noted 'students who had participated in the program for three or more years had significantly lower [school] drop-out rates than the non-participant comparison group' (Huang et al. 2011, p. 18), with higher levels of participation leading to greater reductions in the risk of drop-out.

There is further evidence that an intervention which produces positive outcomes at one point in a child's life can lay the basis for positive outcomes later on. For instance, the High/Scope study (see *Schweinhart et al. 2005)* has found that a relatively brief exposure to high-quality pre-school provision, with fairly modest outcomes at the time, continues to bring benefits throughout childhood and adolescence, and on into adulthood, in terms of higher achievement, better employment prospects, and reduced criminality amongst other outcomes. Similarly, the Effective Pre-School, Primary and Secondary Education Project (EPPSE 3-14) in England is finding that the effects of high-quality pre-school provision last into adolescence, and can be found both in terms of higher academic attainments and better social and behavioural outcomes (*Sylva et al. 2012*).

While it seems improbable that what happens in pre-school has a direct impact some 10 or 20 years later, it is possible that there is an indirect, cumulative impact, and that children who achieve good outcomes in early years contexts are then able to take greater advantage of the next and each subsequent set of educational experiences. This suggests that the effect of multiple interventions is not necessarily an additive one, where a series of interventions, working in isolation from each other, each add a little more to the final outcome. Instead, there are likely to be interactions between interventions, with one enhancing or diminishing the contribution made by another. For example, a longitudinal study of schooling in Chicago (*Bryk et al. 2010*) has found that there are better outcomes for children in schools which have a set of strong 'supports' (including leadership, a focus on learning and ambitious teaching, and community engagement). However, each of the supports does not simply add an amount to pupils' outcomes. Rather, it creates conditions under which the other supports can have maximum effect, so that schools with all the supports present tend to do particularly well, whilst schools with weakness in two or more of the supports tend to do badly.

Multi-Strand Interventions

The notion of 'transferred' outcomes indicates the importance of multi-strand interventions in which one strand of intervention can facilitate and build upon others – even if their precise contributions cannot be determined. It also recognises that different outcomes in different domains – health, education, employment, and so on – are interrelated. Therefore, we also want to consider evidence from interventions with multiple strands of activity.

One example noted earlier is the Full Service Extended Schools (FSES) initiative in England which encouraged schools serving highly disadvantaged areas to develop wide-ranging approaches to supporting students, their families and local communities. The initiative was subject to rigorous national evaluation over a three year period, which included statistical analyses using national pupil-level data and a survey of all FSES nationally; and in-depth school case studies of FSES and brief comparator case studies of non-participating schools (Cummings et al. 2007). Although only small impacts on overall levels of academic attainment in the schools were found, there were important – even transformational – impacts on individual children, adults and families who experienced the greatest disadvantages and were therefore the target of schools' activities. These impacts took the form of retention in education, higher achievement, increased family stability, and the re-engagement of adults with learning and employment.

There are other school-focussed initiatives which, whilst not quite adopting the holistic approach of a children's zone, nonetheless suggest that such approaches might be effective. 'City Connects', for instance, is an initiative in Boston MA which identifies children and young people 'at risk' in schools and then links them to a customised package of services. These might include sports and physical activity, health and wellness curricula, arts enrichment programmes, academic support, family support and counselling. There is evidence of the effects of these services on health-related knowledge and behaviour (*Boston College Center for Child Family and Community Partnerships 2009; Boston College Center for Optimized Student Support 2011*). There is also evidence for positive impacts on attainment, well-being, behaviour, attendance and drop-out reduction as well as on school climate and teachers' practice (*Boston College Center for Child Family and Community Partnerships 2009; Boston College Center for Optimized Student Support 2011, 2012; City Connects 2011*). The reported improvements are impressive – with claims, for instance, that students perform at or about state benchmark levels, despite their disadvantaged backgrounds – and appear doubly so, given that the greatest gains are claimed to accrue to those who experience the greatest disadvantages.

'Redwood City 2020' in California is even closer to a children's zone model, since it brings together a range of local organisations, including but not restricted to schools, to pursue a wide range of outcomes for children. Although the literature search strategy revealed no publicly available, substantial evaluation of the initiative as a whole, there has been some research on the work of its: community schools (*Castrechini/London 2012*), youth development services (*John W Gardner Center 2011*), and mental health services (*John W Gardner Center 2008*). Again, the findings are encouraging, with evidence for positive impacts on targeted outcomes, including attainment, well-being and health-related behaviours. Moreover, there is indicative evidence of the kind of 'transfer' outlined above, with, for instance, greater gains in attainment by users of mental health services than by their peers, and with community school approaches being associated not only with higher attainment, but also with greater affiliation to school, increased motivation and greater confidence.

Overall, then, there is a body of evidence which indicates that multi-strand initiatives, with many similarities to a children's zone approach, can produce improvements across a range of outcomes for children. Furthermore, it suggests that impacts come not simply from the direct effects of the individual strands of intervention, but from interaction between those strands.

Evidence from the Harlem Children's Zone

Whilst the evidence from multi-strand interventions is encouraging, none of the interventions referred to above could claim to be taking a fully-fledged children's zone approach. Some, for instance, are school-based, and have limited engagement with the wider range of contexts which make up children's social-ecologies, and some focus on only part of the childhood years.

Similarly, some of the evaluations tend to be limited by focusing only on school-related outcomes, or on particular strands of action within a more wide-ranging initiative. These limitations are, however, also reflected in evaluations of HCZ to date, and as noted earlier, there has yet to be an overarching evaluation of the zone's activities.

Nonetheless, there is some evidence that HCZ has achieved important outcomes. HCZ's own internal monitoring processes identify improvements in health outcomes, parenting practices, school readiness, and levels of educational attainment and participation (HCZ 2011). In addition, there have been two independent evaluations focusing on academic attainment (Dobbie/Fryer 2010, 2011, Whitehurst/Croft 2010). Both have tested HCZ's assumption that strong and effective schools *and* strong and effective family and community support services, are need to overcome the impacts of disadvantage on education. In doing so, they have explored whether children who engage in HCZ's full range of services have higher attainment than those who do not.

Dobbie and Fryer compared groups of students with varying levels of access to different elements of HCZ's provision. They compared outcomes for students living in HCZ's target area who attended its Promise Academies, and those who attended other schools. They also compared outcomes for Promise Academy students living in the zone, who could access its full range of family and community services, and those living outside the zone, who could not. They found notable impacts on academic outcomes, concluding that HCZ's Promise Academies were 'effective at increasing the achievement of the poorest minority children' and could even 'close the black-white achievement gap in mathematics' (Dobbie/Fryer 2011, p. 158).

Whitehurst and Croft compared the effectiveness of HCZ's longest established Promise Academy relative to other New York City (NYC) charter schools with similar populations. Like Dobbie/Fryer they found notable gains in academic attainment, with students at the Promise Academy having higher attainments than would typically be expected given their backgrounds.

However, whereas some of the studies cited in the previous section identified some important 'transfer' effects, both studies of HCZ have concluded that educational outcomes are attributable to the improvements in HCZ's schools, rather than to the range of other interventions it deploys. Whitehurst/Croft found the Promise Academy they studied was only mid-ranking among NYC's charter schools, and those with a strong school-centric approach were the highest attaining. This led them to question whether HCZ's holistic neighbourhood approach is necessary. Similarly, Dobbie/Fryer found little evidence of a link between access to the Zone's wider provision and academic attainment. They argue that both school improvement and wider area interventions produce positive outcomes, and that ideally both are needed, but that one does not significantly enhance the other (*Fryer/Katz 2013*).

In these circumstances, the lack of a comprehensive evaluation does not help, since it is not clear whether the negative findings are due to an absence of transfer effects – which seems improbable – or to the evaluation methodology being too narrowly-focused, time-limited, and lacking the necessary data to find them. It is also possible that comparator children receive services from elsewhere, or that many of the Zone's children do not receive a full set of additional services, or that the effects of these additional services are felt strongly only by particular groups of children, and that they may be felt most strongly in other domains, taking time to show any impact on educational outcomes. These issues cannot be resolved without further evaluative efforts. Nonetheless, it does appear that there are a range of positive impacts which can be attributed directly to HCZ's intervention, even if the causal mechanisms at work are uncertain.

5   Concluding Comments: Is There a Case for Promoting a Children's Zone Approach?

As we noted at the start of this paper, HCZ has attracted international attention for its 'doubly holistic' approach to improving children's outcomes in a highly disadvantaged neighbourhood. With its area-based focus, which includes but is not restricted to or led by schools, it appears to be in a position to develop a comprehensive strategy to address the needs of all the children in the neighbourhood from birth to early adulthood. Compared even to the most wide ranging and well-developed school-based extended education, the children's zone model has the potential to achieve impacts at a greater scale and possibly across a wider range of outcomes.

If there were robust, unequivocal evaluative data to support this claim, there would be no doubting the rationale for pursuing a children's zone approach. However, the evidence base on HCZ is insufficient for this purpose, and a weakness in the field of extended education more generally has been the lack of a robust evidence base *(Cummings/Dyson/Todd 2011)*. There is a pressing need for an overarching evaluation of HCZ which reflects its approach more fully, and which is sensitive to factors which are known to be important in achieving positive outcomes – not least the quality of different activities and frequency of participation.

Nonetheless, a children's zone approach appears to be founded on a strong rationale. We can say that:

1. The established evidence-base on why some children do better than others suggests that outcomes arise from children's complex social-ecologies, and that place plays a role in these ecologies. The implication is that improvements in outcomes for those facing the greatest difficulties in the most disadvantaged areas are possible through holistic area-based approaches. This means that the children's zone approach is based on a defensible theoretical rationale.
2. There is an empirical evidence base which suggests it is possible to impact positively on a range of outcomes for children, even when they experience significant disadvantages. There are many well-evidenced interventions available. In principle, a children's zone approach is well placed to marshal a portfolio of such inter-

ventions in a particular place, and to manage these in ways which help to mitigate some of the known limitations of standalone single-issue interventions.

3. There is evidence that the effects of individual interventions can 'transfer' to a wider range of outcomes and can continue to be seen after the intervention is finished, perhaps even into adulthood. This not only strengthens the case for undertaking interventions, but also suggests that multiple interventions across childhood, and across the contexts which make up children's social-ecologies, may well be able to build on each other to produce more powerful effects than isolated individual interventions.

4. There is evidence that multi-strand interventions can have impacts on a range of outcomes and that there can be positive interactions between the different strands of intervention.

In addition, it is notable that, some of the evaluative reports we reviewed on initiatives that already offered quite wide ranging out-of-hours and extended activities, concluded they would need to move toward an area-based and more holistic model in order to achieve a wider range of impacts at greater scale. For instance, Cummings et al. (2007) reflected that if FSES were to maximise their potential to impact on child, family and community outcomes, they would need to become a connected part of coherent local strategies, linking their actions to those of other organisations and agencies tackling issues around disadvantage. In a similar vein, reflecting on the LA's BEST programme, Huang et al. (2011) identified the need for a strategy which: connects and ensures coherence between in-school and after-school provision across children's school careers; targets populations in their locales; and is systemic, involving schools and schools districts, not-for-profit agencies and community leaders to support students and families. Both sets of recommendations have strong resonance with a children's zone approach.

On the basis of the rationale and evidence presented in this paper, we believe it is fair to conclude that in those neighbourhoods where poor outcomes are most starkly entrenched, and where the odds are stacked most heavily against children's chances of achieving good outcomes, a children's zone approach has much to offer and can help take an extended education agenda forward. Future developments must, however, be subject to rigorous and appropriately sensitive evaluation if the impacts of such an approach are to be better understood.

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