

Tackling social exclusion through social care practice

Service users and carers are frequently amongst the most excluded members of communities. This three-year action research project was designed to test the potential of community development approaches in community care, with the aim of shifting attention from delivering specific client services to promoting a participative, inclusive and supportive community. This study – by Alan Barr (Scottish Community Development Centre/ University of Glasgow), Paul Henderson (Community Development Foundation) and Carolyn Stenhouse (Scottish Community Development Centre) – reports on the lessons from four local initiatives. It found:

- f** Local partnerships of community organisations, voluntary and statutory agencies - across a range of sectors - can be effective in promoting supportive communities. Each partner plays a distinctive role in an interdependent and, potentially, mutually empowering system.
- f** Effective partnerships require mutual trust and confidence. These are built on clarity of purpose, committed participation of all partners, open and honest communication, realistic goals and identifiable progress in their achievement. Trust needs to operate at several levels – between community leaders and the interest groups that they represent, community leaders and agency partners, agency partners in different sectors and departments/ disciplines, partners with differing power and organisational status.
- f** Community development skills are a pre-requisite to establishing and sustaining such partnerships. Agencies need staff who are highly accessible, responsive, listen to, support, encourage and build capacity of community members, leaders and their organisations.
- f** Community leaders (both service users and from the wider community) can play a key role as convenors of community interests, conduits for ideas and catalysts for new initiatives. They demonstrate characteristics of commitment, perseverance, resilience, awareness of community perspectives and realistic approaches. Their skills frequently parallel and compliment those of other partners.
- f** For this approach to be effective, senior managers need to embrace a culture of participative, accessible governance and joined-up inter-agency and inter-sectoral practice. Rigorous distinctions between strategic and operational management can work against this approach.
- f** The researchers conclude that separating specific care service needs from overall goals of achieving caring and inclusive communities can exacerbate social exclusion. Hence, much practice in planning and delivery of community care may not just be out of step with core government policies to promote social justice, but may also reinforce exclusion.

Background

With some positive exceptions, community development and community care have been running on separate tramlines for the last twenty years. Consequently, the methods of community development have been relatively under-developed in community care practice. Yet the exceptions suggest that there could be significant benefits. Community care and community development have often employed a common language - a needs-led approach, user/community empowerment, participation and partnership in service planning and review.

This three-year action research project was designed to test the potential of community development approaches in community care. It emphasised: working with people, in their communities, in an empowering manner; adopting principles of positive action towards service users and carers as excluded groups; promoting organisational capacity and using this to develop participation and influence; building active partnerships with service agencies.

The project focused on four local initiatives:

- Fife Council – participative approaches to community care in a large village within a Council policy of decentralisation and citizen involvement;
- Glasgow City Council – participation of minority ethnic carers in inner city neighbourhoods;
- South Lanarkshire Council – Council-wide disability strategy group in partnership with community organisations;
- Voluntary Action Lochaber with Highland Council and Highland Health Board – community link volunteers and care needs in remote rural communities.

Redefining community care

The project developed in parallel with the emerging UK government policy commitment to tackle social exclusion and promote inclusion and social justice – an approach that was seen as necessarily involving community participation and joined-up governance. The action research was informed by this approach; this led to a questioning of the boundaries and character of community care within the projects. The influence of social inclusion became a very positive stimulus to the local projects, which, in turn, became a test-bed for effective practice. Attention turned to the need for caring communities as much as the need to deliver community care services for individuals.

From the evidence of this study, adopting an approach based on supportive communities requires an appreciation that service user and carer communities do not define their interests strictly within the categories of need and services provided under community care legislation. Many areas which affect users' needs lie well beyond the conventional boundaries of community care, for example, transport policy, land use and development planning, architecture and design, building regulations and control, leisure/recreation or arts services, education provision, housing allocation policy, retail services. All of these, and more, were seen as having a critical bearing on the capacity of communities to be inclusive.

As the projects continued, participants increasingly viewed a community that was not capable of being inclusive as uncaring. It was felt that any community care policy not located in this vision runs the risk of reinforcing rather than tackling exclusion. However good they are, core care services by themselves are, at best, only a partial response to a definition of support based on principles of inclusiveness and social justice. The Government describes the characteristics of an inclusive community as one where people:

- *are able to participate in community life*
- *have influence over decisions affecting them*
- *are able to take responsibility for their communities*
- *have right of access to appropriate information and support*
- *have equal access to services and facilities*

(Inclusive Communities: report of the Strategy Action Team, Scottish Executive 1999)

From this perspective, the definition of the constituents of an effective community care policy may require substantial revision.

As the action research developed, the blurring of traditional boundaries required by adopting a supportive communities perspective became increasingly apparent. The partnerships, strongly influenced by the perspectives of community leaders, moved perceptibly towards this wider agenda.

Developing effective partnerships

Several stakeholders have a legitimate and necessary interest in a partnership approach to caring communities. These are: the community leaders, the service users and carers on whose behalf they act, front-line operational staff of agencies, managers and

policy-makers with strategic responsibilities. The study highlights lessons relating to each and to the overall partnerships with which they may engage.

Community leadership

Community leaders made substantial investments of time and energy in each of the projects on an entirely voluntary basis, but they did so conditionally, expressing clear expectations that partnerships should be genuine and achieve change. Whilst for those who were service users or carers there could clearly be an element of self-interest, the levels of commitment went well beyond any potential personal rewards. Overall, community leaders were clearly motivated by an underlying concern with justice and fairness, mutuality and reciprocity, though many also expressed satisfaction about how their own personal skills and knowledge had developed. These skills were often well-honed and attracted much respect from agency partners. Some reluctant agency partners were won over to the benefits of participative governance through their exposure to skilled community leaders.

The distinction between 'service users' and 'community leaders' was frequently blurred. Whilst they might have had specific needs, service users demonstrated their equal competence to act as community leaders. Indeed, they brought to bear special and exceptional insights that were a critical ingredient in the work of the projects.

Service users

In no case did community leaders represent an active mass base of community participants. Their influence therefore often rested on a capacity to convince other partners that their views were legitimately informed by engagement with wider constituencies of service users. In part, this confidence was established by evidence from community needs surveys and participatory events. Nonetheless, there was a strong element of trust placed in the honesty and objectivity of community leaders and the claims of their organisations to be representative. In some circumstances, issues arose relating to differences of perspective between community representatives who were carers and those who were direct service users.

Front-line staff

Local front-line staff played a crucial role in all the projects. Providing their role was supported by and consistent with that of their managers, they were key to the establishment of effective partnership

relationships. Accessibility and responsiveness, combined with skilled commitment to promoting the personal development and community capacity of the participants, were vital ingredients of their role. The projects demonstrated the value of competent community workers in a variety of settings – statutory and voluntary sector. They also indicated that a range of frontline staff in many disciplines – health, social work, locality planning, housing - need the skills of community engagement.

Agency managers

Community care has always required cross-disciplinary involvement. However, the broader perspective of supportive communities emphasised the wider range of interests needing to contribute to the task of joined-up and participative governance. Both partnership and participation required changes in the roles played by senior managers. The study suggests that, for some, this may represent a culture shift and a need to unlearn established behaviour and ways of working with their own staff, colleagues in other agencies and the wider public.

In particular, the study highlights a need for organisations and their senior managers to relinquish a rigorous distinction between strategic and operational management. Whilst in the past managers' authority may have been based on bureaucratic status and policy directives, they now have to legitimise their authority in the eyes of partners from the community and other agencies who are not accountable to these influences. This required managers to pay attention to personal leadership skills and working with the consent of partners. In large part, the projects' success lay in the recognition by key officers that their capacity to be influential could not rest on their bureaucratic status.

Working together

These four perspectives highlight important features of joint working. To achieve their goals the stakeholders became increasingly interdependent. The absence of any one player affected the effectiveness of the system. Their working relationships had to be positive for the mutual benefits to be gained.

This required a genuine appreciation of the potential and constraints operating on each partner, with any distrust between them undermining effectiveness. Trust was conditional - each party had to earn and sustain the trust of the others. For this to happen, the conditions for involvement needed to be open from the start and the performance of the

partnership had to be responsive to the conditions for involvement. A partnership is an interdependent system. It is important to understand that each party to it has power in relation to the continuing functioning of the system.

Principles for good practice

The study demonstrates that community development and community care have common interests and potentially mutual benefits. Methods of community development can help achieve the objectives of progressive community care, whilst engagement with user communities helps community development to realise its vision of inclusiveness.

The study started from the assumption that the involvement of service users is central to this process. The researchers drew some other general lessons for practice development from the four projects:

- *Build on what exists:* each locality is unique, development has to build on what is there.
- *Needs-led practice:* having resources to investigate needs and enter into dialogue with communities is essential.
- *Involve managers:* adequate time and training opportunities need to be made available for managers to play a substantive part in community-based approaches to social inclusion and caring communities.
- *Form partnerships:* extensive inter-agency and inter-disciplinary practice informed by community involvement is essential.
- *Social inclusion perspective:* the support needs of communities can be best addressed when they are conceived and planned within a corporate, social inclusion framework rather than solely within community care legislation.
- *Making use of community development:* the values, principles and methods of community development are needed if the goal of achieving caring communities is to be reached.

About the study

The study adopted an action research approach. Two of the researchers were actively involved in identifying and developing the work of each of the projects. The evidence on which the study is based was derived from baseline interviews and focus groups, continuous participant observation, cross-site

discussion between the projects and, at the end, interviews and focus groups reviewing the perceptions of the participants and those they sought to influence, of both the process and the outcomes of the projects.

How to get further information

The full report, **Caring communities: A challenge for social inclusion** by Alan Barr, Carolyn Stenhouse and Paul Henderson, is published for the Foundation by YPS (ISBN 1 84263 017 2, price £14.95).