

# Quality in the Provision of Family Support Services

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If community and family structures are to become more cohesive and supportive of each other, funders and designers of programs need to heed the views of service users in developing quality services.

To explore this contention, a research project was undertaken to examine the quality components of an organisation's support services for families. The organisation used for the study was Anglicare Victoria, a major provider of services for families and children in Victoria.

This article provides some preliminary findings of a particular aspect of the study – the perceptions of service users concerning aspects of service provision which they most valued.

## Family support

In interpreting the concept 'family support', a few key points are worth mentioning.

- Programs targeting the delivery of formalised family support will be less than effective if families cannot access adequate material resources such as income, housing, education, recreation, legal protection and health care.
- 'Family support' is often discussed and considered in isolation from, or as mutually exclusive to, aspects of family policy which address (or fail to address) structural inequities and the lack of adequate resources for families.
- In general, the objective of the multitude of family support services in existence is 'to maintain family unity by providing a range of generic and specialist services to families to strengthen their own capacity to meet their needs' (Wolcott 1989: 7).
- Family support services are an integral part of a range of services available to marginalised and disadvantaged families. Outreach, advocacy and prevention are fundamental facets of the service.
- Traditionally, the personal support aspect of family support services usually receives the greatest



Picture: Double Jay Graphic Design

emphasis and attention. When choices have to be made, priority in government funding has tended to be given to remedial and crisis services for families at risk. As a consequence, gaps appeared in the provision of primary prevention family services (Gledhill 1996) which aim to optimise the quality of family life and strengthen family functioning.

- More recently, government policy has attempted to augment its commitment to prevention by targeting specific family strengthening initiatives – for example, the Positive Parenting Program. The more traditional family support services such as counselling, assistance with the development of family and household management skills, and financial information, advice or referral are now supplemented by a variety of community-based

supports (for example, neighbourhood houses and community centres) and parenting education type programs (AIHW 1997).

- Program providers and funders of services for families and children in various parts of the globe, including Australia, the United Kingdom and the United States, are now turning their attention to the development of more holistic, seamless systems and are therefore giving renewed emphasis to primary prevention services.

## The notion of quality in the human services

Although professional ethics and demands for accountability have meant that human service organisations have always paid attention to notions of quality in the provision of services, the emphasis on quality has

strengthened as a result of managerialism. However, quality is a socially constructed notion that changes according to the particular perspective adopted (Pollitt 1998). Debates and discourses on quality in the human services have been influenced by competing paradigms. In particular, two different paradigms based on different values and priorities have emerged: the professional/managerial paradigm, and service users' discussions or discourses (Beresford et al. 1997: 63 and 71).

We contend that government and/or management are not always in the best position to determine the full range of factors that contribute to the development of a quality service. As Beresford and his colleagues (1997) point out in their work in the United Kingdom on the role the service user has in the design and delivery of personal social services, definitions of quality emphasised by service users are quite different from those of professional or service agencies. Service users are interested in what services can do to help them and how services are delivered. Professionals or service agencies are more likely to be interested in the efficiency or effectiveness of the service delivery system. Professional or business approaches may be limited because their views on determinants of quality are based largely on the cultural and professional assumptions of the purchasers or providers of services, not on the perspectives of those who use the services (Beresford et al. 1997).

Other work has emphasised the importance of using quality factors identified by service users as a basis for developing questions to assess recipients' perceptions of service quality and their satisfaction with a program (Herman 1997). However, in our view it is not sufficient to think only in terms of 'service user satisfaction' tools as the primary evaluative method. Rather, it is important to explore what it means to service users to talk about quality services – to get below the level of satisfaction to explore what is actually valued. An evaluation study undertaken in Norway by Noess and Woerness focused on rationality and management issues in public care services. These researchers caution that a managerialist approach focuses on what the consumer wants rather than what they need, which is not necessarily the same thing. Rather than a managerialist approach, they argue that an approach based on the characteristics of good care is necessary in order to achieve better quality (1997).

There have been numerous evaluations of family support services,

and the difficulties in undertaking evaluations, especially focussing on outcomes, have been widely acknowledged. In particular, there has been little research to date on social and community service user views. By drawing on perceptions of service users, the study at Anglicare Victoria provides some useful insights into aspects of services which are most valued, providing possible directions for future service development.

## Service users' perceptions of quality

The Anglicare Victoria study explored the perceptions of a number of service users concerning aspects of service provision which they most valued. This was done by interviewing service users – some individually, some in focus groups – in both urban and rural settings.

The process of this form of qualitative research is time-consuming and requires careful consideration of various ethical and professional issues, including how to access service users for interview. The various family support teams were relied on to approach service users to participate in the study. This meant that the sample was biased in that it involved the most confident of the service users and those whom the family support workers believed it was appropriate to approach.

In all, 29 service users were interviewed. All but one were women and all were seeing a family support worker individually or were a member of a group facilitated by a family support worker. Length of contact with the service ranged from one week to four years, although the majority had had contact with the service for between one month and two years.

The service users had been referred to the family support service from a broad spectrum of community services. Typically, the women were experiencing difficulties in parent-child interactions – often associated with histories of disadvantage, abuse, loss – and the majority were also experiencing socio-economic or environmental difficulties such as inadequate housing. A number felt marginalised from mainstream society, were isolated, and often tied down with the care of children. In three families the children were the focus of protective concerns.

Among other things, the service users were asked what they valued about the services provided. A major theme in the service users' responses was the companionship and friendship, and

for some the fun and humour, offered by the service – either from the support worker or from the support group facilitated by a worker. In particular, the relationship with the family support worker was valued because it was this person who provided acceptance, humanity, caring and time. The following example provides a sense of this.

### *"Odette's" experience*

Often when service users are referred to family support, they have little or no sense of what to expect. This was certainly the case for "Odette" who knew nothing about the agency or the program when she was referred by her doctor. This service user had significant emotional and physical health problems, was isolated from friends and family, unaware of local community services, experiencing relationship difficulties, and was struggling to care for adolescent children.

After a long period of involvement with the family support program, Odette reported that the impact had been life changing. She now talks enthusiastically about how her confidence and self-esteem have grown, how she has lost weight and made new friends. Her current goal centres on learning to read and write. She now embraces and enjoys life, whereas before she was severely depressed, even suicidal. This service user attributes this remarkable change in her quality of life to the worker assigned to her through Anglicare's Family Support Program.

The service worked for this woman, in her view, because of the inherent quality of the interaction that occurred between the service user and the worker. There was something about the quality of the transaction that enabled her to examine herself in relation to others and to explore how she could change in ways that were comfortable for her.

So how might quality have been experienced by this service user? Perhaps it was having someone who believed in her and who believed that change was possible. Perhaps it was the reassurance and support. Perhaps it was the interest shown, the listening without judgement, or the absence of a script about what she should do and how she should live her life. Perhaps it was something to do with the reliable and dependable contact she had with her worker. Perhaps it was about trust or the fact that the worker really took time to get to know and understand her. Perhaps it was the offer of practical assistance and help with the children.

Clearly it is something in the way the service is performed that is crucial to the outcomes from the point of view of the service user.

### *Relationship between practitioner and service user*

The comments from the service users indicate that the relationships and friendships, and in particular the way in which a service is provided, combined with practical assistance of various kinds, are key factors for the service users. This is consistent with the findings of a recent study in the United Kingdom by Beresford and his colleagues (1997), where a range of service users were asked what they valued in their contacts with social service workers.

The single most important factor of a good quality service was the relationship between the individual worker and the service user: 'So often it was the style of the way services are delivered rather than the service itself which produces a quality service . . . Beyond the basic skills, [this] empowering experience comes from the quality of relationships' (*Wiltshire Users' Network* in Beresford et al. 1997: 77)

Nor is quality just about the transactions that pass between the worker and the service user. It is about the ability of the client to access resources from the broader community. Developing coherent and consistent policies that facilitate the wellbeing of families is essential. Complimentary policies need to exist between income, employment, housing, education, transport, health, industry, community infra-structure planning and community service delivery.

It is important that policies recognise the needs of the individual, promote a family's capacity to provide optimal care for its members, enhance the status of parenting, ensure access to information about child development, parenting skills and community resources, promote the ability of the local community to support families' child rearing function, promote a family's opportunity for interaction with a social and generational mix, and promote personal and physical access to services.

## Conclusion

Personal support services play a crucial role in strengthening the most vulnerable families and providing them with the resilience to 'keep going' and, ultimately, to make significant changes in their lives.

The aspects of services particularly valued by recipients may be seriously put at risk by current government trends towards purchasing short-term, time-limited, targeted services for families. Policy imperatives and service specifications of organisations providing family support services need to provide a framework which will allow for the provision of services that are relevant to the actual needs and circumstances of families and not just confined to what programs can 'legitimately' offer.

The rules and expectations that govern the delivery of services to the community and families have changed irrevocably. The influence of economic rationalism and managerialism has had wide ranging implications that have penetrated deeply into the psyche of the human services. Our investigation into what shapes a quality service affirms the importance of the service user role in offering valuable feedback and insights for organisations about what actually works. The key is in understanding more about what features of the relationship succeed when a practitioner works with a service user.

While organisations need to address those determinants of quality as specified by their principle 'customer', that is, the service purchaser, they have a responsibility to set their own unique standards or measures of quality. We suspect that crystallising those interpersonal elements of a quality service will invariably link back to the value base that underpins the work of human service agencies and the helping professions.

Individual rights are at the very heart of community life in Australia. To disregard or overlook the perspectives of service users undercuts their right to respect and empowerment.

The preliminary findings of the research undertaken within Anglicare Victoria suggests that a program like Family Support works because quality relationships are built with service users that enable the emergence of real growth and change. Such programs need to be given space and permission to continue this important work. Australia's social policy context needs to support the development of a diverse range of services targeting the many needs of families. Family support alone is not the answer. There is no one program that can do it all. We need supportive social and economic structures and well designed support services that are culturally sensitive to affirm and strengthen all families and community life.

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