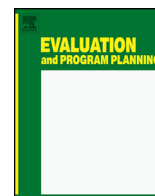




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Evaluation in the field of social services for minors: Measuring the efficacy of interventions in the Italian service for health protection and promotion

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ABSTRACT

This article presents the availment of a new Methodology for the efficacy evaluation of interventions in the field of social science: the Method of Computerized Textual Data Analysis (M.A.D.I.T.). In the beginning, we present some elements of the international and Italian legislation referred to the efficacy evaluation and about the child protection. Subsequently this work describes the process of efficacy evaluation of an intervention of minor protection delivered by a public Italian Service, the Minor and Family Service, MiFa. The MADIT Methodology is applied to the efficacy evaluation and it is interested in discursive repertoires, defined as “a linguistically intended mode of construction of finite reality”. The aim of the research is to show, through the description of every step of the implementation of the Methodology based on text analysis, how is possible to notice if there are progress in the direction of the objective of intervention of child protection. The results describes how from a starting situation of “first appearance of psychiatric career” referred to the minor, the work of the psychologist of the Service MiFa has enabled to produce a shifting in the direction of objective of the intervention, that was “developing the competence of the minor to identify objectives”. Through this work, we show how a rigorous methodology for assessing effectiveness may contribute to improve the quality of service of Minor Protection and may also be suitable for new fields of social science.

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1. Introduction

Evaluation is one of the most discussed topics in the social field today. Present economic circumstances and the need for social sciences to achieve recognition for the efficacy of their work urge researchers to look for new methodologies, with the aim of preserving the epistemology of the complexity that characterizes the field and, at the same time, to demonstrate the changes that professionals are able to achieve. This is a difficult task considering that many workers (and organizations) in the field come from a tradition of thought aimed mainly at achieving charitable goals and offering moral support. These days, however, common sense and many institutions feel the need to attest to the efficacy of their work, rather than merely participating for philanthropic reasons.

For example, current international legislation relating to socio-medical services identifies the need to evaluate and ensure the effectiveness of interventions in this field (Burkhardt et al., 2015; Claes, van Loon, Vandeveldel, & Schalock, 2015; De Ambrogio, 2003; Lippi, 2007; Morell, Hilscher, Magura & Ford, 2010; Shaw & Lishman 2002). In the last decade, evaluation has consequently become one of the main topics for social work; for instance, research studies on evaluation have been implemented in several areas, such as psychiatry (Fava & Masserini 2002), drug addiction (De Angeli & Serpelloni, 2002), health (Means, Magura, Burkhardt, Schröter, & Coryn, 2015; Mihalic & Elliot, 2015) or social services (Tomei, 2005). In spite of this, the literature of the sector shows that the development of practices to develop efficacy in the social field is still limited, particularly in the field of child protection. The reasons are linked to the difficulty of involving the main reference users, i.e. minors and their families, and introducing evaluation tools in relation to situations that are often problematic and marked by conflict.

The purpose of this paper is to present evaluation of effectiveness in an Italian Public Service (Child and Family

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Services-MIFA) through a methodology of analysis of textual data (MADIT). Our contribution is aimed specifically at the field of child protection, where emotional involvement makes it difficult to gather sufficient elements to carry out evaluation. Surveying texts from minors, and analysing them through explicit discursive repertoires, allow us to assess interventions by Service operators. This type of evaluation allows one hand to implement the quality of performance offered by the Service, and the other to act as a rigorous methodological proposal to use other similar services.

1.1. Child protection in international and Italian legislation

At international level, one of the most important existing inputs in child protection is the Convention on the Rights of the Child, written in 1989 by the United Nations Organization (UN). Article 3 of this Convention defines a responsibility for each State to ensure the “care and protection” of the child, and to ensure that institutions and services competently take care of the “health” of the children. Article 24 specifies “it is a right of the child to enjoy the highest attainable standard of health”.

Compare this with the Italian context, in which our Constitution ensures health protection as a fundamental right of individuals (Morana, 2002). Specifically, as far as minors are concerned, our Constitution protects motherhood and childhood and supports the creation of families (Crisafulli, 1952). Furthermore, it gives parents the rights and duties to support and bring up their children, and in case of need, it ensures that their tasks are performed differently (Andolina & Vignera, 1997).

On the Italian scene, the National Health System (SSN) is the ensemble of the institutional bodies which are responsible for the protection of the right to health at national level (Ministero della Sanità, 1998). National health services supplied by SSN include all activities provided by the welfare system aimed at supporting the person in need with health problems (Degani & Mozzanica, 2009). Consequently, the area of child protection, as organised at national level and defined by the international framework we have described, can be considered relevant to health. As far as the present regulation of the system of services is concerned, law 328/2000 “for the realization of an integrated system of interventions and social services” makes clear that the need exists to create an integrated system of services for the promotion of the quality of life of its citizens. That is, it deals with the need to promote a process of co-responsibility of the different sectors in this field at local, regional and national levels. As far as family is concerned, such a law refers to the “enhancement and support of family responsibilities”.¹ The first paragraph of article 16 states: “The integrated system of interventions and social services recognizes and supports the unique role of families in the upbringing and care of the individual, in the promotion of wellbeing and in the pursuit of social cohesion. It supports and promotes the manifold tasks that families carry out both in critical and difficult moments and in the development of daily life; it supports the cooperation, reciprocal help and interdependence of families; it promotes the proactive role of families in the presentation of proposals and projects for the delivery of services and their evaluation. In order to improve the quality and efficiency of the interventions, workers will involve and empower people and families in the organization of services”. So this legislation moves from a notion of typical welfare services to a system of social interventions aimed at the promotion of wellbeing (De Ambrogio, 2003), by actively involving the participants in the intervention.

2. Evaluation in the social field

2.1. The current debate on evaluation systems in child services

The services provided at international level are called Child Protective Services (CPS) and are often included in the Department of Social Services. In Italy, this service is known as “Servizio Minori e Famiglie” (Service for Minors and Families) and its objective is to promote the management of critical issues involving minors and their families. This objective gives rise to a number of management processes, such as reception, building a relationship with the user, sharing of the work, evaluation of critical issues and possible involvement of other institutional figures, such as judges and courts. In this study, we have dealt with the assessment of the service, namely how it fits in based on the objectives defined. We will not examine how the assessment of minors is carried out. Of course, the two processes are interconnected, however our focus in this context is on the assessment of the service from which the outcomes for children and families obviously derive. The success of child protection systems, both locally and nationally, is measured on the basis of whether children are receiving effective aid. The services involved in helping children and families need to monitor the impact they are having. The assessment quality of a service is fundamental if we are to respond to the needs of children and families, even if it is not always easy to demonstrate an improvement for children as a result. Studies have, however, demonstrated that a service that does not evaluate its own work produces inferior results in that errors fail to be recognised, and are therefore repeated (Farmer, Sturgess, & O’Neill, 2008; Fauth et al., 2010). Shortcomings in evaluations have also been reported in situations involving serious injury or death (Rose & Barnes, 2008). For example, an incorrect assessment of intervention times resulted in the worsening of situations of instability (Beecham & Sinclair, 2007; Selwyn, Quinton, Sturgess, & Baxter, 2006) or abuse (Biehal, 2006; Farmer et al., 2008). Evidence shows that, in some circumstances, practice did not meet the standard required (Holland, 2010; Farmer et al., 2010; Selwyn et al., 2006). Substandard, incomplete or non-existent assessments were of particular concern. Five areas have repeatedly been identified in studies as problematic: differential thresholds, an error in the involvement of the child, shortcomings in gathering information, shortcomings of critical analysis, and deficiencies in interprofessional work (Biehal, 2005; Munro 2010, 2011). In contrast, a proper evaluation of the service increased the possibilities of making improvements in the life of the family or the child (Department of Health, Department for Education and Employment, & Home Office, 2000; Farmer, Moyers, & Lipscombe, 2004), as well as in the decision for early intervention (Wade, Biehal, Farrelly, & Sinclair, 2010). Studies have also identified a lack of reference to research or explicit use of theory in social workers’ assessment reports (Macdonald & Williamson, 2002; Preston-Shoot, 2003). Limited resources and the pressure of work generally lead to a tendency to increase the thresholds for access to services (Brandon et al., 2008; Sheppard, 2009). Of course, the evaluation of a service does not just involve the individual operator, but the entire network of figures that make up the service, from the decisional to the management and operational side. The data from these studies highlight the need to reflect on how performance evaluations of child protection services are carried out.

Klein (2000) has identified four main ways in which experts can permanently improve the service: a) by committing to practices defined through a precise definition of objectives and their evaluation; b) by creating extensive pools of experience; (c) by carrying out an assessment of the process and collecting feedback; d) by analysing personal experience and errors committed after assessment takes place.

¹ 13rd International Conference on Quality Welfare, “La tutela dei minori: buone pratiche e innovazioni” (Child protection: good practice and innovations). Riva del Garda, 11–12–13 November 2010.

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