

# NORMS AND STANDARDS FOR SERVICES TO FAMILIES

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## **NORMS AND STANDARDS FOR SERVICES AND PROGRAMMES TO FAMILIES**

### **SECTION 1**

#### **1.1 INTRODUCTION AND SHORT SITUATION ANALYSIS OF FAMILIES**

Families do not exist in isolation. They exist in a context by which they are influenced and which they influence. Therefore the institution of the family is subjected to wide-ranging social, economic, political and demographic influences, which in turn simultaneously mediate how individual family members will respond to social change.

In South Africa historic factors such as migration, colonisation, urbanization and globalisation have impacted on the family structure and functioning, which resulted in a value reorientation and stimulated the formation of non-traditional families (HSRC Research report, 2004).

Families in South Africa are diverse which complicates the task of defining the “family”. Gail Batman (in the Green Paper on the Family, 2011) states that families have become so diverse that “What families regard as their family is their family and this is the reality that we, as service providers, must deal with.

The traditional image of a family structure of mother, father and children has changed significantly in recent years. In the research paper of the SA Institute of Race Relations (2012), it is stated that in 2008 only 35% of children in South Africa were living with both their biological parents. Some 40% were living with their mother only and 2.8% with their father only, which means that 22.6% of children are not living with either of their biological parents.

Between 1996 and 2001, all population groups showed changes in family structures. There was an increase in the proportion of households with couples, children and relatives (the extended family), as well as single parent families. Rates of marriage and cohabitation differed significantly between population groups. In 2003, some 21% of Africans were married or co-habiting, compared with 36% of coloured people, 51% of Indians, and 58% of white people.

What is evident from the above data is that in South Africa single-parent households can almost be considered as a norm. This usually results in reduced resources and support systems, and consequently many of these families live in households that are challenged by poverty. The indications of poverty include overcrowding and unemployment.

From an overcrowding perspective, this same report indicates that in 2008 about 5.6 million children aged between 0-17 were living in overcrowded households, which implies that just under a third of all children live in overcrowded households. These are defined as where there are more than two people for each room in the house (bathrooms excluded but communal living areas such as sitting rooms and kitchens included).

Regarding unemployment, in 2008, only 34% of children under the age of 18 were living in households with an employed adult. This implies that two thirds of children are growing up living in households in which there are no employed adults.

Families living in poverty and those who experience unemployment are more likely to have dysfunctional family environments. It is evident that family breakdown is circular. Where children grow up in dysfunctional families, they are more likely to have dysfunctional families themselves. Youth coming from dysfunctional families and communities are more likely to engage in risky behaviour and contribute to social breakdown. A complicating factor is that families living in poverty often live in disadvantaged communities with limited resources and lack of access to needed services.

The above-mentioned factors are only some of the factors and trends that that can be identified which impact on the family negatively. Various other factors, negative and positive, can also play a significant role in the functioning of the family. But because such a large number of families in South Africa live under difficult conditions, it is clear that the family is in crisis.

The South African Government derives its core mandate from the Constitution of the Republic of South Africa, Act 108 of 1996, where chapter 2, Section 7-36 sets out the State's duty to protect the human rights of its citizens. These human rights include care, nutrition, shelter, health care and social services, as well as the protection of family life.

Government recognises that many social ills in South Africa are the result either of weak family systems or altogether non-existent families and that the family is facing a fundamental crisis which needs to be remedied immediately.

Since 1994, Government has instituted various policy and legislative reforms aimed at the transformation of the South African society and to address the formulated government outcomes such as the realisation of a long and healthy life for all South Africans, sustainable human settlements and improved quality of household life, amongst others. As a key role player in this, the Department of Social Development has the mission to ensure the provision of comprehensive social protection services against vulnerability and poverty within the constitutional and legislative framework and to create an enabling environment for sustainable development. Furthermore, to deliver integrated, sustainable and quality social services, in partnership with all those committed to build a caring society (Annual report, Social Development, 2011).

Within this mission, one of the Department of Social Development's strategic goals is to strengthen families and the community in order to foster social cohesion. The development of the White Paper emerged out of the deep concern and understanding that the family is in crisis and in need of immediate remedying. The policy framework serves as guidelines to the various role players such as, government, organs of civil society, professionals, communities, families and individuals to intervene appropriately into deliberating family circumstances. The policy framework advocates for family focused service provision through an integrated, holistic and comprehensive social welfare system whilst considering the family the focal point for interventions of both government and civil society. It furthermore, promotes the facilitation, provision and distribution of adequate resources between stakeholders to strengthen families and communities. The partnership between Government and Civil Society is vital in addressing the diverse needs of families. Government alone cannot adequately address the challenges families face on a daily basis. The envisaged White Paper on Families advocates for the promotion of family life and the strengthening of families through the development of appropriate programmes. The draft White paper on Families will provide strategic guidance to the various service providers in order to render integrated services to families and to holistically address the diverse needs of families, hence it is

imperative that the Norms and Standards for Services to Families, be developed. The norms and standards for services to families are aligned to the generic norms and standards for Social Welfare Services.

## **1.2 DEFINITION OF THE FAMILY**

Despite being widely viewed as one of the foundational social institution in all societies, the concept of the family is difficult to define (Waite, 2000; Belsey, 2005). Amoateng and Richter (2007:4) point out that, “there appear to be broad consensus that families are societal groups that are related by blood (kinship), marriage, adoption, or affiliation with close emotional attachments to each other that endure over time and go beyond a particular physical residence”.

The draft White Paper on Families, (2012) define the Family as “A societal group that is related by blood (kinship), adoption, foster care or the ties of marriage (civil, customary or religious), civil union or cohabitation, and go beyond a particular physical residence.

## **1.3 TYPES OF FAMILIES**

- Nuclear : married or cohabitating: mother and father with own children;
- Extended family: traditional family with grandparents/parents/children/aunts/nieces/nephews providing support to each other not necessarily staying together.
- Skip-generation family – grandparent with grandchild(ren) but no child(ren) of his/her own;
- Single parent family: mother and child/ren, or father and child/ren;
- Cohabiting or married couples without children;

- Child/youth headed families: one child/youth heading the family;
- Same sex family: same sex married or cohabitating with/without children;
- Grandparent/s headed family: grandparents with grandchildren;
- Foster family/adoptive family: child placed through statutory processes in care of a family that is not related to the child;
- Non-household family: friends staying together bound by household rules;
- Combined/reconstituted family: biological parent/stepparent/biological children/stepchildren
- Families with one members living apart due to work circumstances;
- Polygamous families: One husband having more than two wives and their children.

#### **1.4 LEGISLATIVE FRAMEWORK**

Developmental social welfare services for families in South Africa covers a wide range of service delivery components that impact on individuals, groups and communities. The delivery of developmental social welfare services is based on values ethos and principles which facilitate the development of human capacity and self-reliance within a caring and an enabling social and economic environment.

In line with the Constitution, the national government has an over-riding responsibility for the management of the county's affairs and shares responsibility with provinces for the provision of basic developmental social welfare services. Legislation has been promulgated to steer, bolster, inform and above all, mandate services.

Family Law is referred to as the law that governs domestic or family related issues in South Africa and has been instituted to protect and preserve families. The following Acts, amongst others, are critical in providing the legislative framework for services rendered to families:

- The Children's Act 38 of 2005, is important legislation with a direct bearing on families with children between 0-18 years and deals with the care and protection of children and give effect to certain rights of children as contained in the Constitution.
- The Marriage Act 25 of 1961, the Recognition of Customary Marriages Act 120 of 1998 and the Civil Unions Act 70 of 2006 promote marriages and create family stability.
- Domestic Violence Act, Act No. 116 of 1998 affords the victims of domestic violence the maximum protection from domestic abuse and introduces measures which seek to ensure that the relevant organs of state give full effect to the provisions of this Act. The act provides protection of victims, as well as make provision for families in crisis to access trauma services.
- Mediation in Certain Divorce Matters Act, Act 24 of 1987, provides for mediation where minor and dependent children are involved. The act makes provision to for mediation options can be utilized by service providers.
- Prevention of and Treatment for Substance Abuse Act, 70 of 2008, provides for services to families affected by substance abuse.

## 1.5 PURPOSE OF NORMS AND STANDARDS

### 1.5.1 Defining norms and standards

- Norm: Is defined as a collective agreement to act in a particular way
- Standard: is defined as the minimum acknowledged measure of comparison for a quantitative and qualitative value.

### 1.5.2 Why Norms and Standards

- To ensure compliance to:
  - Legislative mandate
  - Code of ethics/ conduct
  - Strategic objective and mandate
  
- To ensure compliance to:
  - What needs to be provided
  - Who to provide the service
  - How should the services be provided

### 1.5.3 Rational for developing Norms and Standards for Families

- The development of Norms and Standards for services to families becomes imperative to serve as benchmark for effective and efficient services to families.
- The Norms and Standards serves as mechanisms to create uniformity and standardize services across the country.
- N&S promote quality services and performance management.
- The Norms and Standards for Services to Families were developed as mechanisms to create uniformity and standardize services across the country.
- Norms and Standards for services to families will promote quality of services and performance management.
- Norms and Standards for services to families will promote accountability and transparency.
- They will contribute positively to the fulfillment of the vision outlined by the White Paper on Families.
- They will also strengthen the monitoring and evaluation process.

## **1.6 DEFINITION OF CONCEPTS**

### **RESILIENT FAMILIES**

Resilient families are well-functioning as they are psycho-socially, emotionally and financially stable. They are associated with the creation of a supportive external and internal environment and good child-rearing practices. Most importantly they have the ability to withstand and rebound from adversity and challenges that they have faced, even stronger than before.

### **FAMILY AT RISK**

A family which is socially isolated, subjected to the least empowering circumstances, which is without support systems and or adult supervision, not linked to resources, does not function due to various challenges and/or which exposes the family members to circumstances that are detrimental to their development and may have an eminent risk of removal. Such a family requires intervention to be able to function effectively.

### **FAMILY IN TRANSITION**

Families in transition are defined by change or disruptions which may result from separation, divorce and death. The family in transition requires support to adjust to the new family structure.

### **FAMILY IN CRISIS**

Families in crisis are usually families who function well enough to cope with daily challenges, but may experience a crisis as a result of sudden trauma or other setback such as death, disability, unemployment and violence.

## **CRISES**

Crisis is an emotional state or the reaction of the individual, family or group, or a hazardous event and not the event itself.

## **TRAUMA**

A trauma refers to a distressing, fearful life threatening event or the immediate or long term effect of such an event which restrict the victim's options.

## **TRAUMA COUNSELLING**

Refers to more in depth counseling to address not only an immediate crisis but also longer-term after effects, as well as other experiences or trauma whether related to the current crisis or not.

## **TRAUMATIC EXPERIENCE**

An event that is outside of the range of usual human experience and that would be distressing to almost every one (eg sudden unexpected death of a family members).

## **VICTIM**

A person who have suffered harm, including physical or mental injury, emotional suffering, economic loss and the violated of his/her fundamental rights.

## **FAMILY PRESERVATION SERVICES**

Family Preservation intends to keep families together and strengthen families that are in crises or at risk.

## **FAMILY FOCUSED SERVICES**

Family focused services refer to services rendered to family members from a family perspective (family members an integral component of family and community – one component will impact on the other).

Social Welfare services must decrease the vulnerability and increase resilience of families and its members and should focus on the following in rendering family focused services with specific outcomes.

## **COMMUNITY-BASED SERVICES**

The White Paper of Social Welfare Services describes community development as multi-sectoral and multi-disciplinary. It is the process in which the efforts of community members are united with those of Government and Civil Society to improve the economic, social and cultural conditions of their communities with the active participation of community members.

Community-based and family focused services recognize that families are the building blocks of communities. In order to address the needs of families, social services and community development provide the community support and infrastructure for families to function optimally.

## **COMMUNITY DEVELOPMENT**

Community development is the process in which the efforts of the members of a community through active participation, are united with the efforts of service providers to improve the economic, social and cultural conditions of their community.

### **FAMILY STRENGTHENING SERVICES**

Family strengthening refers to the deliberate process of giving families the necessary opportunities, relationships, networks and support that will assist them to fulfill their roles and responsibilities to family members, the community and the broader society.

### **FAMILY EMPOWERMENT SERVICES**

Family Empowerment is the provision of opportunities to use and strengthen the family's own support networks and the provision of access to resources that will ensure family well-being.

### **FAMILY REUNIFICATION SERVICES**

Family reunification refers to the reunification of family members with their families after being removed from the family and the process of empowering and supporting the family, the extended family and the family members in out-of-home care to be reunited with their family over time.

### **SOCIAL SERVICES**

Modern social services include public education, social security, healthcare and housing. It includes all the social programmes and organizations in a country that are designed to prevent, alleviate, or contribute to the solution of recognized social problems.

## **SOCIAL INTEGRATION**

Social integration refers to the supportive relationships on community level, whereas social support mainly refers to individual and group (family) level. Services just promote social integration of all individuals through the promotion of active and continued participation of all individuals in social, economic, cultural, spiritual and civic affairs, enhance the inter-generation relationships within families and communities, promote social connectedness through families and communities and the reduction of inequality, discrimination and exclusion of marginalized vulnerable groups.

## **FAMILY DEVELOPMENTAL ASSESSMENT**

A holistic developmental assessment of the family is the first step in delivering services to families. A developmental assessment entails the assessment of risks, as well as assessment of family strengths (strengths, protective factors, the communication skills of and inter-relationships within the family and the intra-relationships with its social support networks). The goal of a developmental assessment is to determine the least restrictive, most empowering environment, programmes and resources suitable to the family at a given moment, during the intervention process.

## **FAMILY DEVELOPMENTAL PLAN**

After a developmental assessment of the family, a family developmental plan with the family as roleplayer, needs to be developed to guide the intervention process and service delivery on all levels. Family objectives and goals should guide the planning process. A family developmental plan is an agreement between the family and service providers on the changes that the family has to go through in order to address the challenges the family is facing and ensure effective family functioning.

## **STRENGTHENING OF FAMILIES**

The strengths perspective implies that service providers should focus on identifying and utilising the positive qualities, cultures and talents of family members, the family support networks and systems, as well as resources to address the risks factors of the families.

## **AWARENESS PROGRAMMES**

These programmes are aimed at creating awareness on certain environmental and social factors which could affect the well-being of individuals, families or communities and indicate the type of assistance that is offered to address these factors with the aim of preventing persons from requiring more intensive intervention in future.

## **MEDIATION**

Mediation as an alternative dispute resolution (ADR) method aims to assist parties (two or more) in researching an agreement. A mediator as impartial third party, using appropriate techniques and skills to open and improve dialogue between parties aims to assist parties in reaching a workable agreement to either prevent disagreement or conflict or to resolve conflict and dispute.

## SECTION 2

### CONTEXTUAL NORMS AND STANDARDS FOR SERVICES TO FAMILIES

Contextual norms and standards for services to families are:

- Those norms and standards relate to the context within which services to families should be rendered and set the foundation for service delivery to families. Describing the pre-conditions for effective service delivery to families and the system of governance.

The **contextual norms and standards** for services to families refer to:

- **C-PL Policy and legislation**
- **C-SP Strategic Planning**
- **C-CP Collaborative partnerships**
- **C-SP Quality Assurance**
- **C-M&E Monitoring and Evaluation**

## C-PL Policy and legislation

The draft White Paper for Families provides the mandate for government, welfare organizations, private sector and the Social Services practitioners to render services to families. However, other policy directives and legislative frameworks that impact on family life needs to be taken into consideration in rendering quality services to families and their family members.

Norms	Standards	Guidelines
<b>C-PL Policy and legislation</b>		
C-PL-1. Services to families must comply with legislation, policies and international instruments.	<p>The White Paper on Families must be implemented in collaborative partnerships with stakeholders.</p> <p>The White Paper must be based on qualitative and quantitative evidence of services to families.</p> <p>The Department of Social Development must ensure training of service delivery partners on the White Paper in order to create a common understanding.</p> <p>The White Paper on Families should be reviewed every 3 years.</p>	Develop an integrated implementation plan.
C-PL-2The White Paper on Families, strategies and the Integrated Plan of Action for Families must take the directives of the Plan of Action for	The implementation plan of action for families in Africa must be aligned to Whitepaper on families	

Families in Africa and the resolutions of the United Nations General Assembly into consideration.		
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**C-SP Strategic Planning**

Strategic planning relates to the provision of support and direction to the overall planning and service delivery to families. The table below indicates the norms and standards for strategic planning in terms of the role players, the criteria and approach to be followed when developing strategies for rendering social welfare services.

Norms	Standards	Guidelines
<b>C-SP Strategic Planning</b>		
C-SP-1 A National Integrated Plan for Services to Families in South Africa must be available.	<p>The Integrated Plan of Action for Services to Families in South Africa must be aligned with the White Paper on Families.</p> <p>The Integrated costed Plan of Action for Families in South Africa must follow an inter-sectoral, interdepartmental approach and must be made available to all stakeholders.</p> <p>The Plan should indicate available funding for the implementation thereof.</p> <p>The facilitation of the implementation of the Integrated Plan for Families in South Africa</p>	<p>Assess, monitor and evaluate the implantation of the national integrated plan.</p> <p>The national integrated plan must be budgeted for annually based on the costs.</p>

	<p>must be facilitated through the Family Services Forums established at National, Provincial and Region/district level.</p> <p>The Integrated Plan of Action for Families must be reviewed every 3 years.</p>	
<p>C-SP-2 The National family Directorate to coordinate reports on the National integrated Plan for Services to Families in South Africa</p>	<p>Social Service Providers must report on a quarterly basis on their performance in line with the strategic goals for the family focus area.</p> <p>The reports must be standardized throughout the family sector</p>	<p>Develop a reporting format to ensure uniform and standardized reports.</p>
<p>C-SP-3 The DSD Strategy for Families must be available</p>	<p>The DSD strategy for Families must promote services and programmes on all the levels of the ISDM.</p> <p>DSD strategy must be implemented in line with the family life cycle approach.</p> <p>DSD Strategy must be aligned to the White Paper on Families.</p> <p>There must be coordination between relevant stakeholders to ensure holistic service delivery to families.</p> <p>A multi-disciplinary team approach should be</p>	<p>Provinces need to develop the DSD strategy that is aligned to the National DSD Strategy for Families.</p>

	<p>followed to ensure that the diverse needs of the family be addressed.</p> <p>The DSD Strategy for Families must be reviewed every 3 years.</p>	
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### **C-CP Collaborative partnerships**

The way stakeholders cooperate and communicate with each other influences the environment in which services to families are rendered. A non-cooperative environment hinders the provision of quality services. Strong collaboration and coordination on services will promote quality care and eliminate duplication of efforts.

<b>Norms</b>	<b>Standards</b>	<b>Guidelines</b>
<b>CP Collaborative partnerships</b>		
C-CP-1. The Department of Social Development must coordinate service delivery to families on Macro, Mezzo and Micro level	DSD should ensure on-going consultation with stakeholders on National, Provincial and Region/District level for the development and facilitation of inter-sectoral and interdisciplinary protocols.	
C-CP-2 Services to families must be inter-sectoral and interdisciplinary in nature and protocols between relevant stakeholders rendering services to families must be developed and implemented	<p>Memoranda of understanding and service level agreements must be available.</p> <p>Corrective measures must be put in place to address non-compliance with roles and responsibilities by collaborative partners.</p>	Develop national MOU framework for the implementation of services to families.

<p>C-CP-3 Bilateral agreements within the international arena in promoting family life must be established</p>	<p>Bilateral agreements between SA and other countries must be adhered too.</p> <p>DSD must report to the International Relations structure of the Department of Social Development on bilateral agreements established with other countries</p>	<p>Written memoranda of understanding and service level agreements must be available</p>
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<p>C-CP-4 Family Services Forums must be established</p>	<p>Family Services Forums on National, Provincial and District level must be established as platforms to disseminate information on family issues and the coordination of services.</p> <p>All stakeholders (DSDS and Civil Society) must report quarterly on their services and programmes to the National, Provincial and District family services forums.</p> <p>All stakeholders delivering services to families must participate in the Family Services Forums either on a National, Provincial or District level [Stakeholders include DSD and other relevant Government Departments and Civil Society (NGOs, FBOs, CBOs), as well as the Business sector].</p> <p>The secretariat for National and Provincial Family Services Forums have the responsibility for collecting, processing, and disseminating the information to relevant stakeholders.</p>	<p>Develop a strategy that govern provincial and district family services forums.</p> <p>Written progress reports to be submitted to the National Family Service Forums on a quarterly basis.</p> <p>Develop the Terms of Reference for Family services forums.</p>
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## C-QA Quality Assurance

Services to families must be monitored to ensure compliance against the quality assurance framework and the monitored indicators as stipulated in the Monitoring and Evaluation Framework for Services to Families.

Norms	Standards	Guidelines
<b>C-QA Quality Assurance (QA)</b>		
C-QA-1 A Quality Assurance Framework (QAF) for Services and Programmes for Families must be available.	<p>Quality assurance activities must be carried out in order to set standards for efficient and effective services and programmes to families.</p> <p>The quality assurance process must be verified/assessed for compliance.</p> <p>The QAF must measure key performance indicators as indicated in the Monitoring and Evaluation Framework and the QAF.</p>	Implementation of the Quality assurance framework
C-QA-2 The Department of Social Development in collaboration with relevant stakeholders must conduct quality assessments of registered and non-registered organizations that render services to families.	<p>Specific procedures must be put in place to enable compliance monitoring within the sector.</p> <p>Feedback reports of quality assessments must have a quality improvement plans.</p>	The development of the tool for Quality assessment.

## **C-M&E Monitoring and Evaluation**

The Monitoring and Evaluation Framework for Families provides for the monitoring and evaluation of services and programmes that are rendered to families and the quality thereof. Effective monitoring and evaluation of the services is essential for measuring the success of developmental social welfare service delivery. It assists service providers to manage their services better by providing timely feedback on services.

The approved monitoring and evaluation framework for services to families must address the continuous monitoring of inputs, outputs, process, outcome and impact indicators to inform planning and decision making.

The aim of the framework is to serve as a guide through which the implementation of family programmes can be monitored and evaluated. The framework provides for the assessment of programmes against a set of objectives, indicators and tools for collecting data to establish their effectiveness in addressing the challenges that families are facing.

A clear link between the implementation of the Monitoring and Evaluation Framework for Services to Families and the envisaged quality assurance framework should be established. Services and Programmes should be measured against the Norms and Standards for Integrated Developmental Social Welfare Services to Families as benchmark during the monitoring and evaluation and quality assurance process for effective quantitative and qualitative services and programmes to families.

Norms	Standards	Guidelines National/Province
<b>C-M&amp;E Monitoring and Evaluation</b>		
<p>C-M&amp;E-1 Services to Families must be assessed, monitored and evaluated.</p>	<p>Social Services Providers to Families must be monitored and evaluated for compliance on a quarterly basis:</p> <ul style="list-style-type: none"> <li>• Norms and Standards for integrated developmental Social Welfare Services to families.</li> <li>• The envisaged White Paper for Families.</li> <li>• National and Provincial plans for the Programme: Families.</li> <li>• District Plans.</li> </ul> <p>Assessment of services to be done on quarterly basis</p> <p>The Monitoring and Evaluation Framework for Families must be available and be reviewed annually.</p> <p>Reporting on services and programmes to families to the different structures within specified timeframes must be adhered to.</p>	<p>Develop the M&amp;E framework to monitor performance.</p> <p>The following key performance indicators must be measured namely:</p> <ul style="list-style-type: none"> <li>• Turnaround time for reporting a problem until the implementation of a solution.</li> <li>• Client satisfaction with services rendered</li> <li>• A referral system to ensure the least restrictive options for services rendered to families are considered as first option</li> <li>• A developmental assessment and family developmental plan to guide service delivery.</li> </ul>
<b>NORMS</b>		
<b>STANDARDS</b>		
<p>C-M&amp;E-2 Reporting Framework must be available</p>	<p>Submission of written quarterly reports on Services and Programmes must be submitted.</p>	<p>Develop the reporting framework</p>

	<p>The Standardized format for reporting must be utilized.</p> <p>:</p> <p>Timely feedback must be provided on reports submitted.</p>	<p>A standardize quarterly progress report must indicate:</p> <ul style="list-style-type: none"> <li>• Achievement of strategic objectives</li> <li>• Inter-sectoral and inter-departmental collaboration</li> <li>• Actual versus planned budget spend</li> <li>• Challenges and remedial strategies</li> </ul>
<p>C-M&amp;E-3 All (funded or not funded) Programmes and Services to Families must be registered with National and Provincial DSD</p>	<p>All stakeholders must submit their programmes prior to implementation for approval.</p> <p>All stakeholders must register their programmes and services to Families.</p> <p>National Programmes must be registered with the National Department of Social Development.</p> <p>Provincial Programmes and Services must be registered with the Provincial Department of Social Development.</p>	<p>An appropriate filing system must be in place.</p>

<p>C-M&amp;E-4 Progress reports on integrated services to families in South Africa must inform input to United Nations General Assembly (UNGA), African Union (AU) Plan of Action for Families in Africa, and the annual reports of Department of Social Development</p>	<p>Department of Social Development in partnership with other key stakeholders must develop and submit to the AU and UNGA the following:</p> <ul style="list-style-type: none"> <li>• An evaluation Report on the Plan of Action on the Family in Africa with recommendations for future action must be submitted to the African Union (AU) when requested.</li> <li>• An annual report on the International Day and Year for Family celebrations must be submitted to the United National General Assembly (UNGA)</li> </ul>	<p>Progress report to be timeously submitted to ensure effective information dissemination.</p>
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## **SECTION 3**

### **ORGANISATIONAL NORMS AND STANDARDS FOR SERVICES AND PROGRAMMES TO FAMILIES**

Organizational aspects relate to characteristics of the service providers, operations, management and governance involved in rendering services to families. They also relate to the tools and resources services providers have at their disposal for rendering services - in essence the enablers for service delivery. This includes the human, physical and organizational competences that are needed for service delivery. The organizational aspects are considered as a direct measure of quality for their direct impact on the performance of services providers from a managerial perspective.

#### **A MANAGEMENT PROCESSES**

Management includes the elements to ensure the operational implementation of the mandates and strategies for rendering services to families.

#### **O-F FUNDING**

Funding refers to the funding for social services in the country. It however also refers to the funding models to fund specific services. Funding includes the maintenance of appropriate funding systems and the financing of social services on provincial, district and local level.

Services to families require an integrated approach and collaboration between service providers on national, provincial and local level. Government alone cannot address the plight of families and require civil society to form a partnership with Government to render effective and efficient services. A funding model needs to be negotiated that maximizes the collaborative contributions to integrated service delivery.

Norms	Standards	
<b>MANAGEMENT</b>		
<b>O-F Funding</b>		
O-F-1 The National and Provincial Family programmes must ensure that their strategic objectives are aligned with National and Provincial financial frameworks	<p>National Family Programmes must align their financial frameworks as prescribed by National Treasury.</p> <p>Provincial Family Programmes must align their financial frameworks as prescribed by Provincial Treasury</p>	Submit a bid for funding to National and Provincial Treasury to ensure appropriate budget for implementing the Family Programme
O-F-2 The National Department should ensure that the funding model is available	<p>A standardized funding model be implemented by the sector.</p> <p>Funding must be aligned to the Provincial and National Strategic Plan.</p> <p>Evaluation of requests for funding must be done according to the financial framework and Policy on Financial Awards.</p>	
O-F-3 Donor funding must be utilized to strengthen services and programmes to families.	<p>National and Provincial Departments must lobby for additional funding from Donors.</p> <p>Funds to be equitably distributed to identified role players (NGOs).</p>	

**O-BP BUSINESS PLANNING AND BUDGETING**

The business plan is the ‘operationalisation’ of the strategies on services to families. The business plan and budget ensure the short term implementation of services delivery by service providers.

Norms	Standards	
<b>MANAGEMENT</b> <b>O-BP Business Planning and Budget</b>		
<p>O-BP-1 An implementation plan and costing model for services and programmes to families must be developed and be available.</p>	<p>Costing model at local level must inform Provincial and National budget allocation</p> <p>A logical structure for the implementation plan must inform the costing process</p> <p>This results based structure for implementation must include an ultimate result, Sub-programmes, intermediate outcomes, direct outcomes, activities and sub-activities</p> <p>Input costs for sub-activities must be stipulated.</p> <p>Financial reports based on input cost items and quantities for sub-activities must inform the budget requirements for effective and efficient services and programmes to families.</p>	<p>All Programme Managers must use the prescribed costing template</p> <p>All Programme Managers must develop operation plans to execute costed activities in key performance areas.</p>

**0-R RESEARCH**

Evidence-based practice integrates Social work expertise with available evidence from practice models and research whilst also considering the values and expectations of families and their members as clients. Research can be categorized into two broad areas:

- Primary (experiments, clinical trials, and surveys) and,
- Secondary research (interviews from major studies, practice guidelines, and decision and economic analyses).

Research on family development programmes is critical to enhance services and programmes to strengthen families for family resilience and family well-being.

Furthermore, family-focused research initiatives should be part of the national framework for research in the social welfare sector.

Norms	Standards	
<b>MANAGEMENT</b> <b>O-R Research</b>		
O-R-1 The family sector must conduct research on effectiveness of services to families	Research results must inform programme development.  Family service providers must incorporate the results of the research undertaken to ensure that the family programmes are responsive.  Participatory research and community dialogues as research methods should be utilized.	Development of an implementation Plan

**O-PD****PROGRAMME DEVELOPMENT**

Programme planning and the development of programmes for families refer to the “operationalisation” of strategies on services to families.

Norms	Standards	
<b>MANAGEMENT</b> <b>O-PD Programme Development</b>		
O-PD-1 The family sector must design and develop programmes to address the needs of families.	<p>Programme development must be informed by the White Paper on Families</p> <p>Programmes must take the developmental phases and family life cycle into consideration to appropriately address the unique needs of each family.</p> <p>Programmes must be specific to the needs of the family within each family life stage.</p> <p>Programmes be informed by National Priorities.</p> <p>Programmes for families must be informed by the systems and strengths-approach.</p> <p>Programmes to families should be family and community-based.</p> <p>Programmes developed should be based on research findings.</p>	Develop manuals and frameworks on family developmental programmes.

O-PD-2 The family sector must develop and implement guidelines for programmes to families	<p>Guidelines and Framework should indicate the approach and procedures to be followed in rendering family programmes.</p> <p>Guidelines and Framework should be reviewed very three years.</p>	
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**B SERVICE ENABLERS**

The service enablers are the key elements of service delivery and require funding. It is the combination of these resources that provide the capacity for service providers to deliver effective services to families. Family-focused service delivery to families and their family members have four elements which guide the functioning of the social welfare system namely, human resources, funding, infrastructure and information management and technology. Service providers need to develop partnerships with families and need to include the family as partner in the multi-disciplinary team delivering services to the family.

**O-HR HUMAN RESOURCES**

Human resources comprise the provision of an appropriate workforce and refers to recruitment and selection; performance management; training and continuous development.

Service delivery to families is conducted by a range of practitioners with different competencies. A common goal gives direction to services to families in order to address the diverse needs of families holistically. Services to families require a multi-disciplinary team approach with service providers that strive to ensure the provision of comprehensive, integrated, sustainable and high quality social welfare services to help reduce family vulnerability, keep families together as far as possible and create an enabling environment for sustainable family development.

Clarification of the role of each service provider, prevents fragmented service delivery and the duplication of services. Services to families require committed service providers that strictly adhere to the ethical code of professional conduct to ensure the protection of all family members.

**O-IT INFORMATION MANAGEMENT AND TECHNOLOGY**

For effective integrated service delivery to families, an integrated information system that accommodates Government stakeholders, as well as civil society partners, must be available to meet the needs of all stakeholders. The information management system is also critical to measure if organizational goals have been achieved and objectives have been met in line with the broader strategic objectives for meeting the needs of families.

Information technology encompasses the entire process of defining, evaluating, protecting and distributing relevant information within the sector. It includes the provision of usable relevant information to the right person at the right time to facilitate planning and decision making. It also refers to procedures and systems to collect, process, store and disseminate information.

NORMS	STANDARDS	GUIDELINES
<b>SERVICE ENABLER</b>		
<b>O-IT Information Technology</b>		
O-IT-1 Information management system must be established and maintained	Database of all service providers to families must be available.  Database of programmes to families must be available	A data base on service providers rendering services to families and programmes for families must be available in hard copy and electronically at national and provincial Departments of Social Development.

## O-T&D TRAINING AND DEVELOPMENT

A key element to quality service delivery to families is the initial and continuous training and development of social service practitioners to ensure that they have a clear understanding of the context, approach and services they are obliged to render.

Training of practitioners and addressing the developmental needs of practitioners forms an integral part of improved service delivery and is evidenced through the following levels:

- Professional education.
- Continuous professional development.
- Skills training for the implementation of family focused services.
- On-going service training.

NORMS	STANDARDS	
<b>SERVICE ENABLERS</b>		
<b>O-T+D Training and Development</b>		
O-T+D-1 Practitioners and service providers delivering services to families must be appropriately qualified.	<p>Qualified social workers ,auxiliary social workers, child youth care workers, community development workers and youth workers can be appointed to work with families</p> <p>A strategy for capacity building must be in place</p> <p>Continuous professional training and development for all categories of staff.</p>	<p>Training to service providers must be offered by an appropriately trained trainer.</p> <p>Standardised training material must be utilized to train trainees.</p> <p>Trainers must register their training courses at the SACSSP.</p> <p>Trainees to receive certificates and when appropriate CPD points for training courses attended.</p>

<p>O-T+D-2 All social service professionals must attend training on family preservation services and other relevant programmes.</p>	<p>Social Service Providers must conduct a needs assessment to determine training needs.</p> <p>Training must address the needs identified during the needs assessment.</p> <p>Service providers should have a data base of all family related accredited training.</p> <p>Social Service providers should receive CPD point for short courses attended</p> <p>Service providers should keep an updated register of CPD points for all of their staff.</p>	
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## O-SP SUPERVISION

Supervision of social service practitioners aims to ensure the delivery of quality services to families and their members as beneficiaries, whilst supporting and building the capacity of the practitioner.

NORMS	STANDARDS	GUIDELINES
<b>SERVICE ENABLERS</b>		
<b>O-SP SUPERVISION</b>		
O-SP-1 Social Service Providers should provide supervision for all social service practitioners and volunteers	<p>Supervision and consultation responsibilities should be allocated based on the requirements set for supervision by the SACSSP.</p> <p>Supervisors should be given an appropriate job description that spell out their responsibilities, time allocation and accountability.</p>	Develop the implementation plan for the supervision framework.
O-SP-2 The supervisor should ensure that the management function is carried out.	<p>The supervisor should do the following :</p> <ul style="list-style-type: none"> <li>• Convey staff needs to management</li> <li>• Seek policy clarification</li> <li>• Consult with staff and provide feedback to management on how organizational policies and practices are perceived.</li> <li>• When in dispute with a supervisee first attempt to mediate the matter on the table.</li> </ul>	

## **SECTION 4**

### **PROCESS (OPERATIONAL) NORMS AND STANDARDS FOR COMMUNITY-BASED AND FAMILY-FOCUSSED SERVICES AND PROGRAMMES TO FAMILIES**

Process Norms and Standards refer to the regulation of social service providers so as to ensure that the public and service users are informed of the standard of conduct they can expect from the service providers for the protection and promotion of the well-being and interest of families and their members.. Process norms and standards also set a tone for service provision by setting standards for services to families.

Furthermore, they describe the responsibilities of the social service provider, the services provided and the dynamics of the relationship between the family and their members as beneficiaries and the service provider.

Three key dimensions are addressed:

- 1) Social Service Practitioner (Social Service Provider)
- 2) Service beneficiary (family and community)
- 3) Services provided (Basket of services to families)

#### **4.1 PRACTITIONER (SOCIAL SERVICE PROVIDER)**

The social service provider rendering services to families refers to those service providers identified in policies and legislative frameworks, responsible for rendering social welfare services to families (family preservation services). Process norms and standards address the requirements for accreditation to practice, the role of the supervisor supervising the social service provider and the standards for ethical conduct of social service providers.

Service rendering to families requires integrated services. One service provider cannot address the diverse needs of the family. Depending on the family developmental assessment, appropriate service providers for rendering needed services to the family, as well as the family and community as beneficiary, should form part of a multi-disciplinary team to holistically address the challenges families are facing.

The social worker in the multi-disciplinary team must act as coordinator to ensure collaboration between the social service providers rendering services and programmes to the family. The social auxiliary worker should complement the services rendered by the social worker. Depending on the family situation and the needs of the family, other social service providers such as child care workers, psychologists, health workers, probation officers, family counselors and ministers must be identified to ensure integrated holistic service delivery to the family.

Community development practitioners, play an important role to ensure that accessible resources and services and support networks for the family are available in communities.

## **4.2 BENEFICIARIES – FAMILIES AND COMMUNITIES**

### **4.2.1 RIGHTS AND RESPONSIBILITIES**

Families and communities as service beneficiaries will differ depending on the systems of interventions, namely micro, mezzo or macro level. Service interventions at the level of either families or communities, take the unique rights and needs of families from a systems and developmental perspective into consideration. Services to families focus mainly on four family target groups namely: Resilient families and communities, families in crises, families in transition and families at risk.

Norms	Standards	Guidelines
<b>BENEFICIARIES: Rights and Responsibilities</b>		
P-B-1 Families have the right to participate in decisions and matters affecting them.	Families to participate in any decisions affecting them.	Ensure that family participatory mechanisms are in place.
P-B-2 Family is the basic unit of care and protection for family members	Families have a primary responsibility to care for its members.  Parents are responsible for care and protection of their children.	
P-B-3 Families have the right to be preserved and supported	Families should be preserved as far as possible through provision of programs suitable to their needs and circumstances.	Implement Family Preservation Services manual as an intervention for all service providers.
P-B-4 Service Providers should advocate and promote the rights of families to have access to information on services rendered to families.	Families and communities should have access to information to be able to capitalize on opportunities or services that are available.  Information should be adapted to specifics of each life stage.  Information relevant to families and communities should be communicated using community media structures.  Service providers should continuously inform families about the process and progress of services to promote transparency.	

### 2.2.2 FAMILIES IN CRISIS

Family in crisis experiences an emotional, trauma and hazardous event which leads to distress. This subjective reaction to stressful life experiences is mostly temporary but negatively impact on family functioning and family stability. The family finds itself unable to cope with and need assistance e.g.: sudden unexpected death of a family member or murder of a family member etc.

A family in crisis is generally a family that function well enough to cope with daily challenges, but is due the crisis they experiences in need of urgent intervention to assist families to manage the crisis until they are able to revert to their own coping skills and systems. It is important that families which require support are not encouraged to depend on external support systems, but are assisted to become independent in their functions.

Family will need trauma counseling services for debriefing and containment of family members.

Norms	Standards	Guidelines
<b>P-B- Families in Crisis</b>		
P-B-1 Families in crisis must be assessed and have access to trauma services	Intake interview must be recorded on the prescribed developmental assessment tool. Assessment must be undertaken within 72 hours if a family is in crisis  Risks and strengths of the family should be assessed.	Family developmental assessment tool  Develop the strategy on trauma management.

<p>P-B-2 The family development plan must guide intervention that is suitable for the family in crisis.</p>	<p>Family development plan must be developed after the assessment has been conducted.</p> <p>The family development plan is designed to strengthen families and preserve families.</p> <p>All family members must participate in the development of the plan or interventions.</p> <p>Service providers must provide debriefing and crisis intervention based on the assessment plan.</p> <p>Service providers must provide trauma counseling.</p> <p>Service providers and practitioners should be trained in trauma counseling</p> <p>Service providers must provide practical support in terms of assisting families with issues of safety and physical comfort due to trauma experience.</p> <p>Service provider to provide information (factual information)</p> <p>Service provider must plan and present awareness and education</p>	<p>Family development plan guidelines in place</p>
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	<p style="text-align: center;">campaigns</p> <p>Service provider must render support services to victims for court preparations.</p> <p>Service providers must network and collaborate in providing support to victims.</p>	
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### 2.2.3 FAMILIES AT RISK

These are basically families that face threat from various negative forces in society. They are also prone to extreme vulnerabilities. Families at risk are families that are already in crisis and face imminent danger of disintegration. Families at risk are characterised by disunity, ineffective communication, poor interpersonal relationships, poor parenting skills and irresponsible behaviour. Lack of support, care, poor role clarification, mistrust and poor conflict management are usually evident in these families. Families at risk may be defined by gender and partner abuse or violence, substance abuse and other forms of anti-social behaviour. In such families, members may not be self-reliant, are unemployed or unable to earn an income through other economic means. Such individuals are mainly deprived of resources that can help them to perform their expected roles in society. Most often families at risk require state intervention in order to enable them function effectively in society.

Norms	Standards	Guidelines
<b>P-B- Families at Risk</b>		
<p>P-B-1 Families at risk should undergo a risk assessment</p>	<p>Risk assessment of the family and each family member is conducted.</p> <p>Risk assessment tool be utilized.</p> <p>Service providers to assess the family strengths and build upon the existing family strength.</p> <p>A Strengths assessment tool to be utilized.</p> <p>The outcome of the risk and family strength assessment must indicate the appropriate intervention.</p> <p>The service provider must develop the family intervention based on the assessment.</p> <p>Services rendered to families at risk should never compromise the safety of individual family members.</p> <p>Service providers must address the identified risk and challenges faced by families.</p> <p>When the safety of family members are compromised, statutory intervention should be embarked upon.</p>	<p>Families at risk require intervention to prevent the placement of family members in alternative care.</p>

## 2.2.4 FAMILIES IN TRANSITION

Families in transition are defined by change or disruptions which may result from separation, divorce and death. When this occurs, family members, especially the most vulnerable and dependent, fail to access resources that are important for their optimal functioning. Therefore, families, which are in transition, need special support from the state.

Families in transition due to migration, separation, divorce or death should be supported during the transition period.

Norms	Standards	Guidelines
<b>P-B- Families in transition</b>		
P-B-1 Families in transition have access to intervention and support	<p>Families in transit must be supported and assisted to adjust.</p> <p>The intervention strategies should strengthen families in transition.</p> <p>Services to families in transition should be Intersectoral and spearheaded by an inter-disciplinary team.</p>	Families in transition must be assisted to regroup and adjust in their new family form.

## 2.2.5 RESILIENT FAMILIES AND COMMUNITIES

Resilient families are well-functioning as they are psycho-socially, emotionally and financially stable. They are associated with the creation of a supportive external and internal environment and good child-rearing practices.

Most importantly they have the ability to withstand and rebound from adversity and challenges that they have faced, even stronger than before.

A clear understanding of the risk factors and identified strengths in a family can assist in developing the resilience capacity of the family. Family strengths and protective factors are factors that shield or protect families and their members from the negative effects of risk factors. Resilient processes that in synergy with one another render families resilient include: family organizational processes, family adaptability, protective processes (including family resources and support systems), family communication processes and family belief systems.

Norms	Standards	Guidelines
<b>P-B- Resilient families and communities</b>		
P-B-1 Resilient families should have access to all levels of Interventions	<p>Service providers must promote family life and strengthen families.</p> <p>Service providers need to recognize the strengths and resourcefulness of each family in rendering services to families.</p> <p>Service providers must focus on strengths of the family rather than only focusing on the risks and challenges the family</p>	<p>Resilient families must be supported to maintain and uphold their level of family resilience.</p> <p>The support networks of resilient families should be strengthened.</p>

	<p>experiences.</p> <p>Services to communities should focus on building the social cohesion for families to take responsibility for other families within a community.</p> <p>Interventions such as community mobilization could assist in addressing the challenges that a disadvantaged community with a lack of necessary infrastructure and resources has in addressing the diverse needs of families.</p>	
<p>P-B-2 Resilient families have access to a range of programmes</p>	<p>Programmes for families need to focus on developing self-reliant and resilience in families</p> <p>Programmes for families should enable families to regroup their energies</p> <p>Programmes should strengthen family support networks</p>	

## **4.3 SERVICES**

### **4.3.1 BASKET OF SERVICES PROVIDED**

The draft White Paper on Families aims to promote family life and strengthen families through a comprehensive, coordinated and synchronized approach to social service delivery to families. The available services and programmes to families need to address the needs of families holistically. Families are diverse and thus have diverse needs to be uniquely addressed.

A minimum basket of services to families need to be available. The generic norms and standards for Social Welfare Services stipulate the following minimum basket of services that should be available for the Social Welfare Sector:

- Prevention and Promotion services
- Protection and Statutory services
- Therapeutic Services and treatment services
- Support Services
- Re-integration and after care services

The draft white Paper for Families identified key strategies that will translate into programmes and activities that will strengthen families namely; promoting healthy family life, family strengthening and family preservation.

The implementation of the White Paper for Families will ensure that families and their members and communities are empowered, resilient, preserved and able to play their requisite roles.

The quality and effectiveness of services and programmes to families depends on the implementation of the norms and standards for services to families, as well as the effectiveness of the monitoring and evaluation system.

In accordance with the service delivery model (ISDM) developmental social welfare services to families should be rendered on four levels namely; prevention, early intervention, statutory and reunification and after care levels.

Norms and Standards for services and programme to families will give effect to services and programmes to be **community-based** and **family-focused**.

The table below indicates the Norms and Standards applicable to the direct provision of services to families.

NORMS	STANDARDS	GUIDELINES
<b>P-S Basket of Services</b>		
P-S-1 All service providers must render a minimum basket of services to families	Social Services to Families should include the following services: <ul style="list-style-type: none"> <li>- Prevention and Promotion</li> <li>- Protection and statutory service</li> <li>- Therapeutic and Mediation Services</li> <li>- Support Services</li> <li>- Reintegration (Reunification) and after care services</li> </ul>	

### 4.3.1.1 PREVENTION AND PROMOTION

These services rendered to families will promote family life and strengthen families. The family sector should render services based on the White paper and other relevant legislation.

The table below indicates the Norms and Standards applicable to the direct provision of services to families.

Norms	Standards	Guidelines
<b>P-S Prevention and Promotion Services</b>		
<p>P-S-1 All service providers providing services to families must provide prevention and promotion services and programmes</p>	<p>Service providers must promote family Prevention and promotion programmes and must strengthen and build the capacity and self-reliance of families</p> <p>Service providers render campaigns that give information about services available to enhance family resilience.</p>	<p>Service providers must promote family life and the strengthening of families focusing on the following interventions:</p> <ul style="list-style-type: none"> <li>• Promote gender equality between men and women.</li> <li>• Implement life skills and educational programmes.</li> <li>• Service provider must promote and strengthen high quality comprehensive and holistic ECD programme in disadvantaged communities.</li> <li>• Service providers must have the following advocacy programmes:               <ul style="list-style-type: none"> <li>- Campaigns that give information about services available to enhance family</li> </ul> </li> </ul>

		<p>resilience</p> <ul style="list-style-type: none"> <li>• Selective intervention which targeting families with special needs such as such as marriage preparation and marriage enrichment programmes , parenting skills programmes, programmes for families with family members with special needs.</li> </ul>
<p>P-S-2 Families have access to prevention and promotion services that will preserve families</p>	<p>Well-functioning families are promoted and supported.</p> <p>Families at risk are uplifted to prevent dysfunctionality and enabled to rebound after adversity.</p> <p>Service provider render support programmes.</p> <p>Service providers promote family support strategies to strengthen families.</p> <p>Service providers must link families with resources within the community.</p> <p>Strengthen family support networks.</p> <p>Programmes are based on a multi-disciplinary and inter-sectoral approach.</p>	

	<p>Programmes must promote communication and promote positive relationships with families.</p> <p>Programmes must strengthen the extended family and family support.</p> <p>Education and awareness on parental rights and responsibilities</p> <p>Family preservation programme must promote the importance of the early years, particularly early childhood development.</p>	
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#### **4.3.1.2 PROTECTION AND STATUTORY SERVICES**

The statutory process must not be confused with statutory services. The statutory process is about a particular level of intervention and a period of time during which families are waiting for outcome of a legal court procedure. This decision making phase regarding the court processes should not place a halt on the rendering of services to family unit. Whether in trouble with the law or in need of care and protection, the family member that faces some form of court proceeding may, as a result of these proceedings, return home, being placed in care or custody, or being placed where participation in a particular programme is expected.

Families at this stage are awaiting, they are in “limbo” which is a very difficult time period for all concerned. This period should be used effectively to establish the developmental and therapeutic needs of the family. The needs of the family identified through the assessment process should be addressed.

The table below indicates the Norms and Standards applicable to the direct provision of services to families.

Norms	Standards	Guidelines
<b>P-S Protection and Statutory Services</b>		
P-S-1 Families should have access to support services whilst the statutory process unfolds	<p>Service providers must render support services to families affected.</p> <p>Service providers must render support services to empower families with coping skills.</p> <p>Service Providers must intervene with an aim to safeguard the well-being of the family and its members.</p> <p>Service providers must render intensive family service.</p> <p>Service providers must provide support services to families affected by the removal of a family member.</p>	Collaboration between the service providers must be in place.

### 4.3.1.3 THERAPEUTIC AND MEDIATION SERVICES

Therapeutic services are aimed at restoring the social functioning of family members within the family and community. Furthermore, therapeutic services are aimed to assist the family that is impaired and dysfunctional due to factors such as substance abuse, crime and domestic violence, family disintegration and family conflict/dispute.

**The table below indicates the Norms and Standards applicable to the direct provision of services to families.**

Norms	Standards	Guidelines
<b>P-S Therapeutic and Mediation Services</b>		
P-S-1 Families have access to therapeutic intervention that include intense family support services	<p>Service providers must render family based services to decrease the vulnerability of family members.</p> <p>Service providers must increase resilience of families and its members as the building blocks of communities.</p> <p>Service providers render community based services to strengthen families to function optimally.</p>	<ul style="list-style-type: none"> <li>• Develop therapeutic programmes such as.               <ul style="list-style-type: none"> <li>- Couple/marriage counseling</li> <li>- Family therapy</li> <li>- Parenting programmes</li> <li>- Fatherhood programmes</li> <li>- Intense family preservation programmes</li> </ul> </li> </ul>
P-S-2 Mediation services are available for families	<p>Appropriate resolution and alternative dispute resolution programme must be provided by service providers to address family disagreements and disputes that could impact on effective family functioning and community development.</p> <p>Mediation options should be available to address the diverse needs of families either as an alternative dispute resolution option or to</p>	<p>The following mediation options are available</p> <ul style="list-style-type: none"> <li>- Divorce mediation</li> <li>- Transformation mediation</li> <li>- International mediation</li> <li>- Preventative mediation</li> <li>- Community mobilization</li> <li>- Family group conferencing</li> </ul>

	<p>prevent family conflict.</p> <p>Mediation programme must be rendered to families that need to establish agreements to resolve disputes.</p>	
<p>P-S-3.The framework on mediation in family matters as alternative dispute resolution programme and/or programme to prevent family dispute, must be available</p>	<p>Mediation Programmes as alternative dispute method and/or method to prevent conflict and dispute must be in place.</p> <p>Only a family advocate, trained social worker, social services professionals who is suitably qualified, may mediate in disputes.</p>	<p>Roll-out training on the Framework on mediation for Social Service Professionals mediating family matters.</p>
<p>P-S-4. Mediation services to victims/survivors of trauma must be available in communities</p>	<p>Family group conferencing and Victim Offender Mediation programmes may be used as diversion in accordance with Child Justice Act 75 of 2008 to address the needs of victims of trauma and their families.</p>	<p>Mediation options:</p> <ul style="list-style-type: none"> <li>-Victim Offender Mediation</li> <li>- Family Group Conferencing as diversion option</li> </ul>
<p>P-S-5 When family dispute arise mediation services must be accessible to families</p>	<p>Families need to have access to formal and informal mediation services to resolve family disputes.</p>	<p>Formal mediation as stipulated in the Framework on Mediation for social service professionals mediating family matters.</p> <p>Informal mediation conducted by lay-forums in accordance with the Children’s Act 38 of 2005.</p>

#### 4.3.1.4 SUPPORT SERVICES

Social support services aim to enhance and strengthen family and community life and buffer stress and risk factors. Services to families provide social support within the categories as defined in Framework on Social Welfare Services.

The table below indicates the Norms and Standards applicable to the direct provision of services to families.

Norms	Standards	Guidelines
<b>P-S Support Services</b>		
P-S-1 Families have access to a range of support services	Support services must enhance, strengthen and stabilize family and community life by providing a buffering factor of stress and risk.	<p>Support services could consist of:</p> <ul style="list-style-type: none"> <li>(1) Emotional support such as support to families caring for the sick or frail elderly family member.</li> <li>(2) Informational support that includes advice suggestions and support from faith-based organization programmes, as well as traditional leaders that respond to personal or situational demands.</li> <li>(3) Instrumental support such as the need for concrete direct social support for families. Instrumental support such as the need for concrete direct social support for families affected by natural disasters, as well as child-headed families that need special</li> </ul>

	<p>Strategies of family support focus on:</p> <ol style="list-style-type: none"> <li>1. Developmental support that will be promoting and strengthening families</li>   <li>2. Compensatory family support to counter act effects of social exclusion</li> </ol>	<p>support to ensure that the needs of each family member is addressed.</p> <p>Developmental support programmes</p> <ul style="list-style-type: none"> <li>- Promoting and strengthening the institution of marriage through preparatory or enrichment intervention.</li> <li>- Promoting and strengthening parenting programmes for first-time parents.</li> <li>- Promoting and strengthening gender equality between men and women.</li> <li>- Life skills and Education Programmes</li> </ul> <p>Compensatory family support programmes</p> <ul style="list-style-type: none"> <li>- Promoting and strengthening high-quality, comprehensive and holistic ECD in disadvantaged communities.</li> <li>- After school programmes</li> <li>- Parenting programmes</li> <li>- Promoting and Strengthening youth Development programmes</li> <li>- Fatherhood Programmes</li> <li>- Recreational and theatre-based activities</li> </ul>
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	<p>3. Protective family support provides support to families affected by various social ills.</p>	<ul style="list-style-type: none"> <li>- Support to caregivers so as to enhance the potential of families</li> </ul> <p>Protective Family support programmes</p> <ul style="list-style-type: none"> <li>- Families affected by the statutory process</li> <li>- Support groups for families affected by substance abuse, social crime, domestic violence and crime,</li> <li>- Day fostering of children whose parents are abusing substances</li> </ul>
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#### 4.3.1.5 FAMILY REINTEGRATION (REUNIFICATION) AND AFTER CARE SERVICES

Reunification and after-care services are rendered after statutory intervention took place and family member has been placed in alternative care. Aftercare services refer to family preservation services delivered to the family of origin to address the risk factors that necessitate the removal of the family member/s. Also, to assist the family in transitional period after the removal in order for the family to stabilize and enter into a reunification process. Services delivered at this level are aimed at integration and support services to enhance self-reliance and promote well-functioning families. The ultimate goal will be that families be reunified and that services on prevention and early intervention level be delivered to keep the family together, to be well functioning and self-reliant.

**The table below indicates the Norms and Standards applicable to the direct provision of services to families.**

Norms	Standards	Guidelines
<b>P-S Reunification and After-Care Services</b>		
P-S-1 Family reintegration and after-care services	<p>Reunification and after-care programmes are in place and should commence immediately after the final court order is issued.</p> <p>Reunification services must be rendered to preserve the family institutions.</p> <p>Reunification and after-care should enhance self-reliant and optimum social function of the family.</p> <p>Capacity building programmes to strengthen and improve wellbeing and resilience of the family.</p>	<p>Reunification care plan guide</p> <p>Report format on Reunification services</p>

<p>P-S-2 Family members have a right to reunification services and after-care services</p>	<p>Where a removal of a beneficiary from the family unit is appropriate, it must be a temporary measure and family members have a right to be integrated.</p> <p>If it is not possible, a permanency plan should be developed to ensure stability</p> <p>Service providers should empower families to seize opportunities and build their own capacity and support networks</p> <p>Service providers rendering services to families need to tap into the family uniqueness represented by the family culture</p>	
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## SECTION 5

### END-RESULT/OUTCOME NORMS AND STANDARDS FOR SERVICES AND PROGRAMMES TO FAMILIES

Outcome norms and standards specify the end results of service delivery.

The following outcome norms and standards for services to families are formulated:

- Families are preserved as basic systems and family members are empowered and resilient to fulfill their requisite roles and responsibilities.
- Sound family life that includes the encouragement for marriage, stable relationships and lifelong commitments, are advocated for.
- Resources, support services and programmes are available within communities as support networks to families.
- Families have access to resources, services and programmes that enable them to address the family's needs holistically and to provide adequate support to family members to protect them from vulnerability.
- Communities are safe and supportive and take responsibility for their families.
- Families are strengthened and preserved to adhere to their responsibility of caring and supporting those family members that are vulnerable.

Outcome norms and standards for services to families describe the tangible results of the actions taken to improve the families' and the communities' current and future situation and overall the quality of family life for family well-being. It also describes the capacity of service providers rendering services to families to respond objectively to their beneficiaries.

Outcomes are the tangible results of the actions undertaken to improve the service user's current and future situation. The overall quality of life of the person served or client satisfaction, as well as the capacity of the services to respond objectively to service beneficiaries are considered as key outcome in evaluating and monitoring services to families.

**MATRIX FOR OUTCOME NORMS AND STANDARDS – End Result Norms and standards**

Norms	Standards
ER End Result –Outcome	
<p>ER -1 Integrated development services to families must improve functioning and promote family preservation through empowering families to fulfill their roles and responsibilities to prevent family disintegration</p>	<p>Integrated development social services to families must:</p> <ul style="list-style-type: none"> <li>- Enhance the social functioning of families.</li> <li>- Strengthen vulnerable families with a focus on families affected by poverty.</li> <li>- Improve family communication and enhance family relationships.</li> <li>- Increase conflict resolution within families and communities.</li> <li>- Support the development of positive values within families and communities.</li> <li>- Support families in their adjustments to changing roles within families and society.</li> <li>- Lobby for resources and services and programmes in communities as support networks to families.</li> <li>- Advocate for communities to be safe and supportive to families.</li> </ul>
<p>ER 2 Social services to families must increase the social integration of family members within families and communities</p>	<p>Social service providers to families must:</p> <ul style="list-style-type: none"> <li>- Improve the active participation of family members in social, economic, cultural, and spiritual and community activities.</li> <li>- Improve the inter-generational relationships within families and communities.</li> <li>- Increase the social cohesion of family and communities.</li> </ul>

## **SECTION 6**

### **IMPLEMENTATION PLAN OF THE NORMS AND STANDARDS FOR SERVICES FOR FAMILIES**

The implementation plan for Norms and Standards for families will be developed both at national and provincial level to guide the roll out process.

Provinces will be provided with a template for the implementation plan for them to give input to the National Department on critical activities that will ensure the successful implementation of the Norms and Standards.

Capacity building on the norms and standards for all service providers will be conducted to ensure quality of services within the sector.

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## **FAMILY DEVELOPMENTAL ASSESSMENT TOOL (RISKS AND STRENGTHS)**

### **Introduction**

Assessment forms the foundation of Family Preservation work at all levels of service delivery. A holistic, developmental assessment of the family is the first step in Family Preservation services. This assessment will guide the multi-professional team regarding what services the family requires and whose responsibility each service is. The assessment involves the family as a critical team member from the start and thus sends a message to the family that their active involvement and participation in the process is essential. Assessment is an on-going evaluation process whilst engaging with the family. It is located within a continuum that moves from engaging with the family until disengagement.

### **Goal of a developmental assessment**

Determine the least restrictive, most empowering environment and programmes and resources suitable to the family at a given moment, during the intervention process, and / or in the long term.

All the members of the multi-disciplinary team should participate in the developmental assessment process (a range of professionals from various disciplines can and should participate in and facilitate developmental assessments). For this reason it is essential that all team members receive training in Developmental Assessment.

### **Risk Assessment of families**

It is important that a risk assessment of the family and each family member be conducted as soon as possible. This will ensure that the safety of each family member is considered as first priority when engaging the family in any family preservation programme irrespective of the level of the programme.

Risk factors are those conditions that increase the likelihood of a family member developing one or more behavioural challenges that may lead to the removal of family members from the family or that contribute to dysfunctionality in families.

### **Risk factors often occur in five main domains.**

These domains include:

- individual risk factors;
- peer risk factors;
- family risk factors;
- school risk factors; and
- community risk factors.

Those families who are affected in more than one domain are usually those who are at highest risk. The more risk factors within the family, the more at risk are the family members.

Where multiple risk factors are identified in different domains, it is important to consider a holistic approach where family members are looked at in totality and in various contexts.

The risk assessment informs the nature of the developmental programmes that need to be developed for the family.

Each risk domain will now be examined:

### **1 Individual Risk factors**

Individual risk factors include amongst others:

- Individual behaviour.
- Developmentally-related issues (for example, the onset of adolescence).
- Early initiation or onset of challenging behaviour (from early childhood).
- Alienation.
- Rebelliousness.
- Child diagnosed as having learning difficulties.
- Use of drugs or other substance abuse.
- Running away from home.
- Inability to engage with others in healthy and helpful relationships (minimal signs of sharing and/or generosity).
- Previous or current involvement in minor or other forms of criminal activity (no matter how petty).
- A victim of child abuse

### **2 Peer Risk Factors**

Peer risk factors include amongst others:

- Association with friends with equally challenging behaviours.
- Favourable reinforcement of challenging behaviours by peers.
- “Gang” involvement.

### **3 Family Risk Factors**

Family risk factors include amongst others:

- Parental attitudes and behaviours.
- Family management of conflict and other behaviours.
- Family relationship issues.
- Inadequate parental care/parent absenteeism.

- Parental neglect.
- Abusive parents.

#### **4 School Risk Factors**

School risk factors include amongst others:

- Frequent absenteeism.
- Repeated academic failure.
- Truancy (staying away from school without reason).
- Lack of commitment to school

#### **5 Community Risk Factors**

Community risk factors include:

- Extreme economic deprivation and poverty.
- High community mobility.
- Community laws and/or attitudes that favour the use of drugs and weapons.
- Low or lack of neighbourhood support for families at risk.
- Uncontrolled availability of drugs and substances that are commonly abused.
- Unsafe neighbourhoods
- Lack of community infrastructure/resources

When utilising the Risk Assessment tool, the strengths of the family should be uncovered and highlighted simultaneously.

Be reminded that the Risk Assessment Tool is NOT a diagnostic tool. The tool is to be used purely for the purposes of identifying risk factors within the different domains that may contribute to dysfunctionality and families to be at risk.

By assessing risks, we want to be able to develop an appropriate developmental programme together with the family members to assist them to move from being at risk to be resilient.

## **Assessment of Family Strengths**

### **What is the “strengths approach”?**

An important feature of family preservation is the focus on identifying and building upon existing family strengths. Research conducted in other countries has shown that the strength perspective is very effective in working with families.

Positive change in families occurs when people have some measure of control over resources, time and money. In fact it has been found that the experience of loss and powerlessness is felt more profoundly by families when there is an over-dependence on professionals/service providers to meet their needs.

Programmes are strengths-oriented when they convey the message that people - all people - have the capacity to better their lives. Building upon people’s strengths helps them to take responsibility and control over their lives - they set growth oriented goals and achieve personal dreams. It is also about using the identified strengths to address the identified risks in the family.

The strengths approach is pro-active, preventative and promotional in nature and it takes into consideration the cultural orientation/ differences of each participant in the process

### **Proposed framework for Assessing Family Strengths**

Identifying family strengths is not an easy task - especially with families in crisis and requires training and a high level of emotional maturity on the part of the service provider/s.

#### **Domains of family strengths**

The following domains of family strengths can be identified namely:

Family Resources.

Family Functions.

Family Interactions.

Family Life Cycle.

Self-identity.

Family Affection.

Educational and Vocational.

#### **6.3.4.2 Family Strengths Assessment Tool**

The *Risk Assessment Tool* should be used in conjunction with the strengths assessment tool to develop a Family Developmental Plan for the family.

**Please note that what we have included in this tool is not meant to be prescriptive - it can and should be adapted to suite the conditions and the culture of families.**

#### **Family Resources**

- How does the family define itself? Who are the members of this family?
- Are there any members of the extended family who are important and significant?
- What are the roles of the members of the extended family towards the family you are working with (i.e. do they provide nurturing and support)?
- What does the family describe as its culture and background?
- Are there any cultural practices and beliefs that the family ascribes to?
- Does religion have a role in this family?
- Do the family members have any special talents and abilities?
- In the face of adversity, how does the family cope?

#### **2. Family Functions**

- What is the financial position of the family and how do they address their needs.
- Who is employed in the family? Do parents work? Who supports the family?
- What are the care arrangements for children and vulnerable family members?

- Who manages the family's finances and how is this done?
- Are the family members aware of the family's financial situation?
- How are family values and morals instilled?

### **3. Family Interactions**

- How has the family managed to stay together over the years?
- How does the family adapt to change?
- How close are family members to one another?
- What are the levels of acceptance between members in the family? Are family members able to express themselves openly?

### **4. Family Life Cycle:**

- Which developmental and transitional stages have the family gone through?
- Which rites of passage do they honour?
- What is the structure of the family and how has it changed?
- How have historical and socio-political events affected the family?
- What responsibilities do older family members have?

### **5. Self-identity:**

- Do family members have goals and do they have a family vision?
- Are family members proud of who they are?
- Do family members feel that they are valued in the family?

### **6. Affection:**

- Do family members get the comfort and reassurance that they need?
- Do family members feel needed and valued?
- Do family members feel respected and loved by each other?

### **7. Education and vocational:**

- What is the level of education of the parents and other family members?
- What are the vocational skills of family members?
- Are these skills utilised. If not, why not.

## **Methods to identify family strengths**

There are three primary ways of finding strengths in families:

- **Through Observation:**

Service providers should always observe and pay attention to the family surroundings to identify sources of pride ( photographs, medals, trophies and decorations) that could reflect the strengths, the dreams, achievements and capacities of the family.

- **By Asking the Family:**

Service providers should master the skill of utilising the strengths assessment tool. Asking questions about the strengths of families is one method of obtaining information. There is nothing inappropriate about asking a mother about the most useful or helpful qualities of her son. In fact, it helps if this questioning is conducted as a family exercise. It allows family members to give one another feedback and to reflect on how much they appreciate one another.

A useful line of questioning is: "What makes you feel good about your family?"

The principle of respect has to prevail at all times. Negative judgement of one another should be prevented.

- **By Asking Other Professionals Who Work With the Family:**

Other service providers involved with the family are also a valuable source of information. It is important to enquire from other professionals and service providers about the strengths they have identified in the family.

### FAMILY DEVELOPMENTAL PLAN

A family developmental plan is an agreement that is reached between the family, other significant systems and the service providers, and forms the basis for the delivery of services on all levels of service delivery.

What is important from this definition are the following three critical aspects:

• **Agreement:**

There has to be an agreement on what needs to be done by all concerned.

• **Participation:**

There has to be participation in the development of goals. This is done to ensure that the plan is supported and that resources are available to implement the plan.

• **Equality and partnership:**

There is equality and partnership in the development of the plan - plans are not to be imposed on the family.

**A family developmental plan must reflect:**

- A clear understanding and reminder of the large collaborative effort of all its members to address the family needs.
- The differentiated roles and responsibilities for all involved - clarification of the role of team members.
- That family's dreams and vision were explored - what does the future of this family look like? What could be the outcomes of their dreams?
- An agreement with an action statement (what should be done), the motivations to execute the action plan and an indication of what should be in place to achieve the outcomes of the plan.
- Individuality of each plan - each family is unique so there should be no uniform plans and expectations that "one size fits all."

**What is the purpose of a family developmental plan?**

A family developmental plan serves the following purposes:

- A quality plan helps the family, the service providers and the larger system to **agree** on services that need to be rendered.
- It helps in obtaining a **commitment** from all as it clarifies and builds mutual understanding.
- It helps in **minimizing miscommunication**. If there is no planning, it is unlikely that there will be a proper path towards achieving the desired outcomes.
- A quality plan helps in establishing where the family is in working towards the objectives and the goals set for the developmental plan and the service delivery process.

## What criteria/values underpin the development of a family plan?

Developing family plans needs to be value-based. The following criteria/values should guide the development of a developmental family plan:

- **Mutuality/Participation:** the value that says “we are in this together”. It is not a question of “what are you going to do about this?” but “what are we (service providers and family) going to do?” The family has to feel the support of the multi-disciplinary team. Whatever is agreed upon binds and benefits all systems involved. There is mutual decision making.
- **Team work:** teamwork between the family and the multi-disciplinary team is essential. The possible outcomes to be achieved should be mutually beneficial to all those involved and should ensure a holistic approach to service delivery.
- **Empowerment:** the team facilitates the process of assisting the family to define that which needs to be changed, as well as assisting them to make these changes. The team has to ensure that there are adequate resources available to reach the desired outcomes of the plan.
- **Self-determination:** family members need to be motivated to take the responsibility for defining and prioritizing the changes that they want to make.
- **Integrity:** family members and the team agree to be honest and transparent with one another - there should be no hidden agendas.
- **Acceptance:** the team will accept the family’s right to determine the critical goals of the family development plan.

## What is the characteristics of a family developmental plan

The following characteristics which mark the process of developing family developmental plans can be identified:

- **Flexible:**  
The process is dynamic. It is open to negotiation as there could be changes in the priorities of the family.
- **Ethical:**  
The team members should be guided by a set of values and ethics when assisting families to develop quality plans. Respect forms the basis of these values. Another critical value is confidentiality. This means that the team should respect the confidential relationship with the family and should not reveal privileged information or plans (without the consent of the family). Confidentiality also means respecting the privacy of the family.
- **Realistic:**  
The assessment of the strengths and abilities of the family, family skills, resources and capacities should be done to develop a realistic plan that can be implemented.
- **Reasonable:**  
The plan should be reasonable to ensure implementation.
- **Accountable:**  
Family members and the team are accountable by monitoring their own effectiveness. Accountability involves the process of reflection and feedback.

- **Creativity:**

The development of a quality family developmental plan is a creative process by enabling families to generate as many options as possible to meet their needs. Using the brainstorming method is a good way to engage the family in the process.

- **Empowerment:**

The family and team members work together in partnership. The team facilitates the process of assisting the family to achieve the set objectives and goals in the plan.

- **Commitment:**

The professional team with the family as one of the team members should be committed to the process. Commitment goes along with a caring concern and taking responsibility for family members.

- **Developmental Assessment:**

The developmental assessment of the family will guide the development of a developmental family plan.

## **Goal and objectives of Family Developmental Plans**

At the core of the family developmental plan are goals and objectives. These goals and objectives serve two purposes:

- They clarify and define what changes the family wants and needs to make.
- They clarify what services and activities should be provided to support the family and the family members to make the changes they desire.

### **What are family goals**

Family goals drive family developmental plans. Family goals deal with those changes to be made within the family to ensure effective functioning and addressing challenges the family are facing.

Family goals are a reflection of:

- Decisions by family members to change behaviours and address the needs of the family.
- Attitudes that need to be changed.
- Identifying the strengths of the families as a focus for service delivery.
- The ultimate goal for the family is to be self-reliant, have resiliency and be functional.

### **Family goals represent changes in the following areas:**

**1. Conditions within the family.** These conditions could be related to household practices, communication patterns within the family or the emotional climate in the family.

**2. Circumstances necessary for the attainment of family goals.** Linking the family with resources and other services to address family needs and the challenges the family is facing.

Goals are broad in nature - they reflect what people want to achieve through change.

## **What are family objectives**

Family objectives on the other hand are specific, concrete and tangible statements of the work the family will engage in, in order to meet family goals. Objectives focus on what the family can and will do. They form the basis of family change. They also form the basis of assessing the outcome of family preservation strategies.

Objectives should be based on the SMART principles. This means that they should be:

- **Clear:** the way forward should be clear to everyone.
- **Written:** so as to be binding to those involved.
- **Agreed upon:** to avoid miscommunication or chaos.
- **Challenging:** objectives should allow families to grow in a realistic way.
- **Time limited:** objectives should not go on endlessly - there has to be a cut-off time.
- **Worthwhile:** objectives should add value to the well-being of the family.

## **Ground rules for developing Family Developmental Plans**

### **Rule 1:**

Identify the family's immediate goals. Assess the motivation for the goals and link them to family preservation goals and the level of service delivery. Establish the sincerity for the need for change without being judgemental.

### **Rule 2:**

Are goals mutually desired by all family members? Everyone in the family should have an input into the family plan, as well as feedback on what is being done to achieve the goals.

It is important to capture the plan as has been decided so that family members can take responsibility for the implementation of the plan and be accountable for service delivery.

### **Rule 3:**

The family should assist in managing the implementation of the plan. The family should also assist in co-ordinating, implementing and modifying plans (if there is a need) as the plan is dynamic in nature.

### **Rule 4:**

The implementation process should be reviewed on a regular basis. Evaluate those goals and objectives that have not been achieved and consider the reasons for not achieving them. Decide with the family whether these goals should be terminated or not.

### **Rule 5:**

Every member in the family needs to be committed to the development and execution of the family plan. The plan should be family-driven and requires the participation of all the family members.

It is necessary that the team, including the family, "signs" the plan.

## **Accountability for plans**

One of the principles of developing family developmental plans is that members have to be held accountable for the plans developed. They need to commit themselves in writing and the plans should be recorded. This will ensure proper monitoring and timeous reviewing of the plans.

**REUNIFICATION CARE PLAN GUIDE**

Particulars of the Family Member (who has been separated):

Particulars of the Family:

Goal of the intervention:

Objectives of the intervention:

Roles and Responsibilities of all role players should be clarified:

<b>Task / Activity</b>	<b>Who (service provider or a family member)</b>	<b>Resources</b>	<b>Target Date</b>	<b>Assumptions / Risks</b>

Reunification Care Plan may be signed by all parties involved once agreed upon:

Date of the Review of the Care Plan:

The Contingency Plan if Reunification is not possible:

**GUIDELINES ON WRITING A REUNIFICATION REPORT**

Particulars of the Family Member (who has been separated)

Family background (family history, employment, education etc.)

Interpersonal relationships

Support systems

Medical and Psychological factors

Developmental needs (children)

Housing and environment

Religious and cultural factors

Socio-cultural factors

Financial circumstances

Social habits (chemical and substance abuse, criminal tendencies etc.)

Problems identified and the interventions recommended

Reunification services rendered (e.g. therapy, behavior modification, problem solving, mediation etc.)

Outcomes of the intervention

Evaluation

Recommendations (should also include a long-term plan)

Referral (if required)