

FRAMEWORK FOR SOCIAL WELFARE SERVICES

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Department:
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REPUBLIC OF SOUTH AFRICA

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- Identifying and articulating challenges with the implementation of the Integrated Service Delivery Model, which forms the basis of this framework.
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- Participating in the provincial and national consultative processes, especially the First National Indaba on Social Welfare Services held in February 2010.

Through the consultation processes and subsequent approval of this framework, the DSD has demonstrated its commitment to the transformative and developmental objectives of the delivery of social welfare services.

Foreword by the Director-General

This document – the Framework for Social Welfare Services – is the outcome of an intense process of reflection by the departments and partners involved in the service delivery system on the evolution of developmental services since the adoption of such policies as the White Paper on Reconstruction and Development (1994) and the White Paper for Social Welfare (1997). The relevance of the White Paper on Reconstruction and Development to this document and welfare services in general is that it provided the basis for the implementation of socio-economic programmes to facilitate the achievement of the broad goals of the reconstruction and development of the country. Poverty alleviation is identified as a key programme of the DSD. Based on this provision, the DSD adopted the White Paper for Welfare, which positioned developmental services and programmes at the centre of policy-making processes and intervention processes.

To give effect to the developmental approach espoused in the White Paper for Welfare, the DSD reviewed the Framework for Social Welfare Services in the Integrated Service Delivery Model (ISDM). Although the review focused on welfare services – one of the core programmes of the DSD that includes community development and social security – it became evident that the other two programmes would be affected by the outcome of the review process. Consultative sessions conducted nationally led to a return to the basics of conceptualising social welfare services within a developmental approach. The DSD views community development as referring to broad strategies that combine the efforts of individuals, groups and communities to address socio-economic development as provided for in the above white papers. Community development in this sense is aimed at re-orientating social welfare service delivery from a treatment approach to a social development approach, hence the reference to developmental social welfare services.

The success of developmental social welfare depends on the availability of a diverse pool of social service practitioners/social service professions and occupations that are able to implement strategies geared towards the development of human potential, the development of capacity and the empowerment of communities. The reviewed framework seeks to operationalise developmental social welfare by creating synergy between collaborative partners and organisations that employ practitioners and clients. This will allow for a holistic and integrated assessment of the service delivery system.

The different sections of this document deal with different components of the framework, which will challenge us all (stakeholders and practitioners) to be developmental in delivering quality social welfare services. This document is a highly generic social welfare policy as it contributes to the redefinition of social welfare services within the overall social development in the country.

DIRECTOR-GENERAL

Department of Social Development

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1. Introduction

The environment within which social welfare services are rendered has changed during the past 15 years. The change has been brought about largely by changes in the socio-economic and political situation in South Africa, which necessitated legislative and policy reviews to make social welfare programmes and services responsive to the needs of the poorest of the poor, the marginalised and the most vulnerable groups in society. The White Paper for Social Welfare (hereafter referred to as the White Paper) guided this transformation process.

In the 13 years since the acceptance of the White Paper, practitioners in the social welfare sector have reflected on the progress made with the implementation of the principles and guidelines laid down in the White Paper. Although progress in terms of transformation of the sector is recognised, further guidance is needed on the implementation of policies and programmes to achieve integrated developmental social welfare services.

The White Paper highlighted the following considerations to guide the transformation of social welfare service delivery.

- A developmental approach to social welfare services.
- Collective responsibility for social welfare services through collaborative and intersectoral partnerships.
- Recognition of community development as multi -sectoral, multidisciplinary and an integral part of social welfare services.
- Expansion of the range of human resource capacity to deliver social welfare services.
- Development of a national information management system.
- Equitable and sustainable financing of social welfare services.
- Devolution of social welfare functions to local government.
- Implementation of comprehensive, generic, integrated, family-centred and community-based strategies.
- Creating a balance between developmental, preventive, protective and rehabilitative interventions.
- Strengthening family life through the adoption of a life cycle approach aimed at guiding and informing programming geared to the needs of individuals, groups, communities and society as a whole.

These considerations provide the basis for the review of the Framework for Developmental Social Welfare Services (hereafter referred to as the Framework) in the context of the Integrated Service Delivery Model.

2. Framework for Social Welfare Services

The development of this framework presented an opportunity to enhance the nature, scope, extent and level of integrated social welfare services that social service practitioners should be delivering.

The framework covers:

The developmental approach to social welfare services;

- The promotion and strengthening of collaborative partnerships;
- The practice context or environment;
- Developmental social welfare service integration;
- A description of the nature, level and scope of delivery of developmental social welfare services (developmental social welfare service delivery process);
- An outline of the need to define and determine the delivery of quality services, the need for norms and standards, and the need for continuous monitoring and evaluation.

2.1. Goal and objectives

The Framework seeks to facilitate/guide the implementation of a comprehensive, integrated, rights-based, well-resourced and quality developmental social welfare service. This can be achieved through the attainment of the following objectives.

Objectives of the framework:

1. Provide a theoretical framework and approach for developmental social welfare services.
 - Human rights based approach
 - Harmonising economic and social policies and programmes
 - Participation and democracy
 - Collaborative partnerships
 - Bridging the micro-macro divide
2. Describe the collaborative partnerships essential for developmental social welfare services.
3. Define the practice environment/context for the delivery of integrated developmental social welfare services.
4. Describe the integration of developmental social welfare services in terms of the following.
 - Intersectoral and interdepartmental integration
 - Intradepartmental (programme) integration
 - Integrated interventions

5. Identify vulnerable target groups and strategic focus areas for the delivery of developmental social welfare intervention strategies in the life cycle.
6. Describe the enabling factors for integrated developmental social welfare services.
7. Establish mechanisms for the promotion of quality social welfare services that are linked to a monitoring and evaluation system as well as norms, standards and business processes.

2.2. Values and principles for service delivery

Values

Core values of an integrated developmental social welfare services approach:

- o Acknowledgement of and respect for people's potential to develop and change.
- o Recognition of the rights of all people to participate in their own development and decision making and to be accountable for their own lives.
- o Commitment to facilitate social processes that build effective relationships as well as healthy organisations and communities.
- o Joint responsibility for the delivery of integrated developmental social welfare services.

Principles

Key principles of a developmental social welfare approach for South Africa:

Accountability: All legislation, policy and regulations should be complied with.

Accessibility: Accessibility of services in terms of physical and geographical conditions, time, language and need should be ensured.

Appropriateness: Appropriate services to respond to social, economic, cultural and political conditions.

Efficiency and effectiveness: Objectives should be achieved in the most cost-effective manner.

Empowerment: Power relations should shift towards people so that they can achieve greater control and influence over decisions and resources that impact on the quality of their lives through increasingly interdependent relationships.

Equity: The allocation of resources should be based on need, priorities and historical imbalances.

Partnership: Government, civil society and the business sector should accept collective responsibility to deliver services.

Participation: People should be fully engaged in their own process of learning, growth and change starting from where they are and moving at their own pace.

Self-reliance: People should be connected to each other and their environment in ways that make them more effective in their individual and collective efforts towards achieving a better life and developing leadership, decision-making and planning skills, among other things.

Social integration: Policies and programmes should promote social justice.

Sustainability: Long-term maintenance of desired goals should be possible.

Transparency: Access to information should be ensured as well as openness regarding administrative and management procedures.

Universal access: Developmental social welfare services should be available to all vulnerable groups. No individual or group should be denied access to these services either because of lack of resources or lack of knowledge on how to access the services.

These principles underpin the delivery of integrated developmental social welfare services in South Africa and should be observed and complied with at all times.

3. Policies and Constitutional Mandate

Constitution of the Republic of South Africa (1996)

The Constitution of the Republic of South Africa Act, 1996 contains the Bill of Rights, which stipulates not only basic human rights but also social and economic rights. The Constitution, notably section 27(1) (c), also provides for the right of access to appropriate social assistance for those unable to support themselves and their dependants.

South Africa is one of the few countries in the world whose constitution enshrines a duty to alleviate poverty. The South African government is obliged to meet basic human needs and accords these needs the status of basic human rights.

White Paper for Social Welfare (1997)

The White Paper for Social Welfare (hereafter the White Paper) provides the framework for the transformation and restructuring of social welfare services in South Africa. It also forms the basis for a policy framework for social welfare services in South Africa.

All policies and legislation guiding the delivery of social welfare services are also applicable when implementing this framework (the Framework for Social Welfare Services).

4. Applicability of the Framework

The reviewed Framework is applicable in conjunction with the Integrated Service Delivery Model. It is also applicable to departments and civil society organisations in all spheres of government, training and research institutions, and the private sector as partners in the developmental social welfare sector.

5. Key Concepts

This section explains key concepts in the Framework in order to promote its consistent use in the social welfare sector.

Social welfare: Social welfare refers to conditions of social well-being when social problems are satisfactorily managed, social needs are met and social opportunities are created to meet the needs of individuals, families, groups and communities.

Social welfare services: Services and programmes that are provided to meet social needs and create opportunities for people to realise their potential. In this document, such services include prevention and promotion; social assistance and social relief; protection; statutory social support; restorative, rehabilitative and therapeutic continuing care and reintegration; and aftercare services.

Developmental social welfare: The social welfare system in South Africa applies the principles of the social developmental approach. In the Framework, developmental social welfare is measured by such criteria as promotion of human rights, use of partnerships to deliver services, integration of socio-economic programmes,

and bridging of the micro-macro divides in service delivery. Developmental social welfare emphasises the empowerment of individuals, families, groups and communities as active participants in the developmental process.

Developmental approach: An approach that links social welfare programmes more effectively with economic development programmes. Social and economic developments are viewed as complementary sides of the same coin. Social development is a dynamic process of growth and change that occurs through the promotion of developmental processes to achieve the general welfare of society.

Community development model: A multisectoral, multidisciplinary intervention model adopted to re-orientate social welfare service delivery from a treatment and rehabilitative approach to a developmental approach.

6. Developmental Approach

A developmental approach is an integral factor in the delivery of integrated social welfare services. South Africa's developmental approach to social welfare evolved from the country's unique history of inequality, human rights violations due to colonialism and apartheid, and a long history of human agency and social action to change these conditions. Consequently, new social welfare thinking was infused with notions of social transformation, human emancipation, reconciliation and healing, and the reconstruction and development of society. These ideas are enshrined in the Constitution of the Republic of South Africa Act, 1996 and the subsequent adoption of relevant policies and legislation to reflect the vision and values of the new society. This approach is based largely on the White Paper for Reconstruction and Development (1994), which has as one of its goals, socio-economic development through poverty alleviation. Developmental social welfare services will use community development as a mechanism for poverty alleviation in the country.

6.1. Purpose of developmental social welfare

Purpose of developmental social welfare:

- Enhance social functioning and human capacities.
- Promote social solidarity through participation and community involvement in social welfare.
- Promote social inclusion through empowerment of those who are socially and economically excluded from the mainstream of society.
- Protect and promote the rights of populations at risk.
- Address oppression and discrimination arising not only from structural forces but also from social and cultural beliefs and practices that hamper social inclusion.
- Contribute significantly to community building and local institutional development.

In terms of this Framework, reference to social welfare services implies developmental social welfare services.

6.2. Elements of the developmental approach

Five elements are central to the developmental approach to social welfare service delivery in South Africa.

6.3.1. Rights-based element

This element emphasises social justice, a minimum standard of living, equitable access and equal opportunity to services and benefits, and a commitment to meeting the needs of all South Africans, particularly the most disadvantaged. Everyone is entitled to economic, social and cultural rights within the limits of the resources of the state. The developmental approach to social welfare covers socio-economic rights including the right to social assistance and anti-poverty strategies.

From a human rights perspective, services include interventions such as protecting the rights of populations at risk of oppression and marginalisation; promoting rights through the provision of education on rights and duties; facilitating access to rights; challenging policies and social systems that compromise rights; and advocacy for needs and rights.

6.3.2. Harmonising social and economic policies

Developmental welfare is a pro-poor approach that promotes people-centred development, social investments in human capabilities and the building of social capital. Economic and social policies are equally important components of the development process. Economic growth and redistribution are mutually reinforcing, and social investment is not considered a drain on national resources as it contributes positively to economic development. In the social welfare sector, programmes and strategies can be introduced to integrate people with special needs into the economy through vocational training; job placement; the creation of micro-enterprises, cooperatives and community-based projects that encourage economic self-sufficiency and full integration into society; skills development; public works; self-employment for the poor and marginalised; and ensuring cost-effective services with a high impact.

Social programmes should reflect an integration of human capital, social capital and economic capital development. Short-term assistance with immediate poverty relief such as food parcels and social grants needs to be replaced by poverty reduction, sustainable livelihoods, empowerment and participation.

6.3.3. Participation and democracy

A third element covers active citizenship and civic engagement in achieving human development. All South Africans should be afforded the opportunity to play an active role in promoting their own well-being and in contributing to their society's growth and development. Democracy and participation or participatory democracy in social and economic development is a key premise of the developmental approach to social welfare in South Africa.

Developmental social welfare programmes should be moulded by a strong civil society movement that is consulted and respected for shaping interventions and taking ownership of its own development and future. This encourages strengths-based and empowerment approaches in service delivery. It also calls for critical reflection in achieving developmental goals.

6.3.4. Welfare pluralism/ collaborative partnership

The successful implementation of developmental social welfare services depends on role players who bring expert knowledge, skills, financial resources and commitment to achieve the goals of the sector.

6.3.5. Bridging the micro-macro divide

Finally, the developmental approach attempts to bridge the micro-macro divide in service delivery. In this respect, the Framework promotes the enhancement and empowerment of individuals, families, groups and communities by intervening at different levels, using multi-methods and community-based, integrated generalist practice interventions.

Developmental social welfare interventions take place on micro- (individuals, families and households), mezzo- (groups) and macro-levels (communities and organisations). In other words, micro-interventions aimed at individuals and families are linked with macro-interventions aimed at changing the structures and institutions of society that result in socio-economic injustice. The implementation of this element requires the application of different intervention techniques and methods that depend on the particular client or system of intervention.

7. Collaborative Partnerships

Developmental social welfare services in South Africa are based on the collective responsibility of and the collaborative partnerships between the public sector, private sector, civil society, training institutions and research institutions. All these partners play a crucial role in ensuring the provision of equitable services to meet the social needs of society.

These partnerships need to be built on a common goal and mutual respect with a clear description of the roles and responsibilities of each partner. The partnership is governed by a memorandum of understanding (with government) or an agreement (with non-governmental organisations). Collaborative mechanisms ensure compliance with legislation and facilitate dialogue, joint planning and decision making.

7.1. Public sector

Developmental social welfare services are delivered as a constitutional mandate by the Department of Social Development (DSD), which is accountable to parliament regarding its programmes and expenditure in response to the needs of the public. The Constitution locates responsibility for social welfare in the national and provincial spheres of government. Social welfare is not a function of local government, but provincial governments may delegate certain responsibilities to local authorities. A strategy for the delivery of services at local government level in consultation with stakeholders is needed to ensure the delivery of integrated developmental social welfare services. Such a strategy should make recommendations on which functions can most effectively be devolved to local government level.

The National Department of Social Development provides strategic leadership and support and also coordinates the implementation of social welfare services throughout the welfare sector. The national department is responsible for developing national norms and standards for the rendering of services and for ensuring uniformity in the application of particular functions. Interdepartmental collaboration takes place between government departments whose mandates include promoting social development and the delivery of developmental social welfare services.

Roles and responsibilities of collaborative partners:

Roles and responsibilities of the DSD

The roles and responsibilities of the National Department of Social Development, provincial departments, districts and service offices as stipulated in the Integrated Service Delivery Model also apply in the implementation of the reviewed Framework for Social Welfare Services.

Roles and responsibilities of other national departments

The Departments of Health, Basic Education, Correctional Services, Justice and Constitutional Development, Labour, the South African Police Service, Cooperative Governance and Traditional Affairs share responsibility for the delivery of social welfare services. Each deals with a specific group or a combination of groups of service beneficiaries and strategic focus areas. As partners, national departments can ensure delivery of integrated developmental social welfare services by:

- developing and aligning their programmes and strategies with the developmental social welfare services framework and other policies and legislative frameworks governing the provision of social welfare services;
- advancing developmental social welfare services as determined by structures established for the management of collaborative partnerships;
- ensuring compliance with developmental social welfare service standards and professional ethics by social service practitioners in their employment.

Other national departments provide complementary services to facilitate the holistic delivery of developmental social welfare services.

Specific roles and responsibilities of national departments

Department of Basic Education

- Develops and implements policies, programmes and strategies to guide the delivery of developmental social welfare services in the education sector.
- Puts mechanisms in place that acknowledge social service professionals/practitioners as crucial in learner support programmes.
- Develops a referral system to link vulnerable children with the necessary resources.
- Commits resources to the delivery of social welfare services that seek to promote learners/students' well-being in the different provinces.

Department of Health

- Develops policies, programmes and strategies to guide the delivery of developmental social welfare services in a medical and health care setting.
- Puts mechanisms in place that acknowledge social service professionals/practitioners as crucial in a health and medical setting.
- Ensures the provision of health care in developmental social welfare facilities.
- Creates an enabling environment for social workers as part of the multidisciplinary team in the management of social health care and support in all provinces and health care facilities.

Department of Correctional Services

- Develops policies, programmes and strategies to guide the delivery of developmental social welfare services in a correctional services setting.
- Facilitate and promote rehabilitation and reintegration of offenders.

- Puts mechanisms in place that acknowledge social service professionals/ practitioners as crucial in the rehabilitation and integration of offenders within all correctional services settings.

Justice and Constitutional Development

- Develops policies, programmes and strategies to enhance the care and protection of vulnerable groups by giving them access to legal services.
- Puts mechanisms in place that acknowledge social service professionals/practitioners as crucial in a legal services setting.

South African Police Service

- Develops policies, strategies and programmes that guide the delivery of developmental social welfare services in the South African Police Service.
- Puts mechanisms in place that acknowledge social service professionals/practitioners in the South African Police Service.
- Develops a referral system for their service beneficiaries with the necessary resources.

Women, Children, People with Disabilities

- Coordinates and integrates policies and legislation regarding the rights of women, children and people with disabilities.

Corporate Governance and Traditional Affairs

Social welfare services rendered by municipalities should be in line with delegated responsibilities and consistent with the Constitution.

- Develops policies, programmes and strategies to guide the delivery of developmental social welfare services in local government and traditional authorities.
- Allocates resources for social welfare services in their delegated areas of responsibility.
- Puts mechanisms in place that acknowledge social service professionals/practitioners in corporate governance and traditional affairs setting.

These roles and responsibilities are guided by a memorandum of understanding between the DSD and other national departments. **Other national departments also play a supportive role in complementing the delivery of developmental social welfare services.**

7.2. Civil Society Organisations

The history and success of the delivery of developmental social welfare services can be traced to civil society organisational structures. These include organised/formal structures (national bodies) and informal networks of organisations rendering social welfare services. Whatever their type, the impact of services delivered by civil society organisations is experienced equally at local level.

Close collaboration between the public sector and civil society organisations is critical for an integrated, holistic and effective social welfare service delivery system. Developing and strengthening the partnership requires the inclusion of public sector objectives in line with government's programme of action (aligning strategies with common goals) and ensuring the provision of resources (human, financial, infrastructural and technological) to facilitate collaborative interventions by the welfare sector as a whole.

Government non-profit organisations are responsible for two distinguishing activities: authorising and financing services on the one hand and the actual delivery of services on the other.

Authorisation to provide services

Civil society organisations operating in all spheres of government require authorisation to render developmental social welfare services in order to ensure that they register in accordance with the primary legislation relating to the delivery of their identified services. They have to ensure compliance with a single piece of legislation or a combination of applicable pieces of legislation depending on the services indicated in their registration certificate. Their authority to render services is subject to the conditions stipulated in the registration certificate. Civil society organisations may also register in terms of the Non-Profit Organisations Act.

Financing of services

Resources are a critical aspect of partnerships in South Africa and should accordingly be combined in order to complement the limited institutional resource capacity.

Funding and subsidisation should be based on principles of fairness in relation to the costing of the required services. However, within a developmental paradigm, non-government organisations should also embark on economic development and fund-raising initiatives to augment what government provides.

The funding of services rendered in terms of a registration certificate should be informed by the requirements laid down in the Policy on Financial Awards to Service Providers Rendering Social Welfare Services.

Service delivery

As partners in service delivery, civil society organisations have to render services in accordance with their authorised services as indicated in their registration certificates. Their roles and responsibilities are dealt with below.

Roles and responsibilities of national bodies, non-governmental organisations, faith-based organisations and community-based organisations

The roles and responsibilities of these organisations as set out in the Integrated Service Delivery Model are also applicable in the implementation of the reviewed Framework.

7.3. Private Sector

Delivery of social welfare services remains the responsibility of the Department of social development. The DSD therefore retains the responsibility and accountability in matters relating to these services. This includes access to private services by the public. Private sector service providers have to comply at all times with the regulatory frameworks and norms and standards guiding the provision of services they are authorised to deliver.

7.3.1 Private Practitioners

An increasing number of social workers are registered private practitioners who provide their services at a fee to those who can afford to pay for services. Their services are also contracted by private and public organisations and institutions as part of the employee health and wellness programmes or management and supervision of practitioners. They offer knowledge and skills in different fields as well as flexibility and choice for consumers. Private practitioners must be registered as such by the SACSSP and must comply with terms and conditions of their registration.

7.4. Research Institutions

Research institutions contribute to a better understanding of the socio-economic environment and the profile of service beneficiaries and communities. Such understanding guides and informs policy making as well as the design and implementation of evidence-based interventions.

A policy on the management of collaborative partnerships must be developed to provide further guidance on this objective.

8. Practice Environment/Context of Social Welfare Services

An understanding of the practice environment/context for social welfare services and service providers entails recognising the interrelatedness of the socio-economic factors that affect people's lives, the complexities of social needs, the challenges facing social welfare services and the diversity of role players in the system.

Social welfare services are rendered in a variety of contexts by a wide spectrum of practitioners. The services may focus on a total population in a specific community or only on specific target groups in the community. A community can be described in terms of a geographic location or a specific confined space such as a hospital, residential facility, workplace or correctional facility. The services may also address all the needs in the community or in a specific focus area. The specific description of the community, target group and focus area determines which of the collaborative partners will be involved in the service delivery as well as the spectrum of practitioners who will be involved.

Three elements of the practice environment can be identified, namely communities, practitioners and area of operation.

8.1. Community

Social welfare services seek to enhance the social functioning of individuals, families and communities in order to improve their general well-being and the quality of life of service beneficiaries. The family is the basic unit for service delivery in a community. In addition, the use of community networks in community-based services through community work strategies is promoted to meet the basic material, physical and psychosocial needs of members. Different community work models are applied depending on the assessment of community members' needs.

The need for social welfare services should be determined by the community, which can be defined geographically or functionally. Within this community, the whole community (e.g. people with disabilities) can be defined as the target group for social welfare services, or specific target groups (e.g. the youth) can be identified according to the life cycle approach, or specific vulnerable groups (e.g. neglected children) or specific focus areas (e.g. people living with HIV and AIDS) can be identified in terms of needs or social welfare challenges.

8.1.1. Community Work

Developmental social welfare service delivery requires service providers and practitioners to implement interventions that target communities in such a way as to maximise the impact of the delivery. The changing environment within which social welfare services are rendered as well as the diversity and complexity of the needs of communities calls for integration of practice models by social service practitioners.

In terms of the Framework, community work

- Is a method of social welfare service intervention;
- Consists of various processes targeted at communities;
- Is aimed at bringing about social change through community development, social planning, community education, social marketing and social action practice models.

Community work is an integral component of social development, which encompasses interventions by most social development role players. In South Africa, the DSD has the responsibility of streamlining social development interventions by ensuring the recognition of community development practitioners as critical role players in these interventions. Since community work interventions are directed at the community as a whole and are in recognition of the need to integrate social and economic development programmes, all social service practitioners who have the competence and skills to render these services should be allowed to do so within the set standards and in recognition of the application of different models of community work practice.

8.1.2. Community work services

Community work services are incorporated in the Framework for the following reasons.

- The services are rendered to all South Africans.
- The services are aimed at developing self-reliance in communities in line with the goals of the White Paper.

- o The services are considered a sectoral contribution to social development.
- o The services contribute to economic development due to the harmonisation of social and economic development policies and programmes.
- o The services are developmental, preventive, protective and rehabilitative in nature.

8.1.3. Community work practice models

Community workers have the responsibility to identify and apply any or a combination of the models outlined below to address community needs based on the outcome of the assessment process. The community development model facilitates change in communities by focusing on their material and non-material conditions. Poverty alleviation projects are among the programmes that promote skills development and employment creation in terms of community development.

The community education model facilitates change in community members' lives by equipping them with the knowledge, insight, skills and attitudes required for effective individual and collective functioning. The social marketing model facilitates change by persuading community members to accept or act upon or use a specific socio-economic idea, practice or service.

The social action model facilitates change by mobilising communities to make changes in the power structures that have a negative influence in their lives.

8.2. Practitioners

The social welfare sector employs a wide range of practitioners such as social workers, social auxiliary workers, community development practitioners, youth development workers, and child and youth care workers. Specific occupational groups focus their services on a specific target group, for example child and youth care workers focus on children and the youth; youth development workers focus on the youth; social workers focus on all target groups; and community workers focus on the whole community. The target groups are distinct yet interrelated, and the occupational groups complement each other and provide an integrated, holistic service to enhance the beneficiaries' capacity to function optimally as they interact with their environment.

Strong teamwork depends on all practitioners understanding their role and contribution in relation to their specific field of expertise or experience. Each occupational group has therefore to define its own role, responsibility and scope of work with regard and complementary to the other occupational groups to avoid duplication and to enhance teamwork.

Teamwork in micro-level intervention requires a case management approach to ensure that all relevant role players from the different occupational groups render integrated and coordinated services within their scope of practice bearing in mind the best interests of each individual and/or family.

8.2.1. Human resource model for social welfare services

The human resource model has to be developed to outline the interrelationships existing among the diversity of social service practitioners.

Elements to be outlined in this model are:

- o Identification of occupations as professionals and support workers (social workers, social auxiliary workers,

community development practitioners, assistant community development practitioners, child and youth care workers and care givers; auxiliary child and youth care workers);

- o Supervision of practitioners in respect of their respective occupations. For this purpose, each occupation should have its own practice based supervisors while all share a manager responsible for social welfare services;
- o Identification of the practice context as settings. These are places where social service practitioners are employed or undertake their practice and should be identified as the *primary settings* (Department of Social Development and Non-Governmental Organisations service offices), secondary settings (health facilities, schools, correctional facilities, Family Advocates Offices, department of Defence and the South African Police Service), and facility based settings (all facilities established for purposes of care, protection, rehabilitation, restoration, etc to service beneficiaries);
- o Service delivery units required for social welfare service delivery. A social welfare service delivery unit refers to any combination of the different occupations identified to deliver social welfare services. All service delivery units must be supported by administrative staff and must be linked to a social welfare supervisor and manager. The composition of the service delivery unit should consider the practice setting, profile of communities or service beneficiaries, the life stages to which services are rendered, and the focus areas that are addressed in service delivery. The human resource model should provide for a *single occupation and multiple occupations* service delivery units.

8.2.2 Managing the workload of social service practitioners

Managing the workload of social service practitioners is a critical factor in the delivery of social welfare services. Elements of workload management are:

- o Understanding the human resource capacity of the organisation;
- o Knowing the basket of social welfare services rendered by the organisation;
- o Determining the nature of work to be done by the social service occupations and practitioners;
- o Determining the factors influencing workload of practitioners;
- o Overall performance management practices and systems used by organisations and the sector.
- o Determination of workload ratio.

Details of the model for the determination of workload ratio are provided for in the guidelines for the management of the workload of social service practitioners. The following workload generic ratios are proposed for social work, child and youth care work and care givers operating in all settings.

Social Work Workload Ratios

Scenario 1 (social worker): 80% of workload is allocated to casework		
Time allocations	Factors influencing	Caseload Ratio
<ul style="list-style-type: none"> 160 hours per month 8 hours of supervision General administration of 16 hours per month Continuous professional development of 8 hours per month 	<ul style="list-style-type: none"> No factors considered thus 160 hours per month 	1:61 cases per month 1:224 cases annually
Scenario 2 (social worker): 80% of workload is allocated to casework		
<ul style="list-style-type: none"> All time allocations indicated in scenario 1 	<ul style="list-style-type: none"> Nature of beneficiaries Travelling 	1:44 cases per month 1:160 cases annually
Scenario 3 (social worker): 80% of workload allocated to casework		
<ul style="list-style-type: none"> All time allocations indicated in scenario 1 	<ul style="list-style-type: none"> Travelling Court work 	1:19 cases per month 1:134 cases annually
Scenario 4 (social worker): 50% of workload allocated to casework and 30% to group work		
<ul style="list-style-type: none"> 80 hours per month available for casework 48 hours per month available for group work 	<ul style="list-style-type: none"> No factors considered thus 160 hours per month 	1:37 cases per month 1:160 individuals in groups per month
Scenario 5 (social worker): Workload allocated as 50% casework, 10% group work and 20% community work		
<ul style="list-style-type: none"> 80 hours per month allocated to casework 16 hours per month allocated to group work 32 hours per month allocated to community work 	<ul style="list-style-type: none"> No factors considered thus 160 hours per month 	1:37 cases per month 1:135 cases annually 1:40 individuals in group per month 175 individuals in groups annually Number of people reached through community work to be determined by the size of target community
Scenario 6 (social auxiliary worker): Workload allocation where 80% is allocated to basic counselling and support to families		
<ul style="list-style-type: none"> 160 hours per month 8 hours of supervision General administration of 16 hours per month Continuous professional development of 8 hours per month 	<ul style="list-style-type: none"> No factors considered thus 160 hours per month 	1:61 cases per month 1:224 cases annually

Scenario 7 (social auxiliary worker): Workload allocation where 80% is allocated to basic counselling and support to families		
<ul style="list-style-type: none"> Same time allocation as indicated in scenario 1 	<ul style="list-style-type: none"> Travelling Nature of beneficiaries 	1:44 cases per month 1:160 cases annually
Scenario 8 (social work supervisor): 65% of time allocated for supervision of direct social welfare services		
Time allocation <ul style="list-style-type: none"> 160 hours per month 20% administrative tasks 10% professional relations 5% professional development 	<ul style="list-style-type: none"> No factors considered thus 160 hours per month 	1:13 supervisees
Scenario 9 (social work supervisor): Supervision only where 65% of time allocated for supervision of direct social welfare services		
<ul style="list-style-type: none"> Time allocation similar to scenario 8 	<ul style="list-style-type: none"> Travelling 	1:10 supervisees
Scenario 10 (social work supervisor): 65% of time allocated for supervision and 50% is allocated to casework		
Time allocation similar to scenario 8 <ul style="list-style-type: none"> 80 hours allocated to casework 24 hours allocated for supervision of direct services 	<ul style="list-style-type: none"> No factors considered thus 160 hours per month 	1:3 social workers 1:44 cases per month 1:160 cases annually
Scenario 11 (social work supervisor): 20% of time allocated for supervision and 50% for management of social welfare services		
<ul style="list-style-type: none"> 24 hours allocated for supervision 	<ul style="list-style-type: none"> No factors considered thus 160 hours per month 	1:3 social workers

Child and Youth Care Work Workload Ratios

Scenario 1 (child and youth care worker): 85% of time allocated to developmental care and support		
<ul style="list-style-type: none"> 16 hours allocated for general administration 8 hours allocated for continuous professional development 	<ul style="list-style-type: none"> No factors considered thus 160 hours per month 	1:47 cases per month 1:257 cases annually
Scenario 2 (child and youth care worker): 85% of time allocated for developmental care and support		
<ul style="list-style-type: none"> Similar time allocation as indicated in scenario 1 	<ul style="list-style-type: none"> Travelling 	1:35 cases per month 1:194 cases annually

Scenario 3 (child and youth care worker): 45 % of time is allocated for developmental care and support and 40% to family work

<ul style="list-style-type: none"> • Similar time allocation as scenario 1 	<ul style="list-style-type: none"> • No factors considered thus 160 hours per month 	Developmental care and support I: 25 cases per month I: 138 cases annually Family work I: 23 cases per month I: 125 cases annually Total Ratio I: 48 cases per month I: 263 cases annually
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Scenario 4 (child and youth care work): 40% of time allocated for developmental care and support, 20% for behaviour management and support and 25% for family work

<ul style="list-style-type: none"> • Similar time allocation as scenario 1 	<ul style="list-style-type: none"> • No factors considered thus 160 hours per month 	Developmental care and support & family work I: 21 cases per month I: 114 cases annually Family work I: 14 cases per month I: 76 cases annually Behaviour management and support I: 21 cases per month I: 114 cases annually Total Ratio I: 56 cases per month I: 304 cases annually
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Care Giver Workload Ratios

Scenario 1 (care giver): 80% time allocated for the provision of care and support

Time allocation <ul style="list-style-type: none"> • 32 hours per month for liaison with families • One day a month for continuous training and development 	<ul style="list-style-type: none"> • No factors considered therefore 160 hours per month 	I: 26 cases per month
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Scenario 2 (care giver): 80% time allocated for provision of care and support

<ul style="list-style-type: none"> • Similar time allocation as in scenario 1 	<ul style="list-style-type: none"> • Travelling 	I: 19 cases per month
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Scenario 3 (care giver): 70% time allocated for provision of care and support and 20% for development of care plans

<ul style="list-style-type: none"> • Similar time allocation as in scenario 1 • 32 hours allocated for development of care plans 	<ul style="list-style-type: none"> • No factors considered therefore 160 hours per month 	I: 22 cases per month
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8.2.3. Managing performance of social service practitioners

A customised performance management and development system for social service practitioners has to be developed based on a competency framework for auxiliary level practitioners, professionals, supervisors and managers.

8.3. Area of Operation

Developmental social welfare services are provided in diverse settings, which are defined and occasionally controlled areas that deal with specific target populations such as hospitals, or medical settings, schools and correctional facilities. The scope of services in these areas is determined by the target group and the specific developmental needs and social challenges linked to the specific area. The performance of practitioners in the defined environments is also guided by social welfare policies and service standards as well as professional ethics and conduct as laid down by the South African Council for Social Service Professions.

9. Integrated Social Welfare Services

Service integration is an integral part of effective quality driven social welfare services. In the context of the Framework, service integration refers to service providers in the social welfare services system who work together to make it easier for service beneficiaries to receive the services and information they need. This also includes government departments working together with other agencies to address the needs and problems experienced by communities.

Some benefits of service integration:

- o Better service to individuals, families, the community and organisations in the system.
- o Service delivery based on the needs of individuals, families, groups and the community, not on organisational structures.
- o More effective and holistic addressing of complex community problems.
- o Cost savings through sharing resources and eliminating duplication.

Various variables have to be considered when integrating services across different levels in respect of partner departments, sectors and social development (departmental) programmes. These variables may vary in emphasis but are considered central to effective integrated and holistic social welfare services.

9.1. Levels of Service Integration

9.1.1. Inter-sectoral and interdepartmental integration

In inter-sectoral and interdepartmental integration, inter-sectoral collaboration is promoted, and the separate functions of different sectors and government departments are acknowledged. The social welfare of South African society is the co-responsibility of all the collaborative partners. However, integration is crucial if this partnership is to achieve the common goal of a self-reliant society.

Appropriate inter-sectoral mechanisms are being established in consultation with the relevant departments to facilitate policy formulation, planning, monitoring, evaluation, coordination, and the definition of functions and responsibilities. National and provincial strategies need to be aligned to include other government departments and relevant non-governmental stakeholders. These inter-sectoral mechanisms have to be functional on a national, provincial, district and local level.

Elements of inter-sectoral and interdepartmental service integration:

- **Engagement:** Any of the inter-sectoral and interdepartmental collaborators can be the entry point for social welfare services.
- **Referral:** Appropriate referral procedures are needed to ensure service beneficiaries are referred timeously and appropriately to service providers in the system.
- **Access to information:** Partners in the system provide information about the services they render including alternative services rendered by other partners.
- **Minimum levels of services:** These should be accessible to beneficiaries at all times whenever they are in the system.
- **Information and record keeping:** Each partner is responsible for the maintenance of beneficiary information, which may be linked to the national information management system guidelines and procedures.

9.1.2. Intradepartmental (programme) integration

The DSD renders services through three core programmes, namely welfare services, social security and integrated development. These programmes are aided by traditional support programmes such as human capital management, information management, legal services, communication, finance, strategy and policy development, monitoring and evaluation, and research programmes.

The core programmes are the mechanism through which the DSD strives to ensure the provision of comprehensive, integrated, sustainable and high-quality social development services to help reduce vulnerability and poverty, and to create an enabling environment for sustainable development in partnership with those committed to building a caring society.

For the fulfilment of this mission, alignment, integration and close collaboration are needed between the different core programmes at national level as well as between national and provincial departments. Entry to any of these programmes should provide coordinated access to all the other programmes with appropriate referral systems and without duplication of service beneficiary data sources. Intradepartmental integration will require the support of an integrated national information management system.

9.1.3. Grassroots/Local service integration

On local level where direct services are provided, inter-sectoral collaboration helps integrate local integrated development plans and local social welfare service delivery planning. The integration of these plans helps harmonise economic and social development and facilitates comprehensive service delivery aimed at achieving social and economic wellness. This ensures the integration of human, social and economic development at community level.

9.2. Levels of Intervention

In order to improve social functioning and quality of life, services are rendered at different levels with a specific outcome in mind. These levels are on a continuum – they are not hierarchical. The level of service delivery is determined by the specific developmental needs and social challenges that must be addressed. The service provider and the service beneficiaries jointly determine the beneficiaries' current social functioning, needs and challenges and develop an intervention strategy that will enable the beneficiaries to reach the optimum level of social functioning and self-reliance.

Current legislation refers to prevention, early intervention, statutory intervention/alternative care/residential care, and reunification and aftercare. **The Framework aligns levels of intervention with current legislation as indicated in Figure 2 below.**

9.2.1. Prevention

This level of service delivery focuses on strengthening and building the capacity, self-reliance and resilience of service beneficiaries while addressing individual, environmental and societal factors to create conditions that enhance or support wellness. Services are focused on preventing development needs from developing into social challenges or risks. This level of service delivery includes the developmental services dealt with in the White Paper and the primary prevention of the development of a 'disease' or problem.

9.2.2. Early Intervention

Services delivered at this level focus on the early identification of risks, behaviour and symptoms in individuals, groups and organisations that could negatively impact on social well-being. The services are aimed at limiting the impact of the risk and preventing the development/progression of social problems. The interventions are designed to facilitate change in individual, environment and societal factors that could impact negatively on wellness. They include preventive services as described in the White Paper and secondary prevention, which focuses on early detection of symptoms to prevent social problem progression.

9.2.3. Statutory/Residential/Alternative Care

At this level, service beneficiaries' quality of life or social functioning is compromised. It could require some form of statutory intervention or it could require the movement of service beneficiaries from the most empowering to the most restrictive environment as they can no longer function adequately in the community. They may have to be removed from their normal place of residence, either by court order or on the recommendation of a service provider, to alternative care (e.g. foster care) or placed in a residential facility. This level of service includes protection services that endeavour to safeguard the well-being of service beneficiaries.

This level also encompasses rehabilitative and continued care services, which do not necessarily require statutory intervention. The level can also be referred to as restorative services or tertiary prevention whose aim is to reduce the negative impact of an existing challenge or problem by restoring service beneficiaries to an improved level of social functioning and quality of life or by limiting the impact of the challenge or problem.

9.2.4. Reunification and Aftercare

The aim of this level of service delivery is to enable service beneficiaries to regain self-reliance and optimal social functioning in the least restrictive environment possible. It facilitates reintegration into family and community life after separation. It also refers to the building of optimal self-reliance and social functioning in residential care.

9.3. Identification of Service Beneficiaries

9.3.1. Protection of Vulnerable Groups

Although services should be equal for all people – focusing on the family as the central unit in communities – specific target groups are more vulnerable than others in South African society. **These groups are:**

- Children
- Youth
- Women
- Older people
- People with disabilities
- Internally displaced people

9.3.2. Life Cycle Approach to Service Beneficiaries

Social welfare services are delivered to beneficiaries in terms of the life cycle of a person, namely childhood, youth, adulthood and aging with the following implications.

- Practitioners should acknowledge that service beneficiaries (individuals, groups, families and communities) go through different stages.
- People with disabilities should be mainstreamed in all programmes thereby enhancing the accessibility of all services and programmes.
- The special needs of people with disabilities should be recognised and responded to at all times.
- Interventions should be based on an understanding of their functioning at the time of engagement with the service delivery system.
- Interventions for individuals should be family focused and community based in line with family preservation and with a view to fostering relations with the broader community.
- Strategic focus areas affect the functioning of life service beneficiaries – hence the need to integrate focus areas into life stage groups to enhance holistic interventions. The expertise in focus areas and life stages is essential for service integration.

9.4. Strategic Focus Areas

The strategic focus areas for social welfare services are linked to changes in the social environment both internationally and nationally. The following current strategic focus areas were identified through assessment of the social environment.

- Poverty alleviation
- Social integration and cohesion
- Family preservation
- Care and protection of vulnerable groups
- Prevention treatment, care and support for substance abuse Support for mental and social health/wellness
- Prevention of crime
- Victim empowerment
- Prevention of HIV/AIDS and care of and support for HIV/AIDS sufferers

In addition to these service areas, some service beneficiaries transcend national and international borders. This is where practitioners and the system apply international laws to facilitate access to developmental social welfare services and to ensure protection of vulnerable groups. Primary national policies and legislation are applied when rendering services to these international groups. Practitioners and organisations should acquaint themselves with relevant international conventions to ensure that they uphold the human rights of such service beneficiaries as well as promote their general well-being whether in South Africa or outside its borders.

9.5. Nature of Services

Organisations exist to provide certain identified services in line with the purpose for their existence. Service beneficiaries engage with the social welfare service system to access the following services which are provided by the Department of Social Development, other government departments and Non Governmental Organisations. Generic basket of services and types of services or interventions linked to each generic basket are provided. These lists are not exhaustive, and can be applicable across generic baskets depending on the needs of beneficiaries served. For instance, diversion programmes can fall within preventative and statutory baskets of services.

- **Prevention and promotion services**

Prevention and promotion services are aimed at enhancing people's capacity to take control of factors that impact on their well-being. These services are anticipatory actions to reduce the likelihood of vulnerability – they reduce risk factors and promote protective factors to ensure the well-being of individuals, families and communities.

- **Preventive and promotion interventions:**

- Universal interventions target the general public or a whole population group that has not been identified on the basis of individual risk.

- Selective interventions target individuals or a subgroup of the population whose risk is significantly higher than the average.
- Indicated/Focused interventions target high-risk individuals who are identified as having minimal but detectable signs or symptoms of social problems.

Prevention and promotion services move beyond a focus on individual behaviour towards a wide range of social and environmental interventions including creating supportive environments, strengthening community action and developing personal skills. Such services are rendered through the application of multiple strategies.

Box: Types of Prevention and Promotion Services or Interventions

- Educational programmes
- Capacity building and empowerment programmes
- Life skills programmes
- Awareness programmes (child abuse, women abuse and gender based violence, substance abuse etc)
- Early Childhood Development programme
- Substance abuse prevention programme
- Marriage preparation programme
- Parenting programmes
- Advocacy
- Information and advisory services
- Diversion programmes

- **Social assistance and relief services**

Social assistance and relief services are for people who, for various reasons, cannot take care of themselves. The objective of these services is to assist individuals who are in urgent need of support – they may be people who are too young, too sick, too old or too injured to look after themselves.

Social assistance and relief services range from ensuring access to social grants to the provision of food, vouchers, cash payments, items of clothing and emergency housing.

Box: Types of Social Assistance and Relief Services or Interventions

- Food banks
- Soup kitchens
- Housing
- Disaster relief programmes
- Employment support/ job placement

- **Protection and statutory (court-ordered) services**

Protection and statutory services are aimed at safeguarding the well-being of individuals and families. Their objective is to help individuals and families live in a safe and nurturing environment where their rights are protected and respected, and their well-being is ensured.

These services are usually provided within the context of a policy and legislative framework that prescribes when and how to intervene. The policy and legislative framework empowers designated people and/or institutions to take the required action to protect the well-being of individuals in the social context of the family and community.

Box: Types of protection and statutory (court ordered) services or interventions

- Foster care
- Adoption
- Diversion programmes
- Court preparation
- Divorce Mediation
- Alternative care programmes
- Mediation and intermediary services

- **Social support services**

Social support services are aimed at enhancing, strengthening and stabilising individual, family and community life by assisting individuals and families to identify and meet their own social needs. They serve as a buffering factor against the negative impact of stress and risk. Four main categories of social support services can be identified: emotional, appraisal, informational and instrumental.

- Emotional support is provided to enhance people's capacity to deal with the feelings/emotions linked to the problem they seek help for.
- Appraisal support is provided to encourage and support progress made in terms of the achievement of goals set in the intervention plan as well as to recognise the strength and potential of those seeking help.
- Informational support includes advice, suggestions and directives to help people respond to personal or situational demands.
- Instrumental support is the most concrete, direct form of social support encompassing help in the form of grants, in-kind assistance, accommodation and other explicit interventions that are normally linked to social assistance and social relief services.

Box: Types of Social Support Services or Interventions

- Family preservation
- Trauma management programme
- Family therapy
- Individual therapy
- Family and marriage enrichment
- Independent living programmes
- Counselling

• Therapeutic, Restorative, and rehabilitative services

These services are aimed at restoring the social functioning of people whose social functioning has been impaired as a result of injury, disability or any chronic physical or mental condition. The services are further aimed at helping people whose social functioning in the family and/or community has been impaired due to substance abuse, crime, violence or chronic disease.

Box: Types of Therapeutic, Restorative and Rehabilitative Services or Interventions

Therapeutic	Restorative	Rehabilitative
<ul style="list-style-type: none"> • In-patient treatment programmes • Offender treatment programme • Counselling 	<ul style="list-style-type: none"> • Victim –Offender mediation • Aggression Replacement programme • Moral Regeneration programmes • Diversion programme 	<ul style="list-style-type: none"> • Vocational training • Employment support • Life skills programmes

• Continuing care services

Continuing care services are aimed at improving the independence and quality of life of people who for various reasons are not able to look after themselves fully. These services maintain or improve the physical, social and psychological well-being of individuals. Care services can be provided in a variety of settings including residential facilities, the home and the community.

Box: Types of Continuing Care Services

- Home based care and support
- Residential care and support
- Supervision programmes

• Reintegration and aftercare services

Developmental social welfare services need to be family focused to strengthen the functioning of individuals within families. Reintegration services are aimed at reintegrating and reunifying individuals and their families once interventions outside the home environment have been completed and terminated. These services are applicable to individuals who have been discharged from residential care facilities, alternative care and correctional service facilities. The success of reintegration and aftercare services depends on the availability and willingness of families and communities to receive and support individuals who are being reintegrated.

Box: Types of Reintegration and After Care Services or Interventions

- Reunification
- Community safety programmes
- Vocational programmes
- Probation supervision

• Economic development services

The purpose of economic development services is to develop opportunities and skills among individuals, families, groups and communities to be economically independent from service providers. These services are for broader poverty alleviation, job creation and the promotion of sustainable livelihoods in communities. Through these services, the harmonisation of socio-economic interventions as stated in the developmental approach to social welfare services can be realised.

Box: Types of Economic Development Services or Interventions

- Income generation programme
- Socio-economic empowerment programme
- Poverty alleviation programme

The framework for integrated social welfare services demonstrates the interrelationships between key elements of service delivery, namely, understanding people according to the life cycle approach, identified focus areas affecting their lives, the generic basket of services to be provided in response to their needs and the levels of intervention guiding service delivery. The diagram below demonstrates the integrated social welfare services framework.

9.6. Social Welfare Service Delivery Model

Social welfare service delivery is generally community based with the family as the central unit of intervention. The essential elements of the service integration model are described below.

9.6.1. Assessment of the environment

Assessment of the socio-economic situation of communities is critical in determining the need for developmental social welfare services on a national, provincial and local level. A direct relationship should exist between the assessment of the environment and the strategies for meeting the population's developmental needs and social challenges.

9.6.2. Profile of service beneficiaries

The findings of profiling reflect individual needs and challenges in the family, different subgroups and the broader community. Profiling indicates what specific programmes and services should be planned and provided in specific communities to improve the quality of life of individuals, families, groups and communities.

Individuals/Families profiling

This process entails collecting information on the needs and challenges of individuals and families as well as on their strengths and the resources available to them that can be used to facilitate the enhancement of their social functioning.

Community profiling

Communities are made up of households. The essence of community profiling is to gather information on community assets that shape the livelihoods of households in a given community. In holistic community profiling, the following assets are considered.

- o Human assets: human capabilities/resources such as education, local knowledge (including indigenous knowledge), health and physiological orientation
- o Physical assets: basic infrastructure (transport, shelter, water and sanitation, energy and communication)

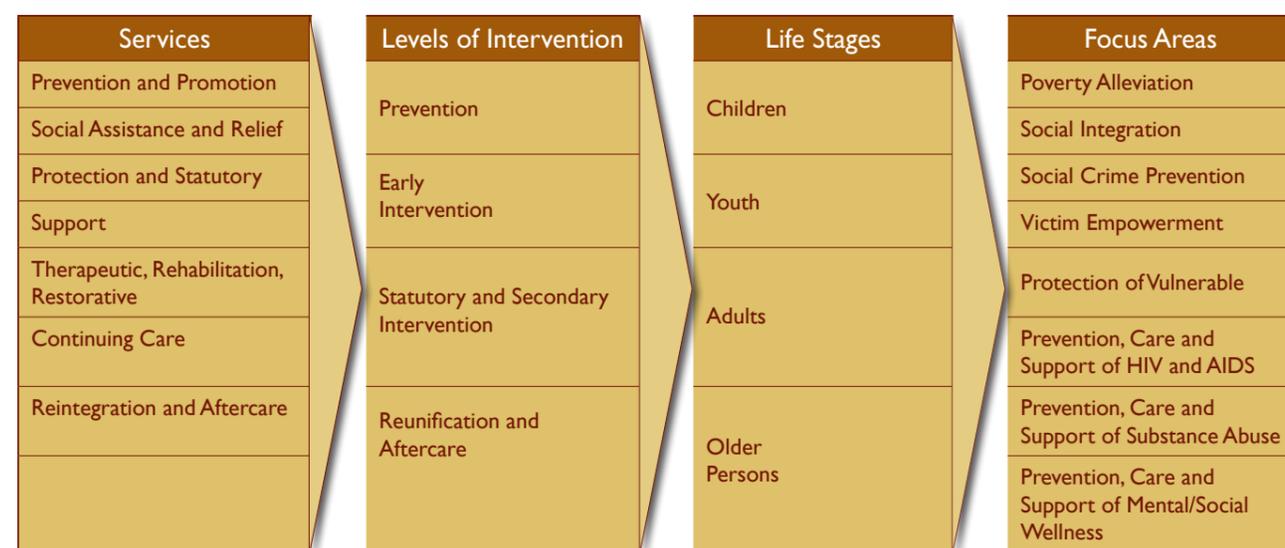


Figure 1: Integrated framework for social welfare services

- o Social assets: social resources (networks, membership of groups, relationships of trust and access to the wider society)
- o Financial assets: financial resources that are available to people (savings, provision of credit, pensions)
- o Natural assets: natural resource stocks available to communities.

9.6.3. Social welfare intervention process

The following elements can be distinguished in the generic social welfare intervention process.

Point of Entry/Engagement

The point of entry/engagement refers to the point where service beneficiaries access social welfare services. Wherever service beneficiaries first interact with the social welfare service delivery system and its practitioners denotes the point where individuals, families and communities can be connected to a broad range of social welfare services. It is therefore the responsibility of social welfare practitioners at the point of entry/engagement to know and understand

- o the social welfare service delivery system;
- o the available social welfare services and programmes;
- o the policies and legislation guiding social welfare service delivery;
- o the need to keep a record of the activities at a point of entry/engagement. (This information should feed into the service beneficiary and/or community profile).

The point of entry/engagement could be at a formal service point of any of the collaborative, intersectoral and interdepartmental partners or at outreach points where practitioners interact with communities.

The point of entry/engagement provides the first experience of the system for the service beneficiary, and it should promote the Batho Pele principles guiding public service delivery.

Screening

The purpose of screening at the point of entry/engagement is to determine broadly what service beneficiaries' needs or challenges are, what services or programmes will be required and to ensure that the beneficiaries gain access to the appropriate social welfare services through intake or referral. (This information should feed into the service beneficiary and/or community profile).

Intake

If, after screening, agreement is reached between the service beneficiary and a specific social welfare service provider, a process of intake or uptake of services commences. The critical information about the service beneficiary is recorded and captured. (This information should feed into the service beneficiary and/or community profile).

Comprehensive assessment

The goal of the assessment is to identify the service beneficiary's needs, strengths and weaknesses in order to develop an appropriate intervention plan. **Crucial elements for the completion of an assessment process:**

- o The skills and competence level of practitioners who conduct assessments must be clearly described to ensure professional and organisational accountability.
- o A generic assessment tool must be developed to guide the assessment process.
- o A developmental approach to assessment must be adopted to focus on the risk as well as the resilience factors pertaining to the service beneficiary.
- o A comprehensive report must be compiled for every service beneficiary assessed and should result in a developmental intervention plan.
- o Relevant information must feed into the service beneficiary and/or community profile.

Planning and implementation of the intervention

The planning and implementation of the intervention is a cooperative process between the service beneficiary and the social welfare practitioner based on the assessment. Both parties should agree on the plan to be implemented, which should take into account the level of intervention as well as the level of service delivery required. The plan should be recorded and should cover the goals or outcomes envisaged as a result of the intervention and action plan.

The implementation of the action plan is a joint process characterised by continuous monitoring, evaluation and recording. The type of intervention depends on the need identified, the level of intervention required, the type of services required, the proposed outcomes or goals, the resources available, the uniqueness of the service beneficiary and the social welfare practitioner.

Evaluation of intervention

Although monitoring and evaluation must take place throughout the process, a final evaluation must be undertaken by the social welfare practitioner together with the service beneficiary/group/community. This will determine if the service beneficiary's determined outcome was achieved and if the social welfare service can be terminated.

Exit strategies

The planning and implementation of exit strategies should take into account the special needs of service beneficiaries who require extended interventions or will never exit the system.

Where possible, service beneficiaries should be empowered to develop the capacity to function independently. Exit strategies should address any follow-up that may be required, the need for re-assessment of other needs, and the need for referral for additional services or termination. These exit strategies should be planned with the service beneficiaries bearing in mind their specific needs.

Referral

Referral to relevant services and programmes is crucial as it builds trust and confidence in the social welfare service delivery system. There are different forms of referrals:

- o Into the social welfare service delivery system from other sectors and departments.
- o Into the social welfare service delivery system from the community or collaborative partners.
- o In the social welfare service delivery system between programmes or services.
- o Out of the social welfare service delivery system into other sectors or departments.
- o Back into the social welfare service delivery system.

Protocols and documents for all forms of referral should be developed and captured as part of a national information system to increase the operational efficiency of the system.

Termination

Termination should be an agreed process between the service beneficiary and the social welfare service provider with self-reliance and sustainability the main factors for consideration. The diagram below demonstrates the generic service delivery model and generic intervention process for social welfare services. In this model, the critical role played by organisational processes, namely, administration, management, research, quality assurance, monitoring and evaluation, and other processes, which enable the delivery of social welfare services, are recognised. Standardised tools should be developed to support the effective implementation of the service integration model and generic intervention processes.

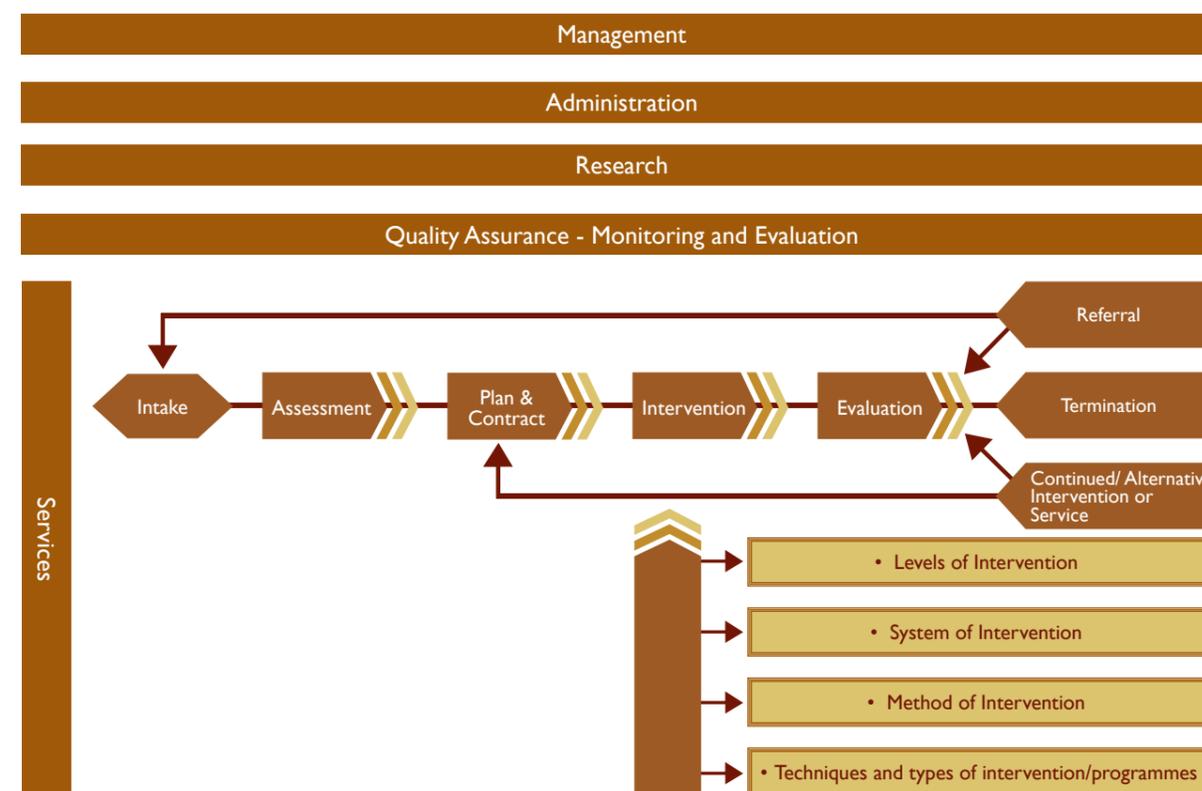


Figure 2: Generic service delivery model and generic intervention processes

10. Research

Social research addresses psychosocial problems, preventive interventions, treatment of acute and chronic conditions, and community, organisational, policy and administrative issues. **It benefits service beneficiaries, practitioners, policy makers, educators and the general public by:**

- o examining prevention and intervention strategies;
- o studying the strengths, needs and interrelationships of individuals, families, groups, communities and social institutions;
- o providing evidence for improved service delivery and public policies;
- o providing guidelines for research-based interventions.

Research in social welfare services is essential because it assists in discovering new knowledge about services and processes and then applying that knowledge to create new and improved processes and services that meet the needs of service beneficiaries. It contributes to evidence-based practice that promotes the consistent use of scientifically validated information and effective interventions in social welfare service practice. Evidence-based practice can be thought of as a process undertaken by professionals where the scientific status of potential interventions is investigated and a thorough explication of the results is shared with clients so that practitioner and clients together can select the most appropriate steps for addressing a specific need. A national framework for research in the social welfare services sector is needed to guide the application of scientific approaches and methodologies in conducting research.

11. Social Welfare Service Enablers

Social welfare services have three integrated elements that guide the operation of the system. These elements are strategic processes that cover the development and implementation of strategic objectives; operational processes that are the activities through which services are delivered; and enabling processes that are the resources allocated for service delivery. These service enablers include appropriate human resources (social welfare service practitioners), sufficient and equitable funding for services and programmes provided by collaborative partners, infrastructure (office space and facilities), and information management and technology equipment.

11.1 Human Resources

The social welfare sector makes use of a range of practitioners with different competencies. To facilitate service integration among different professions and occupational groups, the roles and responsibilities, scope of practice, training and qualifications required and the requirements for registration in respect of all practitioners need to be defined.

The nature of service beneficiaries and the complexity of their needs and socio-economic challenges call for the application of specialised generic knowledge and skills. A framework for specialist and generic practice is needed to guide service delivery and ensure that service beneficiaries have access to specialised services and practitioners where necessary. Social service practitioners perform at different levels depending on the nature of the knowledge and skills needed for the performance of different tasks. A competence framework is therefore needed to guide the appropriate placement of practitioners in relation to services to particular beneficiaries and strategic focus areas.

The training and development needs of practitioners are an integral part of improved service delivery as can be seen in the following levels of training and development.

- o Professional education
- o Continuous professional development
- o Skills training for the implementation of the Framework for Social Welfare Services
- o Ongoing in service training

Social welfare practitioners are governed by a code of conduct that protects service beneficiaries as well as practitioners. The adherence to a code of conduct also requires a commitment from social welfare service providers to create the conditions that will facilitate ethical conduct.

11.2 Funding

Civil society organisations should maintain their autonomy and independence from the state, yet, at the same time, they are collaborative partners. Together with the other partners, they should strive to ensure the provision of comprehensive, integrated, sustainable and high-quality social welfare services to help reduce vulnerability and poverty and to create an enabling environment for sustainable development in partnership with those committed to building a caring society. A funding model is therefore needed that maximises the collaborative contributions to this mission. **A strategy for equitable and sustainable funding should make provision for the following:**

- o Equitable allocation of funds to the provinces to address disparities.
- o Equitable allocation of funds to public and civil society organisations.
- o Reprioritisation in existing social welfare programmes to address strategic focus areas.
- o Allocation of resources to meet rural development needs.
- o Increasing structural efficiency in the social welfare delivery system.
- o Mobilisation of additional development sponsorship for social welfare.
- o Advocacy for adequate and sustainable government expenditure on social security and welfare services.

11.3 Infrastructure

For their effective functioning, certain basic infrastructure and equipment are needed by social welfare service practitioners, particularly social workers who are legally obliged to provide services in a particular manner. Failure to do so renders them liable to disciplinary action. **Infrastructure required:**

- Office accommodation that is accessible, allows for confidentiality, and protects the safety of practitioners.
- Facilities for care (e.g. children's homes, places of safety, homes for the aged) and service centres, which can be established by the state and either managed by the state or outsourced to the non-governmental or private sector.
- Transport to conduct visits to service beneficiaries and to attend to other tasks.
- Furniture that is suitable for interviews with service beneficiaries.
- Communication media such as telephones and facsimile machines.
- Computers and photocopiers.
- Filing cabinets for the safekeeping of records.

11.4 Information Management and Technology

The need for a National Information System for Social Welfare is clearly spelled out in the White Paper for Social Welfare. The system should be developed to inform policy formulation, planning and monitoring and should be compatible with the information systems in other departments, in the provinces and with the information systems of other collaborative partners in civil society and the private sector.

Current systems in the national and provincial departments, as well as in civil society, should be integrated to develop one system that is maintained and supported and that meets the needs of all partners. Information management is also critical for measuring the achievement of organisational goals and for ensuring that objectives are met in line with the strategic objectives of the organisations concerned. This will assist with the documenting processes for research and learning in order to record best practices, to monitor and evaluate services provided by practitioners, and to provide training and guidance to new entrants to the profession.

Without effective information management, it will be impossible to plan services that meet the needs of the population. Social welfare service practitioners need a management and administrative system that facilitates compliance with standards for service delivery. The use of information technology, taking into consideration ethical issues regarding confidentiality, can enhance the effectiveness of such a system. This would require the development of an appropriate system and proper understanding of the needs of users. Extensive training and capacity building are imperative to ensure that information technology becomes an integral part of social service practice.

12. Quality Assurance

Quality assurance refers to activities that are carried out to set standards; it involves a process of verifying or determining whether products or services meet or exceed customer expectations. This can be done through continuous monitoring and corrective actions to ensure that services are as effective and as safe as possible. The quality assurance framework should facilitate the promotion and management of quality social welfare services, which will require the timely revision of legislation and policies that direct social welfare service delivery. The alignment of strategic plans with the policy and legislative framework and environmental assessments will enhance the relevance and appropriateness of social welfare services. This framework should describe the norms and standards for such services and define the indicators to be used for the monitoring and evaluation of service delivery.

12.1 Monitoring and Evaluation

Effective monitoring and evaluation of social welfare service programmes and activities is essential for measuring progress and effectiveness in the provision of developmental social welfare services. Such monitoring and evaluation will assist service providers at all levels to know whether or not the services provided are responding to the needs of service beneficiaries and, furthermore, whether they are consistent with the overall realisation of social welfare service objectives.

Quality indicators to monitor inputs, outputs, processes, outcomes and impact are required for effective monitoring. Current indicators focus largely on inputs and outputs and to a limited extent on outcomes. An extensive set of indicators covering outcomes, processes, and impact needs to be developed based on the norms and standards that govern social welfare services. Such indicators will provide evidence on compliance and the effectiveness of social welfare services and programmes as well as information on the identified or emerging strategic focus areas.

12.2 Norms and Standards

The monitoring and evaluation of service quality calls for standards/regulations that will form the basis for quality assessment activities and ongoing monitoring of delivery processes at numerous levels of service delivery. Without such regulations/norms and standards it is difficult to evaluate and monitor progress – the essence of monitoring is the ability to continuously compare the actual situation against a plan, in this case the norms and standards of a particular service. **Generic norms and standards for the delivery of social welfare services need to be developed in respect of the following:**

- The developmental approach
- Legislation and policy development
- Assessment of the social environment
- Collaborative partnerships

- Service integration
- Monitoring and evaluation
- Research
- Management of social welfare services
 - Quality assurance
 - Management of stakeholder relationships
 - Management of service enablers
 - Human resources
 - Funding
 - Infrastructure
 - Information management and technology
 - Planning and execution of social welfare services
- Generic intervention process on a micro-, mezzo- and macro-level
- Prevention, early intervention, statutory/secondary intervention and reunification and aftercare services
- Services to identified target groups in terms of the life cycle
- Services to address strategic focus areas

A plan for the implementation of norms and standards should be developed to ensure compliance thereof.

12.3 Database

Information management is required to monitor and evaluate social welfare services. This will call for the development of an information management system with a database capable of handling the monitoring of the identified indicators. A database is not an end in itself but rather a means towards the efficient and effective delivery of social welfare services. Different databases are interrelated and relevant for the social welfare service delivery system, namely national, provincial and organisational databases.

The database should be centralised yet with decentralised access granted to social welfare practitioners to ensure accuracy and reliability. Transversal areas should be encouraged to promote a holistic understanding of the service beneficiary population and service providers nationally. Database management in respect of service beneficiaries and service agencies should be guided by the following considerations.

- **Service Beneficiaries Database**

Service beneficiaries is a collective term that emphasises the value system and ultimate recipients of the particular service whether individuals, families or communities.

- Baseline data on service beneficiaries

- Data and document standards
- Individual case records
- Results achieved
- Exit strategies employed

- **Service Organisations Database**

A database of social welfare service providers in the community and the sector should be maintained and updated regularly to facilitate easier referral processes between service providers.

- **Community Profiles**

The essence of community profiling is gathering information that can be used to promote understanding of the community assets that shape the livelihoods of households in a given community.

- Human assets: human capabilities/resources such as education, local knowledge (including indigenous knowledge), health and physiological orientation
- Physical assets: basic infrastructure (transport, shelter, water and sanitation, energy and communication)
- Social assets: social resources (networks, membership of groups, relationships of trust, and access to the wider society)
- Financial assets: the financial resources that are available to people (savings, supply of credit, pensions)
- Natural assets: the natural resource stocks available to communities

13. Implementation Plan

A plan to guide and coordinate the implementation of this framework must be developed in collaboration with all stakeholders.

14. Conclusion

Social welfare services are based on the developmental approach adopted by the sector since the approval of the White Paper for Social Welfare. In terms of this approach, social welfare service practitioners are encouraged to adopt and implement strategies that will empower people and develop human potential and capacities for self-development and self-reliance. The developmental approach recognises the interrelatedness of social development and economic development strategies for the effective implementation of social welfare services.

This approach incorporates social welfare service delivery at a personal, interpersonal and community level. It provides a framework where social security, development and social welfare services are integrated for the benefit of marginalised, poorest of the poor and most vulnerable groups. A more radical approach to the application of the theoretical framework for service integration is encouraged.

The theoretical framework for service integration permits practitioners to apply the scientific basis of their interventions to all activities they undertake. Different categories of social welfare practitioners will thereby acknowledge the role each occupational group plays to achieve better outcomes for service beneficiaries (individuals, groups and communities).

The implementation of the Framework for Social Welfare Services will facilitate a comprehensive, integrated, rights-based, well-resourced and quality developmental social welfare service delivery system.

List of References

1. Department of Social Development. 2005. *Integrated Service Delivery Model*, Government Printers, Pretoria.
2. Department of Social Development. 2009. *Draft Community Profiling Framework for the war room on poverty campaign*, March 2009.
3. House, JS. 1981. *Work, stress and social support*. MA Addison.
4. Lombard, A. 2010. *Integrated social welfare*. Paper presented at the National Indaba on the Review of the Social Welfare Services Framework. 3 February 2010.
5. Midgley, J. 1995. *Social Development: The Developmental Perspective in Social Welfare*. California : SAGE Publications Inc.
6. Department of Welfare. 1997. *White Paper for Social Welfare*. Pretoria: Government Printers.
7. Meyers, M,L. 2001. *Community Work: A South African Perspective*. Potchefstroom: Keurkopie,
8. Patel, L. 2005. *Social Welfare and Social Development*. Cape Town. Oxford University Press, Southern Africa.