

CHAPTER 13

**: EVALUATION OF SENSITISED PRACTICE IN A COMMUNITY CENTRE IN**

**Aotearoa NEW ZEALAND**

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In this chapter, evaluation is explored in the context of sensitised practice in a community centre. The chapter is based on findings from an ongoing study of the interaction between a *whanau* (family) and a community centre in Aotearoa/New Zealand. The focus is particularly on evaluation findings from the process of early engagement with a *whanau* because it allowed the research team to explore more fully the ways in which sensitised practice unfolds and to consider the particular benefits in terms of outcomes for children and their families. When talking about sensitised practice the authors refer to work with families that is based in the communities in which families live and involves practitioners in responding to the needs they present to agencies across a range of service domains. This work provides a foundation for assisting families to engage in positive change processes. Such practice is fundamentally multi-disciplinary in nature. It avoids confining families to particular service lines such as counselling, early childhood, family preservation. Rather, sensitised practice seeks to fit interventions around families, drawing from a broad spectrum of professional expertise in a tailored fashion. It requires culturally competent practice which understands in depth the ways in which culture shapes understanding. Finally, it actively promotes high levels of user-involvement in determining the nature of the helping relationship and in organisational decision making (McCartt Hess et al. 2003).

The chapter begins with a brief overview of the evaluation design; then Te Aroha Noa is introduced, the organisation that was the focus of the evaluation and the case study *whanau*. Attention then turns to several of the key findings from the evaluation. The chapter concludes with

reflection on the evaluation process. This discussion illustrates the complex and subtle ways in which the initial phase of the intervention created a framework within which long-term family development and change became possible.

### **The evaluation design – collaborative inquiry**

Collaborative inquiry (Handley *et al.* 2009) was chosen as an evaluation design because of its emphasis upon collaboration and active engagement of client and community members. Collaborative inquiry provides a framework for active engagement between evaluators, service providers and families as the evaluation proceeds. It requires that evaluators be prepared to invest time in building relationships with all key parties and that they maintain open communication with practitioners, service managers and client families throughout. Te Aroha Noa Community Services is a 'learning organisation'; it has made a commitment to ongoing development and growth and has a long term vision of families becoming partners in the management of the organisation and the delivery of services. The evaluation methodology needed to work with this overriding organisational mission and to be flexible enough to adapt to organisational change over time.

The evaluation utilised a range of methods including individual semi-structured interviews, focus groups, observations and reviews of organisational documents. Individual interviews were completed with service users and with staff. Four focus groups were completed with vertical and horizontal slices of stakeholders – including governance group members, community members, users and staff. In addition to these activities, 14 in-depth guided reflection sessions were held with key agency personnel to articulate and then test out their theory of change. A number of evaluation documents were produced that included a formal report (Handley *et al.* 2009) and a number of internal documents. Finally, observations were conducted in the public areas of the centre which included the early learning centre, group rooms, and reception and meeting areas.

## **The agency and its practices**

Te Aroha Noa operates in a community that is often described as having high social and economic deprivation. Issues of culture have also been prominent as local people have worked to find ways to encourage young people to find positive cultural role models that counterbalance the attraction of harmful activities, such as gang life and substance abuse. Connecting with cultural heritage is seen as a critical intervention strategy because of its role in building a positive sense of belonging. Many parents identify risks to their children in this community and face real challenges in trying to keep them safe.

The works of Friere (1985) and the focus on education and development inform engagement with families. Te Aroha Noa uses strengths-based principles and builds interventions around an understanding of how culture and context inform practice. The Centre has worked hard to build a culturally responsive practice. For example, it has developed welcoming protocols, methods of resolving conflict and bringing disputing parties together as well as a range of daily practices in the early learning centre that all reflect traditional Maori values and philosophies (kaupapa). Staff members are clear that they are not *the* solution to family issues, but rather they provide opportunities and support for people to find their own pathways through the challenges they face. In a community that has few material resources, finding novel ways of solving resource issues is a focus of the work, as is working extensively with other agencies to help families to meet their own needs. A broad spectrum of services are available to families at the centre. these include; early childhood education, adult education, counselling, preparation for school (HIPPY), intensive family development and community development activities that support families to become engaged with community resources and opportunities.

## **The case study *whanau***

This chapter focuses on the story of one family that participated in this evaluation to allow the research team to elaborate upon the ways that sensitised practice contributed to good outcomes for children. This family is an extended network, centred on the relationship between three sisters (See Figure 12.1). The sisters have shared the raising of their children, including providing *whangai* care (culturally-based kinship care) when needed. They have a strong sense of internal integrity and have always cared for each other, done whatever was necessary, and solved their problems internally. The oldest sister made a promise prior to her mum's death that, as the oldest sister, she would take care of everybody. Keeping this promise has presented her with many challenges, and she has made sacrifices in order to honour it. These women have a very strong attachment to each other, and what troubles one generally troubles all. Moreover, spirituality is particularly important to the sisters.

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*Insert Figure 12.1 about here.*

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Six children under 10 years were the immediate focus of the work undertaken. Five were the biological children of the middle sister; one was the child of the youngest sister. The older sister had children who were older and who were *whangai'd* by her mother, and so they were both nephews and brothers to the middle and younger sisters. The two older sisters provided most of the care for these children. The children appeared very comfortable with their aunts, receiving much unconditional and very open love.

Being able to appreciate, respect and work with this complexity and to understand that ultimately the whole family comes first in this unit is critical. While there was substantial conflict between the oldest and youngest sisters that resulted in their seeking support from Te Aroha Noa, it was equally apparent that the preservation of the unit was critical to the well-being of all its members. Simply agreeing to disagree or walking away, although talked about by the sisters, was not an option that would bring positive benefits for these women and their children.

In order to try to protect the youngest child (the youngest sister's son) from a very violent and unstable father, the oldest sister, acting in her role as matriarch and with the mother's (youngest sister's) agreement, took shared custody and guardianship. The two older sisters expressed an ongoing concern that the younger sister was not attentive to the safety issues that her lifestyle created for their nephew, and so the custody arrangements provided a legal framework by which they could act to protect him. Until recently, the younger sister had accepted this and had also agreed to have the oldest sister provide day-to-day care for the child. These actions meant that the statutory child protection agency did not need to become involved with the family.

The younger sister visited her son daily at Te Aroha Noa's early childhood facility and came to the point where she was ready to have full care of him. However, after finding her sisters unwilling to step back and allow this, she instituted legal proceedings to remove her sister's legal status in relation to the child. This was the issue that prompted the *whanau* to seek Te Aroha Noa's help. Lying behind this issue were tangled and painful experiences, losses and grief and sometimes a sense of overpowering fear and hopelessness. The family knew that Te Aroha Noa would provide counselling that was sensitive to their cultural needs, support that would allow them to grow and develop as well as services for their children at the early childhood facility.

The sisters came to the agency because it was willing to work with them in diverse and flexible ways, helping when they asked, and stepping back when required. They recognised that the agency was a mainstream organisation (i.e. it was not provided by a tribal authority or other cultural organisation). However, they found it to be very responsive to their needs as Maori, particularly in terms of recognising spiritual matters, respecting and using family protocol as part of the helping process, and working with them as a complex whole. For their part, the agency exercised great care in acknowledging these matters.

### **Findings from the evaluation – learning about sensitised practice at Te Aroha Noa**

The following discussion maps out the process of early engagement between centre staff and *whanau* and in so doing highlights several components of sensitised practice, drawing particular attention to the subtle ways in which the community centre created an environment within which small steps on the way to change became possible.

#### **1. Early work as scaffolding**

During the evaluation the authors observed the early processes of engagement by a number of workers from different disciplines with this *whanau*. This early process was like scaffolding, creating structural pieces of relationships around which specific interventions, or focused pieces of support, would later be built. This way of thinking about the early process has important implications:

- i) Time must be allowed to get the scaffolding right. Too much involvement might mean that the *whanau* loses its integrity, as good supportive relationships can risk supplanting *whanau* relationships that are under stress. Too little involvement could mean that the *whanau* is left without adequate support. Community Centre receptivity is a critical aspect of scaffolding construction in the early period of support.

- ii) Workers understood that the scaffolding is temporary; it can later be dismantled and the *whanau* can carry on without it.
- iii) As is the case with all scaffolding, the work takes place with care and attention to detail to ensure it can carry the weight it needs to bear. This implies sufficient resources and capacity to do the work required.

The scaffolding metaphor appeared to come closest to describing the early months of the service. This gentle process of unfolding support can often be missed in evaluations; indeed, it is often largely un-documented and certainly would not be “counted” for funding purposes. A lot of this early relationship building took place in the car park when a sister and the key worker met as he was coming back to the office and she was leaving the early childhood centre. These chance conversations enabled the passing on of much information in an unthreatening way, the testing out of responsiveness and trustworthiness, and ultimately the development of a very important helping relationship. The scaffolding helped to make the environment safe with the result that later formal or therapeutic activities could be very focused and effective.

## **2. Early childhood as the spine**

In addition to providing a valued local resource for a community’s children, early childhood has been described as the ‘spine of the resource’ in community centres (Warren-Adamson 2001, p. 12). In the evaluation the researchers learned that this *whanau* first used the early childhood services, and later, as a crisis arose, family members were confident enough to seek social work and more intensive support services. They explained that they were more confident in doing this because they had watched how centre staff worked with others when in crisis. The early childhood service enables local families to seek support with easily nameable matters (such as time-out, training or employment) while they build confidence to be able to share painful and more challenging troubles (Sanders and Munford 2009).



### **3. Community centres as providers of containment**

Warren-Adamson (2001) and Lightburn & Warren-Adamson (2006) have described social work in community centres as offering a sense of containment or holding, linking this to a view of parenting as containment. This sense of containment, they argue, allows for both rational and irrational behaviour to be productively managed in what may appear from the outside to be a chaotic process. The notion of containment provides a framework for social workers to manage their own responses to irrational behaviour and to also offer a sense of refuge to families whose lives are affected by such matters.

The sense of safety and being contained within a secure process was critical to this *whanau*. We noted above that the sisters in our case study family had a very strong sense of themselves as a coherent and self-contained unit and the idea of seeking outside help was difficult for these strong women. Finding a place that could contain the emotional and physical pain that had pushed them to the point of seeking help was a matter that the sisters raised frequently in the evaluation.

The agency provided them with numerous workers and different settings where they could attend collectively and individually to different matters, and they had a very strong sense that it would not let them down in this delicate process. They talked of feeling safe and sensing that the workers attached to them had an intuitive sense of what was right at the time. So the sense of safety was not only about security around the implications of their troubles and the protection of their information; it was also a deeper sense of connection to the people who were working with them and who profoundly understood what was happening, even if they did not always know the details.

### **4. Multiple modalities**

As implied in the preceding discussion, the agency was able to work in a wide range of ways with the *whanau*, as a unit and also individually. Over the first six months of the service the following resources were provided:

- early childhood care to three preschoolers on a weekly basis;
- four *whanau* meetings;
- clothing from the community shop;
- support to attend lawyer meetings and two court hearings;
- personal support and counselling to the three sisters by different members of staff;
- care for the school age children after school so mother could attend classes;
- individual counselling to one of the children;
- after-school intense interpersonal support to oldest child twice weekly; and
- advocacy and support in the sisters' interactions with the school.

Staff members were highly inventive about finding routes to engagement, supporting Warren-Adamson's (2001, p. 7) reference to community centres as *beacons*. Community centres can provide a variety of "acceptable" routes for accessing a wide range of services. The multi-disciplinary nature of the support provided meant that varying combinations of adults and children could be worked with and individual support could also be provided. The *whanau* found it particularly valuable that they did not have to move among a number of agencies to have their needs met.

Being local was also an important component of effectiveness. The sense of being seen as wanting, or not adequate, was keenly felt by local residents. This undermined confidence when seeking support outside the physical boundaries of the suburb. Understanding the struggles faced by families, who often could not afford to live elsewhere, but equally knowing about the strengths and positive dimensions of life in this community, was important to families. It enabled staff members

to target their support knowledgeably. The sisters talked of feeling very warmly welcomed to the centre and that, because staff 'knew how it was', they were able to be themselves.

## **5. Only families can create change**

The sisters' narratives highlighted the reciprocal nature of their interactions with the centre. This disrupted the notion of experts telling families how to change and the sense that families are objects of intervention. On numerous occasions the sisters talked to the research team of the contributions they made to the centre and the sense of belonging they had in relation to it. Staff members also reinforced this sense of reciprocity, referring to the cultural expertise the sisters brought to the centre and its importance in deepening their capacity to work with others. The researchers also observed these reciprocal relationships when they visited the centre, noting staff members seeking guidance from the sisters about cultural protocols, for instance.

Empowerment is a key concept for social work; however, it is not without its challenges when it is packaged with personal support. As Scott and O'Neil (1996) have argued, suggesting that a social worker can empower a client implies a power imbalance that contradicts the very notion of empowerment. Strengths approaches (Sanders and Munford 2009) allow support to be seen as reciprocal rather than one-way processes and this provides a useful way of thinking about empowerment within an intervention context. Thinking about families as competent and able to give as well as receive support and resources is an important orientation because it is the family that will create and sustain the change (Handley *et al.* 2009). The sisters spoke of a deep respect for the expertise of the social workers. They had checked them out, and decided that this centre would be able to meet their needs. This was very significant because there are a number of traditional, *iwi* (tribal) providers in their local community and the researchers would have expected that, given the significance of their cultural roots to their lives, they might have chosen one of these providers. They noted the respect and recognition that the agency accorded their cultural practices. One sister,

in particular, highlighted the care with which workers prepared for the support they gave, making sure that they were well briefed on the most appropriate protocols for different circumstances.

## **6. Patience and care over the process**

The evaluation demonstrated that at Te Aroha Noa, individual and family work was only one dimension of practice; staff members also harnessed capacity and drew the community into its work. Work grew out of relationship building and normalising the development of helping relationships was an essential characteristic of this work. Support was located on a relational continuum and “clients” could locate themselves at different points on this continuum over time; giving as well as receiving.

The sisters talked of the patience of staff and a sense that they would not give up, but equally that the Centre would not allow them or others to be placed at risk. While the promise was of unconditional support, it was also of *informed* support, where careful decisions were made about what was and was not acceptable. This was important to the sisters, who talked about the impact on their community of gang life, drug abuse and child neglect. There was a sense that support and resources were available and that acceptance involved understanding the reality of these risks. The sisters also appreciated that paperwork and bureaucratic processes did not drive the support. Their narratives described a menu of resources that they could access as their needs dictated. In this sense the intervention fitted around their lives - not the other way around. They were in control of their own change process (Gilligan 2004), something that was very important, given their desire to resolve issues internally. They talked of acquiring tools that they could then use in other situations. Repeatedly the sisters stated that staff members did not tell them what to do, that they were in control, and that the support enabled them to work out what needed to happen. For their part, workers talked about this initial phase as a very uncertain one, where they were working out how

far they could go, wanting to contribute to significant changes, but equally not wanting to step in front, rather trying to enable things to happen without pushing too hard.

### **Outcomes for children**

Work with the sisters and their children continued on beyond our project. By the end of the evaluation some interesting changes had been noted in the children's behaviours. Educators who had been working with the children at school, in after-school activities and at the early learning centre noted that incident reports relating to these children had substantially reduced. For the oldest son, who was rapidly becoming labelled as a 'difficult' student, these changes were very important. The balance in his school experience had gradually begun to shift from primarily negative to being increasingly positive. In particular, it seemed that the individualised after-school support he had received from the Centre gave him a safe adult to whom he could take his frustrations and worries and with whom he could develop strategies for trying to do things differently at school and home. Behind the scenes, his key worker had met with school staff and also worked with his mother and aunts to encourage them to be ready to respond positively to him when they saw him implementing these strategies, and in this way to help create spaces for him to be recognised for what he did well rather than what he did poorly.

Direct work also occurred with the youngest child in the early learning centre, particularly around behavioural problems he presented with which involved disruptive and angry outbursts. The centre had a very strong, positive behaviour management plan which was implemented carefully with this young child and which was also used as a framework with the sisters to help identify ways in which they could re-orient their parenting strategies with him so that there was consistency between home and centre. Gradually, this little boy's behaviour began to indicate less stress, and staff in the centre began to more frequently witness a delightful child emerge from the angry shell.

Considerable effort was expended with the sisters in supporting them to develop positive child behaviour management approaches that were non-violent. Creating good outcomes for children requires more than strong parenting support and the development of consistent management plans around children's behaviour. The struggles around parenting and the angry and challenging behaviour of children often references back to serious unmet emotional needs in their parents. Building parent capacity and skill alone does not address these issues. Thus, work also focused directly upon the emotional needs of the three mothers in this *whanau* and it was this deeper set of interventions that created the emotional context within which the sisters could become 'available to parent' and apply the parenting skills they were learning (Sanders and Munford 2009). At the end of the evaluation, the sisters reported increased numbers of positive encounters with their children, reductions in the use of physical punishment and they relayed stories of happy family outings in public and more settled family times. The reports from school and the Community Centre indicated that all the children were more settled and were observed to be happier, more content and more confident. Incident reports from both places did not feature their names, as they had prior to the intervention. (Similar responses were found by Aldgate and Rose in a Scottish project described in Chapter 13 of this volume) The prospects for these children had improved as a result of the multi-faceted support they had received from the agency and from their own networks.

### **Reflecting on the evaluation processes**

The action evaluation developed a 'recursive' character beginning with a fairly standard framework which was based around programme logic and a commitment to produce programme learning for staff throughout. Four key questions structured the evaluation overall, these were negotiated with staff and they were used to shape the questions that were asked in the interviews and focus groups and to structure observation:

1. Who are the people we serve and how do we do this?
2. What values, principles, skills and knowledge do we use to do this work?

3. What difference do we want to make with these people and how do we think that we can best contribute to this?
4. How do we know when we have been successful and when we haven't?

The recursive character developed as evaluation learning fed into service delivery and the development of new initiatives. For instance, once the early focus groups had been completed, staff indicated an interest in pursuing guided-action reflections on a more regular basis with the research team to articulate more fully the theoretical underpinnings of their work as a multi-disciplinary team. This work enabled staff to more fully understand how positive change can be achieved and sustained at the micro level in their direct work with families, but also at a wider organisational and community level. Their guided-action reflections developed into a more extensive research programme (Handley *et al.* 2009) which then formed part of the framework for the subsequent development of an innovative community development anti-violence programme, which itself was the subject of a new evaluation, which in turn fed into new programme developments.

In this way, the evaluation produced localised findings that were useful in the immediate context of the family support and early childhood services. It also generated activity and reflection in a more generalised way that led to staff and family interest in ongoing evaluation of activities and the development of new initiatives. Fundamental to all of this activity was the strong relationships and trust established between the evaluation team and staff. As outsiders, evaluators constitute an intrusion into the daily life of workers and families who use community Centres. However, they bring useful skills and have the potential to make a valuable contribution to how Centres operate, leading potentially to improvements in life circumstances for families. Working carefully to build trusting relationships with staff and with clients who use services is an important part of the evaluation task. This leads to better quality information and it also helps to reduce any negative impacts on the daily work of the organisation. Building strong relationships provided us with a

framework within which we could test out our emerging findings and it also provided us with opportunities to undertake peer analysis of data with practitioners. This significantly enhanced the quality of the evaluation and it also meant that staff were enthusiastic about using the findings immediately to build their practice and to innovate in the longer term.

## **Conclusion**

The data from this evaluation resonates with material generated internationally about community Centres. Discussions with agency staff have suggested that members of a complex *whanau*, such as the one discussed here, are frequent participants at the Centre, and so we would expect that the flexible and responsive capacity demonstrated here has relevance beyond this single *whanau*. The multi-disciplinary capacity of the Centre and its ability to be highly flexible and responsive are particularly salient characteristics. Te Aroha Noa has been particularly successful in blending components of cultural practice into their work with family and *whanau* support. This was seen, for instance, in their willingness to intuitively build significant cultural protocols into their practice.

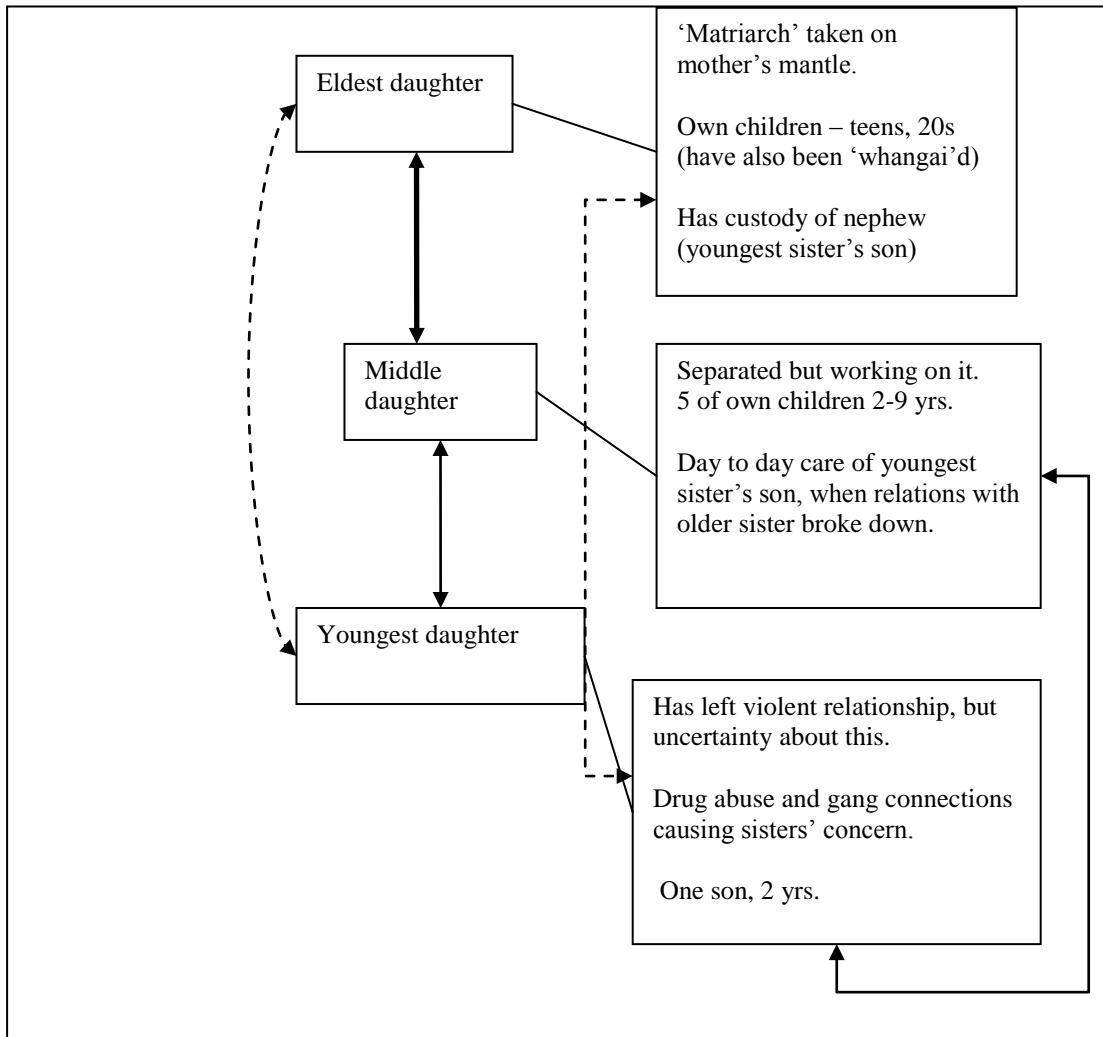
As with many agencies in Aotearoa/New Zealand, the Centre operates from a strengths base. What is unusual about it, however, is that it takes this focus on strengths and capacities further, arguing that the *whanau* that come within its orbit contribute to its daily operation and its long-term future. The development of community leaders as part of the process of giving support is a novel approach that, as noted above, is now providing some momentum for wider community level change around violence.

The focus on individual, *whanau* and community change is complex and presents some significant challenges for the Centre as they work to balance all of these different dynamics constructively. In particular, it is clear that the focus on capacity and skill of user-families is a valuable strategy for creating personal change momentum. It encourages the development of outward looking parents



who develop a strong sense of self-worth and efficacy by making contributions to the functioning of the Centre and the well-being of others in the wider community.

**Figure 17.1: The case study *whanau***



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