





RETICULATE Project (n. VP/2020/003/0214)

D1. Deliverable

Methodology for the active recruitment of target groups of the project actions

(WP2 - task 2.1, 2.3)

by fio.PSD

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FOREWORD

The Reticulate project identifies two specific target groups as recipients of project actions: the homeless and vulnerable families with minors. These target groups have been identified because they represent population groups that may have difficulty in accessing services and consequently risk not receiving adequate support to overcome their status of need, fragility and social marginalisation.

The reasons for the difficulty in reaching these population groups lie, on the one hand, in the multidimensionality of individual problems and the extent of complex needs, and, on the other, in the functioning of the social services system, which sometimes operates in a fragmented or discontinuous manner, failing to guarantee comprehensive and continuous care of individuals and households with greater elements of vulnerability.

The WP2 of the Reticulate project planned to define an action-research methodology aimed at encouraging the involvement of families in difficulty and homeless people in the experimentation of an innovative participatory approach to improve services.

This methodological approach is innovative in the direct involvement of the target groups for the identification of access barriers and the definition of actions that favour their effective integration into the territorial services system.

This document is elaborated for internal use of the project. For any requests, please contact WP Leader fio.PSD - segreteria@fiopsd.org







1. Conceptual background

For the social services system, approaching/reaching out to those experiencing homelessness and giving them assistance is not a simple matter. At the same time, homeless people face all the difficulties related to daily subsistence and the multiple barriers they encounter when entering housing facilities or getting the support they need.

Knowing the services system and how they work, identifying the barriers to accessing services that target groups encounter can be preparatory actions to develop proposals for overcoming these obstacles and developing a methodology for the active involvement of the most fragile people in defining more inclusive and participatory services.

The issue of accessibility is complex. There are no simple or one-size-fits-all solutions to completely solve the problem of housing the homeless or guarantee take-up of social welfare benefits for vulnerable households. For homelessness, municipalities usually have first reception services offered on the streets or easily accessible facilities, such as temporary dormitories and large social canteens. These services are offered spontaneously by third sector organisations (NGOs) or in the form of an agreement with competent institutions on an almost regular basis. In more structured intervention systems for severe marginalisation there are also material goods and food distribution services, shower services, harm reduction and mediation services to find temporary housing. The most innovative Housing First/Housing Led projects have developed very recently. The services system aims at helping people cope with their basic needs, but low-threshold services are hardly ever oriented towards the social inclusion of the people they address. These interventions often represent a sort of preparatory step towards subsequent social welfare paths within an integrated system of services (see Linee di indirizzo per il contrasto della grave marginalità adulta in Italia- Guidelines for combating severe adult marginalisation in Italy, Ministry of Labour and Social Policy, 2015).

There are also many difficulties that vulnerable families with minor children may encounter in accessing the services they need. The reasons for the difficulty in reaching these population groups can be linked both to the multidimensional nature of the problems and the range of complex needs that the family unit brings with it and to the







functioning of the social services system that sometimes operates in a fragmented or discontinuous manner, failing to guarantee comprehensive and continuous care of individuals and households with greater elements of vulnerability. There are several studies at European level that have already investigated what kind of difficulties a person or a household can encounter when accessing minimum income or social assistance measures, such as the thematic study on the "minimum income take-up of vulnerable groups, in particular the homeless" carried out within the EAPN¹. The study² highlights different types of barriers to take-up, such as the lack of communication and information to potential holders who therefore do not know what rights they have and are not in a position to "claim" them (the phenomenon of unknown rights and unclaimed rights). Then there are the administrative barriers and the unobtained rights due to a series of bureaucratic practices that the most vulnerable people struggle to fulfil. Finally, cases are also mentioned in which 'intermediate bodies' (voluntary organisations, NGOs, legal protection offices) discourage people from engaging in a battle to obtain the right they would be entitled to because the cost-benefit balance is not in their favour (for example, it is not convenient to engage in a legal battle or to undertake the process of collecting the necessary documentation for a benefit that would not resolve the condition of vulnerability anyway).

2. SERVICES FOR VULNERABLE FAMILIES AND HOMELESS PEOPLE

In recent years, the sector of services for vulnerable people or in severe poverty has made several advances that have broadened its offer.

In the European context, countries such as Finland, Belgium, Ireland, but also Italy, the Netherlands and Spain have promoted government lines, programmes and funding, including the *European Structural Investment Funds*, aimed at strengthening the social infrastructure of services and the professionalism of territorial services. In many

¹ Boccadoreo, European Minimum Income Network thematic report Non take-up of minimum income schemes by the homeless population - EMIN - 2014, available on https://eminnetwork.files.wordpress.com/2014/12/emin-homeless nontakeup 2014 final en.pdf

https://welforum.it/laccesso-alle-prestazioni-sociali-da-parte-della-popolazione-senza-dimora/?highlight=%22crepaldi%22

 $^{^2}$ Italy was represented by the scientist Chiara Crepaldi from IRS - Istituto di Ricerca Sociale, whose public reconstruction published in the $17^{\rm th}$ December 2019 issue of Welforum in the European Policies section, is available on







European cities, for example, a paradigm shift is taking place in homelessness services that go beyond the logic of the "single canteen or dormitory service" or the "emergency service" responding only to basic needs and aim to specialise services by making them more adequate and coherent with the different needs that people have ("gender-oriented" or LGBTQ+ discriminated services, services for family homelessness, digital systems for civil registration), services aiming to guarantee decent housing, projects for housing first and housing led (European Parliament resolution on *Access to decent and affordable housing for all* (2019/2187(INI).

Vulnerable families with minors too, especially families with a migration background, can refer to family-oriented programmes that aim to intervene on social inclusion (the numerous projects supported by the *Asylum, Migration and Integration Fund*), guarantee housing, promote job inclusion and protect the rights of minors (*Child Rights Strategies*).

However, despite developments and progress, there are open challenges that urban welfare systems still have to face, one of them being the **barriers that the most vulnerable people face in accessing services**. Reaching out to street people (so-called *reaching out* as it is defined in Europe), offering them a pathway to help as well as ensuring access to care services is not an easy matter. At the same time, the most vulnerable people often face multiple barriers to enter a dormitory or obtain housing and support appropriate to their needs.

Given these limitations, in order to promote improvement strategies, it may be important to first gain a deeper knowledge of the services system and better understand how it works. At the same time, it is necessary to analyse the social profiles of the people who make up the potential service users, to understand which problems, needs and resources they have. Often, people access services but use them passively without active involvement or there are people who are unable to access services because of the many barriers they encounter (families living in peripheral areas of the city, people who encounter language barriers, families in recent poverty who do not know services, homeless people with health problems who live in a status of severe isolation, etc.).

Therefore, knowing the services system and how it works, identifying the barriers to accessing services that target groups encounter can be a preparatory action to develop proposals for overcoming these obstacles and the methodology for the active involvement of the most fragile people in defining more inclusive and participatory services.







3. HOW TO MAKE SERVICES MORE ACCESSIBLE?

The methodology proposed by fio.PSD within the Reticulate project as Lead of WP2 - Task 2.1 - D1 aims to achieve the involvement of families in difficulty and homeless people in the experimentation of an innovative participatory approach to improve services.

This methodological approach is innovative in the direct involvement of the target groups to identify access barriers and to develop services in order to include and respond to previously identified problems and needs.

It should be pointed out that, given the peculiar nature of the target groups involved and the fact that these target groups were identified by the Reticulate project as representing groups of populations that may encounter difficulties in accessing services and consequently risk not receiving adequate support pathways to overcome their situation of need, the first step proposed is to meet the services and institutional contact persons and then people directly through an intermediation by the services themselves. In fact, a recent publication by FEANTSA explains that "the best way to understand someone's problems is by listening to them"³. A previous research conducted in England also relied on direct consultation with homeless people to ask them, ten years later, what had not worked in relation to the opening of some night reception services in the city4. The research had been useful to understand that the introduction of emergency solutions for the night had not been sufficient to improve reaching out of the most fragile people. At the same time, it showed that it was of great importance to consider the various shortcomings of the entire response system offered to street homelessness in order to aspire to a real improvement in the situation. The study showed that only the introduction of long-term, supportive housing solutions would improve the level of reaching out to vulnerable street people and enable people to access the welfare system with dignity and break the spiral of poverty.

³ FEANTSA, People Experiencing Homelessness Ask EU Leaders to Listen and Talk to Them, 2022 available on

https://www.feantsa.org/en/report/2022/01/21/a-collection-of-testimonials-from-people-with-experience-of-homelessness?bcParent=27

⁴ Shelter England, Reaching out, Reaching out. A consultation with street homeless people 10 years after the launch of the Rough Sleepers Unit, 2007,

https://england.shelter.org.uk/professional_resources/policy_and_research/policy_library/reaching_out







Knowing the services system and listening to the voice of the people directly affected can make a difference.

The research questions are:

- a. What are the barriers, problems and needs that the target groups encounter when accessing territorial social services?
- b. What could be the tools and methods to improve the accessibility of services and encourage direct involvement of people in the help pathways dedicated to them? How can the capacities (empowerment) of people be strengthened so that they follow an effective and lasting help pathway?







4. THE RE-PART METHODOLOGY: A PARTICIPATORY-BASED APPROACH

The Re-PART⁵ methodology proposed is a *mixed method methodology* that includes a first phase of desk analysis (exploratory study) to identify the characteristics of the services and a second phase of field research (qualitative and participatory survey) that aims to meet operators and target groups to collect their opinions, expectations, useful suggestions to strengthen the services, make them more inclusive and adequate to overcome the status of need, fragility and social marginalisation in which many people find themselves who are unable to enjoy an effective path of social reintegration.

4.1. PHASE 1 - CONSULTATION AND MAPPING OF THE WELFARE SERVICE SYSTEM

The first phase envisages an initial overview of the services aimed at the target groups active on the territory in order to identify informed estimates on the dimension of the phenomena, the prevailing fragility profiles, the strength and critical factors of the social services system and deepen the point of view of the territorial contact persons regarding the barriers to accessing the services and how these could be overcome also through the experimentation of a new service, such as the one promoted within the Reticulate project (the one stop shop).

A. Preliminary meeting with territorial partners

Initially, it may be preparatory to identify the persons in charge of the territorial services for the target groups and organise a meeting between the research team and the contact persons of the municipalities concerned. The meeting could also immediately involve the NGOs working in the sector. The purpose of the preliminary meeting is to get to know each other personally, to establish a relationship of mutual trust and cooperation, present the objectives and instruments of the action-research, and explain the usefulness that can be derived from it. The meeting can also be an opportunity to make an initial ex-ante assessment of the sustainability of the research and how to possibly make corrections or adjustments in the time schedule and the activities that the research team intends to carry out. Among other things, stakeholders could immediately introduce elements that the project had initially overlooked and which instead deserve to be addressed. The construction of the *context-oriented analysis* dimension at this stage is decisive.

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⁵ The Re-Part Methodology - Re-start with a Participatory approach in the case services.







In the case of the Reticulate project, the organisation of an on-line meeting with the four case study territories (Comune di Livorno, Piana di Lucca, Società della salute Pistoia, Società della salute Grossetana) was also of great importance in order to fully understand the differences between the territories and their organisational forms distinguished between "municipality" or "social and health territorial district" with the related differences in the management of services.

B. Desk survey with two online questionnaires

After the meeting and after having established an initial relationship of trust and collaboration between the research team and the service contact persons (as well as the exchange of contacts), a semi-structured questionnaire is defined and administered. Depending on the topics dealt with and the areas of intervention concerned, "twin questionnaires" can be drawn up in terms of structure and items but with different thematic contents.

Usually, a questionnaire that aims to take a snapshot of the services and social profiles present proposes questions on the following areas:

- Services and interventions (multiple answers on an established classification of services; information on active or newly activated services, prevailing services by type);
- Beneficiaries (informed estimate; changes in users over the past year, prevailing vulnerability profiles);
- Access to services (access by type of service; case management methods, use of participatory methods);
- Barriers (what obstacles vulnerable people face in accessing services, critical issues and challenges);
- Opportunities (which drivers can be invested on to improve services);
- Recommendations.

In the case of the Reticulate project, two questionnaires were drawn up and administered: one focused on services for serious adult marginalisation and one on services for vulnerable families with minors, addressed to the contact persons of the social services of the four territorial areas. The questionnaires consist of open and closed questions and aim at investigating four areas: typology and number of services addressed to the target groups active in the territories; the number, characteristics and







prevailing needs of the beneficiaries of the services; the modalities of access to the services, of care of the beneficiaries, and the level of participation of the beneficiaries in the definition of the customized project; strengths and critical points of the services system and identification of the barriers that the target groups encounter in accessing the services.

C. Thematic focus groups

The transition from the desk phase to the field phase is always fundamental in order to better understand the information gathered, verify consistency and gather opinions and expectations. In these cases, when the welfare system services are the subject of the research-analysis, it may be useful to organise shared moments extended to the audience of potential stakeholders operating in that specific sector. The focus groups may be the appropriate tool. It is therefore necessary to draw up a few stimulus-focused questions, provide a facilitator and invite no more than 12 people per focus. As far as the identification of stakeholders is concerned, this is a fundamental choice for successful discussions in order to be sure to address the research questions by listening to different points of view. It can be decided to do:

- Homogeneous focus groups (for example, participants from the same organisation or territory)
- Heterogeneous focus groups (for example, participants from different organisations or territories groups)
- Thematic focus groups (for example, addressing one issue at a time instead of stimulating the group on several topics on which you want to know their opinion)
- Multi-issue focus groups (for example, several issues are addressed simultaneously).

The people to be involved may have different profiles and roles with respect to the subject matter. There may be:

- Public institutions and public administrations
- Third sector bodies
- Other sector organisations (labour, health, housing, welfare and social security,
- Beneficiaries of services







- Peers
- Citizens
- Volunteers
- Experts
- Students
- Other.

Depending on the purpose and the stimulus questions, it will be appropriate to involve different stakeholders.

In the case of the Reticulate project, two face-to-face focus groups lasting two hours were carried out. Single topic focus groups with mixed stakeholders were chosen.

The first focus group was centred on the theme of barriers in accessing services for serious adult marginalisation and was attended by both contact persons of public social welfare services, employment services and third sector organisations that have been operating for a long time in the territories concerned. The second focus group was aimed at analysing the barriers in accessing services for vulnerable families with minors. Also in this case, the contact persons of the territorial services (social and labour services) of the public and private social system were invited, as well as a stakeholder as an expert on the topic of educational poverty⁶. Furthermore, in order to bring out a plurality of opinions and attitudes, the presence of participants with different roles and professionalism was ensured: social workers, educators, service managers and coordinators, administrative officials, employment centre operators.

The discussion topics addressed were selected in the light of the initial processing of the data collected by the questionnaire. The stimulus questions were therefore aimed at exploring:

- Insights into marginalisation profiles in the territories and level of coverage of expressed and unexpressed needs by social services;
- Identification of the main barriers in accessing services and strategies for overcoming them;
- Proposals for the definition of new service centres/one stop shops.

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⁶ Action Aid, former partner-supporter of the Reticulate project.







With respect to the accessibility of services, it was useful and facilitating for the discussion to identify four dimensions that were proposed to the participants to stimulate their reactions. We asked them to express opinions, ideas, wishes and recommendations with respect to four dimensions considered fundamental for the implementation of an accessible and inclusive service:

- Accessibility: defined as the possibility for a person to have free access to services through the removal of physical and cultural barriers;
- Relation: defined as the ability to listen empathically to expressed and unexpressed needs of people in order to foster dialogue and build trust;
- Collaboration: defined as formal and informal relations between services and resources of the territory, aimed at achieving a common objective;
- Community: defined as the opportunity for the one stop shop to be an open and usable service for all citizens.

D. Desk analysis and result-based management activities

At the end of the research activities, the information collected needs to be systematised and analysed both from a territorial perspective (case studies) and from a cross-cutting perspective (thematic and cross-cutting analysis).

Quantitative information requires elaboration by means of graphs, tables and summary sheets on the results, while information gathered through field research activities needs more qualitative analysis. A short report and a powerpoint presentation can be two useful tools to disseminate the first results and share them with the research participants.

These analyses will lead to the implementation of an exploratory study on the marginalisation profiles present in the territories, on the factors limiting the reaching of target groups by social services and on the opportunities to overcome these barriers. The results of these analyses will be presented to the project partners during the study visits foreseen in WP4 and to the Scientific Committee.

Instruments, and research techniques and desk analysis results:

- Identification of the contact person in the services concerned by the research;
- Preliminary mapping;







- Informative meeting with stakeholders;
- Questionnaire and data collection on services and social profiles of the target groups;
- Focus groups with stakeholders;
- Graphs and tables per case study;
- Reporting (early results);
- Powerpoint presentation.

Two outputs:

- List of barriers to specific target groups in accessing welfare system;
- List of bottom-up recommendations to overcome barriers and structuring inclusive services and facilitating empowerment of beneficiaries (*from the services and social workers point of view*).

4.2. PHASE 2 - ACTIVE INVOLVEMENT OF THE TARGET GROUPS IN THE DESIGN OF WELFARE SERVICE SYSTEM

In this phase of work on the field, the objective is to give voice to people in a vulnerable condition and, as stated in the foreword, to listen to their views on the difficulties in accessing services and what improvements can be made.

The stated objective of this phase is to involve target groups in identifying barriers to accessing services and formulating proposals and suggestions to ensure a higher level of take-up.

Participatory approaches are becoming increasingly important in the sector of services for people in a vulnerable situation. They aim to promote an active role of the person receiving care and to make him/her participate in decisions and actions concerning the support pathway to be undertaken. When participatory methods are used, intervention measures and care are not limited to responding to basic needs in a standardised and performance-oriented manner but promote the participation of the person in the definition of his/her inclusion pathway, gather opinions, ideas and desires that may influence the recovery pathway and motivate him/her with respect to the objectives to be achieved by activating the resources/capacities a person possesses.







The key words guiding the development of participatory approaches are⁷:

- Listening and active role;
- Capability;
- Strengthening;
- Involvement.

One of the techniques that can increase the involvement of people is the consultation technique. It is based on these activities and tools:

- Asking people what they think about a service or a policy or a programme;
- Questionnaire;
- Face-to-face interview;
- Focus Group;
- Suggestion Box.

The consultation is the technique we followed to structure this phase of the action research in the Reticulate project.

However, the consultation may be useful but not sufficient. In order to stimulate services to develop and maintain a participatory approach in the management of services, it is useful to envisage a final phase of this methodology that helps services ensure an active role of target groups also in the future.

In fact, participation is a manner of enabling people to participate in all decisions and actions that affect their lives.

The levers to foster the development of participatory approaches are:

- Assessment (evaluation of needs);
- Co-designing;

⁷ The following documents and publications were particularly useful for the drafting of this part: FEANTSA, Participation Toolkit, by the Working Group on "Participation", October 2013 available on https://www.feantsa.org/en/toolkit/2013/10/19/participation-toolkit-get-a-different-resultget-people-participating?bcParent=27; Zenarolla A., *Persistenze e cambiamenti nei percorsi di ingresso e di uscita dalla grave marginalità*, 2020; Cortese C., Pascucci R., *Leve e barriere nella vita delle persone senza dimora. Quale integrazione possibile?*, 2020; Gaboardi M., Santinello M., *Il punto di vista delle persone senza dimora sull'integrazione sociale*, 2020. The contributions are published in the volume by Consoli T., Meo. A, Homelessness in Italia. Biografie, territori, politiche, Franco Angeli, 2020, Milano.







- Recovery approach;
- Frequent/periodic consulting;
- Empowerment and self-determination;
- Capability approach.

To summarise, the proposed methodology is therefore based on three phases and related actions:

- Mapping services welfare system and consulting stakeholders;
- Active involvement of target groups;
- Adopting a long term participatory approach.

In particular, this phase is the heart of the Re-Part Methodology for the active recruitment of target groups of the project actions.

A. Active recruitment and consultation of target groups:

This methodology includes both an active involvement in consulting the target groups on access barriers and listening and collecting recommendations to improve access to services with the suggestion box. In addition, the methodology also includes stimulating services to maintain a participatory approach through some specific activities that will be listed below.

The activities for the active involvement of target groups include:

- Identification of significant case studies by relevance (intensity of target groups);
- Identification of services from which to recruit interviewees who fit the research profiles (homeless people and vulnerable families with minors);
- Interviews with operators, homeless people and vulnerable families with minors;
- Field readerch: face-to-face interviews, mini-questionnaire, suggestion box. With regard to the people to be interviewed, according to the research questions, two types of target groups are envisaged:







Vulnerable families with minors:

- a. People are already being followed by the services but using these services passively without active involvement and care.
- b. People who are unable to access services due to multiple barriers/difficulties (families living in peripheral areas of the city, language barriers, families in recent poverty who do not know about services, shame/stigma etc.).

The former can be met at the social services headquarters in agreement with the service coordinators. The latter at structured services, such as Caritas listening centres, distribution centres, parishes, socialisation services - typical of families with a cultural background.

Homeless people

- a. People who have a support project with the social services and/or community services and follow activities aimed at social inclusion (work, housing, income).
- b. People who attend low-threshold services but do not follow a support path, live on streets and attend care services sporadically.

In the case of the Reticulate project, further criteria for identifying people to be involved are:

- Gender I.
- II. Age
- III. Citizenship
- IV. Duration of the vulnerability condition
- V. Care by services.

In addition, people with a different degree of proximity to social services should be involved:

- VI. Large families
- VII. Single-parent households
- VIII. Households receiving or not receiving citizenship income
 - IX. Families with a PAIS (social inclusion pact)
 - X. Homeless people unknown to the services







- XI. People accessing primary care facilities, such as dormitories, canteens, day centres, social secretarial desks
- XII. People placed in third-level housing (HF).

B. Involvement and intermediation of services coordinators

In order to approach the people to be interviewed, the mediation function of those who manage services and habitually interact with homeless people and vulnerable families, i.e. public and private social workers and operators, will be of fundamental importance. On the basis of the mapping of organisations and through dialogue with social services contact persons, 3-4 organisations recognised as privileged witnesses for their knowledge and experience in managing services to homeless people and disadvantaged families will be identified for each territory. These organisations will be made aware of the project objectives in order to play an accompanying and intermediation role during the interviews with the target groups.

C. Face-to-face interviews

After contacting the organisations that manage different types of services, a range of semi-structured interviews will be carried out in each territory with homeless people and vulnerable families with minors (appropriate to the intensity of the phenomenon in each territory). In the interviews with the families, attention will be paid to surveying the opinions of the different members of the household. The involvement of minors will be assessed on a case-by-case basis as the age range varies and is an even more delicate target group to approach.

The interview format includes questions aimed at knowing:

- Biographies;
- The type of services attended and the help and support received;
- The needs of people in the areas of housing, work and health;
- The reasons and barriers limiting access to services in the territory;
- Proposals to make territorial services more accessible;
- Opinions and attitudes towards active participation practices;
- Suggestions







In particular, the participatory research technique of the suggestion box will be carried out, that is to say a box in which suggestions and bottom-up recommendations regarding possible strategies to improve services are collected in written form. The implementation of this technique will follow codified practices.

In conducting the interviews, approaches recommended by studies on participatory research with vulnerable people will be adopted⁸. In particular, the proposed approach includes:

- The involvement of operators and/or social workers as intermediaries in the relationship with interviewees and as support in establishing a relationship of trust in safeguarding the emotional sphere.
- Recognition of the power dynamics that may arise between interviewee and interviewer. With this in mind, it will be clearly communicated that participants are not required to answer the questions asked, consent will be sought to record the interview and assurances will be given regarding the protection of privacy and anonymity.
- Clarity in communicating the research objectives to be pursued with the interviews.
- Choosing a location where the privacy of the interviewee can be guaranteed, assessing the interviewees' status of ease.
- The use of clear and simple language, adapted to that used by the interlocutor. Interviews will be conducted in both Italian and English.
- Willingness to provide feedback and updates on the research conducted.

D. Desk analysis and result-based management activities

The information gathered through the interviews and the suggestion box will have to be systematised and analysed from a territorial (in-depth, case studies) and transversal

⁸ Hearne, R., and Murphy, M. (2019), Participatory Action Research: A Human Rights and Capability Approach: A PAHRCA HANDBOOK for NGOs and Vulnerable Groups. Part 2: The Theory. RE-InVEST Project and Maynooth University Social Sciences Institute.

Focus Ireland (2022), Peer Research in Housing and Homelessness: A Guidebook for Organisations, Researchers and Funders. Peer-Research-in-Housing-and-Homelessness-Guidebook.pdf (focusireland.ie)







perspective. The results produced will be presented in a report to be shared with the project partners.

E. Return of results to interviewees

Where interviewees have expressed their wish to be kept up-to-date on the outcomes of the research, the return of the analysis of the results will be carried out in a blended manner: Easy to read concise report sent to the service contact persons for mediated return to the interviewees or directly by e-mail to the person if he/she has given account and consent to receive information or in video call or video message summarising the main results, etc.

4.3 PHASE 3 – ADOPTION OF PARTICIPATORY TECHNIQUES IN THE PROVISION OF SOCIAL SERVICES

The last phase of the methodology envisages to provide the stakeholders, involved in various ways in the action research, with bottom-up recommendations, based on the results of the field research activities. In order to foster an active involvement and participatory approach within the services, the methodology envisages two actions: the survey of the level of involvement and participation of the beneficiaries in the services (barometer of implementation of participatory approaches in the services) and the adoption by the services of practices for the involvement and participation of beneficiaries. To this end, it appears useful to provide services with a list of methodological tools to be used in the ordinary management of services and/or in the experimentation of a new service (for example, the one stop shop envisaged by the Reticulate project). The actions planned for this phase preferably require methodological supervision in order to adjust the operational tools to the needs and objectives of the local services (adopting the participatory approach in the provision of social services).

A. List of bottom-up recommendations to overcome barriers and obstacles

On the basis of the evidence gathered in the consultation of services and target groups and bearing in mind the specificities of local contexts, bottom-up and ready-to-use







recommendations are developed concerning possible opportunities and strategies to foster accessibility and overcome barriers in accessing services. These recommendations represent a knowledge base that services can use when defining or redefining services for the most vulnerable target groups.

In the case of the Reticulate project, this list of recommendations is mainly based on the analysis of the suggestions collected through the suggestion box technique. The recommendations thus collected are integrated with the indications already provided by the social workers during the research activities carried out in phase 1 (questionnaires and focus groups). All these indications will serve to guide the organisation and management of the One stop shops in the four territories, and more generally, of the social services in the area.

B. Services self-assessment of the participatory practices

This activity involves the design of a questionnaire addressed to services. The self-assessment form has a twofold function: on the one hand to assess the state of the art with respect to the level of adoption of active participation practices and techniques within the services and on the other hand it offers the possibility to monitor how these practices are progressively introduced and developed over time.

For the Reticulate project, we have produced a facsimile self-assessment form, drafted on the basis of the contents of the participation toolkit prepared by Feantsa⁹ (see Annex A).

C. Toolkit on participatory techniques

With respect to participatory techniques, there are several studies and guidelines.

Within the RE-Part methodology, a useful operational document is the Toolkit developed by Feantsa, which offers a number of specific tools and techniques for severely marginalised and vulnerable groups. The toolkit offers concerned services the possibility of adopting several ready-to-use techniques - a list of which can be found in Annex B - that foster user involvement. The participatory techniques are based on different levels: one level is the mere information which represents a unidirectional

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⁹ See FEANTSA (2013)







channel of information and orientation of services to the beneficiary (talking wall; posters) and a second level is represented by the consultation which involves the adoption of tools to continuously survey users' opinions (suggestion box, questionnaire). One of the highest levels of participation is represented by co-design practices (Leading your own recovery).

The use of participatory tools can be done autonomously by the organisations by foreseeing planning and service definition methods that reserve adequate space and time for listening to people. In more structured systems, it is always advisable to be accompanied by methodological supervision and/or by a research group that can work alongside the team to accompany it on the consistency and suitability of the instruments to be chosen, on the correctness of the implementation methods, and obviously on the results of the participatory processes.

In the perspective of a virtuous cycle, these participatory practices may in turn generate greater involvement of beneficiaries and foster their effective integration as the ultimate goal of the whole process.







ANNEX A - FAC SIMILE SERVICES SELF-ASSESSMENT FORM ON ADOPTING PARTICIPATORY APPROACHES¹⁰

	None	Low	Mediu m	High
In the service there is a <i>state vision</i> and aim for favouring participation of services' users				
The services have shared this <i>state vision</i> with managers, frontline staff and volunteers				
The services already put in place practice to ensure the participation of services' users				
If not, the services is planning to put in place practice to ensure the participation of services' users				
The service staff is adequately trained to implement participation approaches				
The service act upon information received to improve services and practices				

¹⁰ This Grid is inspired by "FEANTSA, Participation Toolkit, by the Working Group on "Participation", October 2013







ANNEX B - LIST OF PARTICIPATORY TECHNIQUES¹¹

- 1. Exit Interviews
- 2. Suggestion & Comments Boxes
- 3. Talking Walls
- 4. Notice Boards & Whiteboards
- 5. Posters & Leaflets
- 6. Focus Groups
- 7. Surveys & Questionnaires
- 8. Creative Arts
- 9. Service User Newsletters
- 10. Open Space
- 11. Peer Mentoring
- 12. Public Events (Workshops, Seminars & Conferences)
- 13. Service User Led Projects/Organisations
- 14. Involvement through Technology and Social Media
- 15. Leading your own Recovery

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¹¹ This Grid is inspired by "FEANTSA, Participation Toolkit, by the Working Group on "Participation", October 2013