

## Six dimensions of good practice

This section is based on chapter 7 in C. Watters (2007), *Refugee Children: Towards the Next Horizon*, published by Routledge.

The following dimensions provide a framework for defining and evaluating good practice in service provision. They seek to integrate analyses at the macro (institutional), meso (service) and micro (treatment) level.

### 1 Access and entitlement

The issue of access and entitlement draws attention to potential discrepancies between laws and policies regarding service provision (entitlement), and actual practice on the ground (access). In this context, defining good practice should focus on what happens at the ‘street level’, rather than entitlements spelled out in policy documents. Street level access to a service can be seen to depend, for example, on the amount of information made available about the service, its appropriateness with regard to the actual needs of the target group, and attempts to reach out to the target population.

### 2 Participation

Participation of the target group is an important aspect of service provision. For example, children’s rights to participate in matters affecting them is inscribed in the Convention on the Rights of the Child (CRC) ratified by all European countries. Participation in services can take many forms, from mere ‘tokenism’ to playing an active part in the designing of a service. Participation of the latter kind can help service providers in creating more appropriate services by improving understanding of the real needs and experiences of the people they are meant to assist. Participatory methods may also be useful for evaluating service provision.

### 3 Holistic practice

Holistic practice can be defined as an approach that combines aspects of social, emotional and psychological care. Provision of holistic care in refugee services varies on the ground from broadly based assessment of refugee clients’ needs to coordinating services and training staff across a range of service providers, including for example counsellors, GPs, and providers of material care. Again, participation and individual assessment are central aspects of providing holistic care and should form the basis for what services are offered to each individual. In some circumstances, it may be useful to establish a ‘hierarchy of needs’, with the most fundamental needs (e.g. food, housing) being attended to before responding to ‘secondary’ needs (e.g. self-esteem). Evaluation of good practice in the area of holistic practice should focus on the quality and manner of each service provided, and the way they are coordinated.

### 4 Interagency collaboration

Interagency collaboration is commonly promoted as good practice in refugee service provision. In *formative* interagency collaboration, a programme is initiated through interagency collaboration, for example in the form of a steering group. *Reactive* interagency collaboration is developed when the demands on a service exceed its capacities. *Informal* collaboration occurs between agencies at the ‘street level’, for instance through referrals

between services. The presence or absence of such links may have a significant impact on asylum-seekers' pathways.

## 5 Cultural sensitivity and reflexivity

Practices on the ground differ widely as to how they interpret 'cultural sensitivity'. For example, practitioners may see culture as a veil behind which lies a more universal reality. The danger here lies in forcing Western categories regarding e.g. mental health or childhood on people who do not fit into the familiar categories. It can be both more efficient as well as ethically proper to empathise with migrants' cultural worlds and allow these to inform, to whatever degree is considered appropriate, the services provided. On the other hand, cultural sensitivity requires practitioners to break free from common tendencies such as cultural stereotyping and 'blaming the culture'. The effects of class, gender, and current circumstances are some factors that are often overshadowed by an emphasis on ethnic culture. Again, migrants should be considered the experts on what their cultural needs and expectations are.

## 6 Evaluation

Central questions to be asked about evaluation include: to what extent is evaluation an integral feature of service provision? How is it undertaken? What role does it have in the ongoing development of services? How independent is the evaluation? Evaluation can be concerned with the aims of a service, and the ways that these are realised in the course of service provision. Outcome evaluation looks at whether the service is producing the desired effects, in light of predetermined goals. The value of a service could also be assessed externally by standards of care judged acceptable by national and international standards.

### Example: Good practice in the care of refugee children

Watters (2007, p187) outlines seven accomplishments which he sees as representing realistic objectives for the development of services for refugee children, and which can be used as a template for undertaking service evaluation within the specified area. These reflect the six categories outlined above, as applied to services for refugee children. The following provides a brief summary of the seven accomplishments.

1. *Take refugee children seriously as competent interpreters of their own lives*
  - Orienting services towards listening and receptivity
  - Recognising that refugee children are often resourceful and capable of exercising agency, despite distressing circumstances
2. *A holistic approach which offers integrated programs of social, emotional and psychological support*
  - Implies receptivity to refugee children's needs and flexible ways of working that combine counselling, advocacy and interagency work
3. *A receptivity towards culture*
  - Suggest moving from approaches that either ignore refugee children's cultures or treat children as necessarily immersed in one specific culture. Calls for

receptivity of children's own sense of their culture and at the same time recognition that conceptions may change according to time and situation, and reflect multiple influences

4. *A recognition of the impact of ongoing events on refugee children's lives*

- Orientates services towards the here and now of children's lives, with a focus on current factors affecting children's lives, as a starting point for interactions

5. *An orientation towards empowerment through ownership and participation*

- Aims at providing refugee children with a sense of ownership through their active participation in for instance setting agendas or planning exercises

6. *An engagement with family and meaningful others*

- Suggests that children's families and friends should have meaningful opportunities to be involved in programmes and parents should be consulted with respect to children's participation, offering a sense of continuity and support

7. *An emphasis on enhancing refugee children's own capabilities*

- Concerns the provision of an appropriate infrastructure that will promote children's capabilities, including educational resources, reasonable accommodation, health care and opportunities for social engagement and play

## Transfer of good practice

The goal with the identification of good practices is, of course, that these may be reproduced at a different locality or in a different country. Certain differences between countries, such as demographic data, political context, health and social care provision, and services developed for asylum seekers, may inhibit or facilitate the transfer of good practice. After the identification of a good practice and evaluation of country differences along the above dimensions, careful planning of the transfer is necessary, including consultation with and feedback from clients, professionals and stakeholders at various stages of the process (Watters, 2007).

Grassroots initiatives are another way of introducing new practices. The dimensions and accomplishments described above are useful to consider whether a 'bottom-up' or 'top-down' approach is dominant. As suggested in the previous section, interaction and knowledge exchange between researchers and other experts, policy-makers, practitioners and other 'street-level' staff, as well as – perhaps most importantly – the clients themselves, are likely to produce the most sustainable and effective outcomes for all the parties involved.