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Commentary Series

Advocacy: Improved Access to Services in the London Borough of Newham

Helena Svensson De la Cruz

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THE CENTRE FOR INSTITUTIONAL STUDIES

The Centre for Institutional Studies (CIS) is a research unit within the University of East London (UEL). Established in 1970, the centre undertakes studies of public policy and public institutions. Its distinctive approach is to identify the problems to which new policy is seen as a solution, and assess the capacity of the institutions to put new policies into practice. The Centre's name, and its approach is derived from the work of Sir Karl Popper and others, and in developing this approach the centre is unique in this country.

Since 1970 the centre has completed a range of studies in the fields of education, voluntary organisations, local government, local government finance, and other public services. Current work is focused on higher education, the voluntary sector and urban regeneration in the East of London.

THE URBAN REGENERATION TEAM

The Centre's urban regeneration evaluation team has been involved in the evaluation of a number of regeneration initiatives in East London. These have included Stratford City Challenge programme and SRBs located in East London. Other evaluations include a regional evaluation of the Youth Inclusion Programme for an assessment of the Home Office funded Domestic Violence projects which are part of the Crime Reduction Programme, and a number of projects concerned with reducing the criminal behaviour of young offenders.

The urban regeneration team is multidisciplinary, and consists of researchers from a variety of academic backgrounds, including social sciences, criminology, environmental science, and economics. In this way they are well suited to evaluate Urban Regeneration programmes which typically cover a wide range of projects, objectives, and focuses.

EXECUTIVE SUMMARY: ADVOCACY PROJECT

The Research

The Centre for Institutional Studies at the University of East London was commissioned by the Fit for Work Single Regeneration Budget Partnership to undertake an independent assessment of the Advocacy/ Improved access to services project in the London Borough of Newham.

The aim of the research is to assess the progress made by the project towards achieving its objectives to:

▪ Co-ordinate, join up and enhance advocacy work in East London in order to increase access to health services.

▪ Provide training and support for the advocacy workers.

The fieldwork was carried out between August and December 2001. Researchers interviewed members of the steering group, the management committee of the Consortium, and graduates from the Core Competency training course. The researchers also interviewed the service users identified together with the project co-ordinator as managers of advocacy provider agencies and graduates from the training course. In total 56 people participated in the research. Minutes of meetings and project papers were analysed, and meetings observed.

During the research the project changed its focus from setting common standards to concentrating on providing and developing training for advocates. The research activities were adapted as far as possible to reflect the project's change in emphasis.

The Project

The project is located within the SRB objective: 'to improve the access to health services of disadvantaged groups and to enhance their employment prospects and skills'.

The Advocacy project started in 1999 and was initially based within Newham Social Services.

The intention was for the project to provide information on the needs of advocacy providers to the Newham Locality Advocacy Steering Group, based at the Newham Community Health Services NHS Trust. The overall aim of the steering group was to plan the strategic development of advocacy services in the local area.

In 1999, advocacy providers who were not members of the steering group requested that they had a separate group to inform them about the development of services in the borough. In response to this request the project co-ordinator set up the Newham Advocacy Consortium.

By October 2000 the Newham Advocacy Consortium was established as an independent voluntary organisation with charity status. Achievements of the Consortium include setting up the following:

- An advocacy support group which meets monthly.
- A core competency advocacy training programme.
- A database of advocates who have graduated from the advocacy training.
- Standards for its members to enhance advocacy work and to act as an umbrella organisation.
- A certificate in advocacy at a University level.
- A directory of advocacy providers in the local borough.
- A Research Study on people with learning difficulties in Newham aimed at contributing to the development of advocacy services.

The Consortium intends to continue training advocates after March 2002 and funding has been granted from King's Fund and Community Education Department at LBN. Further funding has been sought from the HAZ and the decision is expected in the middle of March. The Consortium will also be putting in bids to four other funding bodies.

Summary of main research findings

Partnership

The project staff have developed partnership work with the voluntary sector, created a membership through the Consortium made up of the voluntary and statutory sector, and developed common standards towards which all members work.

The voluntary sector agencies feel supported by the Consortium.

Statutory organisations welcomed the establishment of the Consortium as a sub-group to the steering group.

Some statutory representatives feel dissatisfied with the degree to which the Consortium acts as an independent body. The management committee of the Consortium took decisions which the steering group members thought that they should have been taking part in. This led to confusion about the roles and responsibilities of each group.

The statutory organisations' dissatisfaction is further being fuelled by the lack of information sharing. This was partly caused by the disbanding of the steering group due to lack of commitment by the members and partly by differences in working environments. The statutory organisations enjoy long term funding and work towards achieving long-term aims and goals compared to the voluntary organisations that experience tight milestones and have short term funding.

A database containing contact details for sessional advocates has been set up by the Consortium. It is restricted to graduates from the Core Competency Training course and is not used by all agencies.

Support for advocacy providers

The research found that advocacy providers are satisfied with the services provided by the Consortium.

- Seven out of eleven organisations had attended professional talks, asked for general information, and showed an interest in the University course.

- Five had asked for training material and general support regarding the role of the advocates and its practice.

Some agencies (4) are unaware of the full range of services available from the Consortium, including training and opportunities for networking.

The voluntary sector service providers are overstretched and reliant on short term funding. Their expectations are that through the Consortium they will be able to access funds.

Training

The Consortium provides training for anyone, regardless of their previous experience of advocacy or the area in which they live.

Overall, the graduates from the Core Competency Training Course were satisfied with the course. Thirty-two graduates of the 35 interviewed found that the course had helped them in their professional life. Of those interviewed:

- Eleven out of sixteen felt more integrated in their working environment

- Eleven out of sixteen found that colleagues trust their professional judgement more.

- Twelve out of sixteen felt that they were more often asked for their opinion at work.

The majority of the graduates, most of whom are from minority ethnic communities, felt that the training gave them more skills and knowledge about their tasks and duties and improved their self-confidence. As a result they feel more integrated in their working environment.

The majority of the graduates felt that regular training is essential to keep their skills updated.

The graduates said that they felt supported and reassured by the staff from the Consortium.

Recommendations

The research found that the advocacy services are over-stretched, particularly in the voluntary sector and there remains a need to enhance the capacity of organisations

to deliver more services. In addition co-operative working at a strategic level, particularly between statutory and voluntary agencies is wanting.

Partnership

- If the statutory and voluntary agencies are to jointly develop advocacy services they need a clear understanding of each others aims, the constraints under which they work, to establish respect for each other's services and to develop trust. Employing a professional facilitator could enable the representatives from statutory and voluntary sectors to work together more closely.

- If the statutory sector is to provide support to the voluntary sector it needs to be able to provide support when needed rather than at scheduled meetings. Voluntary organisations sometimes need to meet milestones and funding application deadlines between meetings.

- The steering group, the management committee, and the Consortium need to have clear roles and responsibilities to clarify their contributions to the development of advocacy services in Newham.

Support for Advocacy Providers

- More information could be distributed to advocacy providing agencies about the services provided by the Consortium.

- More talks and workshops could be offered on different aspects of funding such as how to fill in application forms and where to look for funding etc.

- The Consortium could invest in Internet programmes such as Grant Finder and Funder Finder to facilitate the process of funding for the voluntary sector.

- The use of the database of the advocates could be expanded to allow more agencies to make use of the different specialist and language skills of the individuals on it.

Training

- The training course could run more frequently and be more widely marketed.

- Training in advocacy for specialist areas such as domestic violence and disabilities could be provided.

- The support group could provide talks/ training on confidence building and assertiveness.

- The courses need to be free or subsidised to enable less affluent students to attend.

CONTENTS

INTRODUCTION

The Urban Regeneration Evaluation Research team at the Centre for Institutional Studies (CIS), University of East London was commissioned by the Fit for Work Single Regeneration Budget (SRB) Partnership in May 2001 to undertake an independent assessment of the Advocacy/Improved Access to Service project in the London Borough of Newham.

The project receives funding from the Fit for Work SRB programme, the King's Fund, the London Borough of Newham, the HAZ and ELCHA. It falls within the Strategic Objective 1 of the SRB programme to enhance the employment prospects, skills and education of local and disadvantaged people and promote equality of opportunity. It also falls under Strategic Objective 7 to enhance the quality of life and capacity to contribute to regeneration of local people and their health.

This year the project is in the process of becoming independent and aims to deliver common standards of services amongst advocacy providers to ensure equity of access to services for socially excluded communities. It also aims to provide support for advocacy providers and advocates.

This is an ambitious project, with a challenging remit to co-ordinate well established and relatively new advocacy providers. It is working towards establishing a framework that accommodates statutory and voluntary providers and encourages efficient and effective services to thrive.

This report initially explores the context in which the advocacy project is working. It discusses the findings from the research, starting with members of the Newham Primary Care Trust Access to Services group and the management committee of the Consortium. The report moves on to examine the findings from the interviews with representatives from advocacy providing agencies, and graduates from the Core Competency Training Course. This section is followed by a conclusion and recommendations.

The research findings discussed in this report are drawn from literature on partnership working, information on the SRB programme, minutes from steering group and management committee meetings, interviews with fifty-six people, and observation of and participation in, support group meetings.

This section outlines the context in which the Advocacy Project is working and aims to place it in the context of advocacy services in general.

London Borough of Newham

The joint review carried out for the London Borough Council argues Newham still ranks as the second most deprived council in the country, and the most deprived in London[1]. The challenges facing the authorities in this area is being addressed with a regeneration strategy aiming at 'emphasising the need to tackle the root causes of poverty, and by working in partnership with other agencies to bring about change'[2].

Newham has a population of about 235,000 with just over half (52 per cent) belonging to minority ethnic groups, which makes it a target area for ensuring that all residents have access to services. Furthermore there is an estimated 16,000 to 19,500 refugees and asylum seekers, with significant numbers from Somalia, Eritrea, Uganda, Sri Lanka (Tamils), and Turkey (Kurds)[3] making effective 'access to services' policy all the more imperative. Newham is diverse in culture, religion and language. According to the Language Literacy Department Service (2001) about 117 different languages are spoken in the borough.

The Newham council is working to build more sustainable communities, with the aim to make people work, live and stay in the borough. Part of this vision is to ensure fair and equal access to services. The provision of effective advocacy services will enable the council to achieve this vision.

Newham health challenge

Much research has been done on improving the health of those from ethnic minority communities. Barriers to mainstream health and social care have been found to include

> '*a complex array of poorly organised and delivered services, inadequate communication services for non-English speaking groups, direct staff insensitivity to users' cultural and religious needs, and institutional barriers that perpetuate discriminatory behaviour and poor practices[4]*'

One of the solutions to the problem in areas as ethnically diverse as Newham has been the development of advocacy services. The East London and City Health Action Zone was established in the first wave of Health Action Zones and has been

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[1] *A Report of the Joint Review of Social Services in the London Borough of Newham,* London Borough Council, 2001.
[2] (ibid).
[3] *Joint Reviews*, London Borough Councils, January 2000.
[4] Silvera & Kapasi, Kings Fund, 2000.

operating since April 1998. One of their workstreams is organised around Advocacy and Access to care. To achieve the aims and expectations a partnership has been formed comprising the East London and the City Heath Authority, Corporation of London, the London Boroughs of Hackney, Newam and Tower Hamlets, the three local Primary Care Group's (PCG), the voluntary sector and the six NHS Trusts in the area. A local steering group was set up (Newham Advocacy steering group, now known as Newham Primary Care Trust Access to Services) in order to meet the local needs of Newham with representatives from advocacy providing agencies in and around Newham such as Newham General Hospital, Primary Care Trust, London Borough of Newham.

Advocacy services in health

According to Scottish Health on the Web (SHOW)[5] advocacy can be divided into the following broad categories:

- *Independent Professional (paid) Advocacy* is a service that usually supports individuals with a particular problem until the issue is resolved.
- *Citizen Advocacy* is an independent partnership between client and advocate who is not accountable to the project that it serves. Its aim is to have a long-term impact upon the community, not just the individuals they support.
- *Group Advocacy* (collective advocacy) usually refers to a group of people facing a common issue who decide to support each other.
- *Self Advocacy* is where people develop the skills to speak for themselves.

Advocates can work on either a voluntary or paid basis and are employed on grounds of personal experience and/or suitable training. Service providers often make use of advocates from both fields. As advocacy practices are becoming more common there is an increasing concern to ensure quality of practice and advocacy training is being stressed for all those involved in practising advocacy.

By 2002 government funded Patient Advice (Advocacy) Liaison Services (PALS) will be in place in all major hospitals and NHS trusts. The PALS will be run by patients' forums and are expected to deal with patient concerns at an early stage before they escalate to serious complaints. However the initiative has been criticised for its lack of independence and confidentiality[6].

Advocacy practices: challenges ahead

In general each organisation or institution has its own interpretation of what advocacy is and sets the standards to which their advocates work. Since no formal standards or set training structure exist for the delivery of the services the exercise of 'good practice' is often believed to lie in the length of time that an organisation has provided a service. Discourses on 'best practice' also exist with regard to individual practice, where length of practice and training received decides the professional status of the individual worker.

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[5] Scottish Health on the Web, provided by the National Health Services in Scotland (http://www.show.scot.nhs.uk).
[6] UK Advocacy Network (UKAN), 2001.

The Community Care Needs Assessment Project (CCNAP) found that opportunities for professional development arise from quality training and that statutory agencies were the main training providers. Non-statutory organisations represent a disadvantaged group in that they have little chance of receiving training and being accepted as professionals. As illustrated below the CCNAP find service user involvement pivotal in giving the user a voice in regards to service provision.

> 'Professionals have training, they command resources, and they represent agencies that have statutory powers and duties. Involving service users aims to tip the balance of power further towards the user'[7]

The CCNAP project shows how service users need the same opportunities to develop their skills and participate on the same terms as professionals. A survey showed the different needs of training that the service users identified:

- Assertiveness and 'speaking up' courses
- Disability equality training
- Equal opportunities training
- Confidence building courses run by service user-trainers
- Guidance on purchasers' and providers' decision-making structures
- Training in committee procedures and negotiating skills
- Information about what has and hasn't worked in other areas
- Legal issues and rights under community care and other legislation[8]

One recognised problem with the delivery of advocacy services is the fact that non-independent advocates can experience conflict of interests:

> 'Conflict of interests can include having a different agenda or need from the service user, or having to balance the service users' needs with other demands, e.g. resources etc'[9].

Mind (Mental Health Charity, England and Wales) explains further:

> 'Health, social or legal workers can assist a user in some matters, but their professional or legal responsibilities might conflict with the user's interest. Similarly, a relative may have personal interests that may conflict with the user's wishes'.

For these reasons, the need for independent advocacy has been stressed as it can help overcome inequalities and 'by promoting active participation by vulnerable people reduces the risk of social exclusion[10]'

The Scottish Health Board has recommended:

> 'Independent advocacy services must be seen as a source of constructive intelligence rather than a source of complaints and hostility[11]'

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[7] CCNAP, 2001.
[8] Ibid.
[9] *Joint report on the review of independent Advocacy services in Tayside*, Tayside Health Board, 2000,p.4.
[10] Ibid. p. 7.
[11] Ibid.

But there are difficulties in joining different practices of advocacy. A formal working environment allows the statutory organisations to develop and follow long term objectives and goals as their funding in general is sustained during longer time periods. The voluntary organisations on the other hand struggle with formal structures; the bureaucracy surrounding funding is an example where voluntary organisations are subject to constraints such as the limited time to conduct research into funding initiatives and sometimes they have limited skills in how to put forward a successful bid. In contrast to the statutory organisations the voluntary sector needs to be responsive to available, often short term, funding and does not have long term financial security. This explains the need for a more flexible and responsive managerial structure so that voluntary organisations that can meet tight deadlines.

It has been suggested that in order to provide effective inter-agency partnership working training and capacity building needs to be provided to all the different partners, not least the professionals and decision makers, and there needs to be a recognition of the structural constraints that are present[12].

Existing advocacy services in Greater London

There are several statutory and voluntary organisations and institutions that provide advocacy around London, but few concentrate on giving services to the advocacy providers. *Advocacy Across London* (AAL) is a new resource agency for London's advocacy sector. *AAL* has been established to support existing advocacy groups and help develop new ones. Apart from a website and a database which shows the advocacy providers in and around London *AAL* also facilitates a Pan London Forum which is a twice-yearly gathering of individuals and groups with an interest in developing and promoting independent advocacy.

Other networks are specialised in certain fields of health rather than providing a broad-based service. The national network *UKAN* (UK Advocacy Network) aims to provide information in order to facilitate wider development of user involvement and user led mental health services.

Advocacy services in Newham

Newham has a long history of advocacy services and the definitions of advocacy set by the different institutions/ organisations vary slightly. The definitions are long and all have different structures, adapted to the aim and set up of the organisation. These are two examples of definitions that represent statutory organisations in Newham:

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[12] Mayo and Taylor, 2001.

East London and the City Health Authority's definition of advocacy

> Advocacy is the activity of an individual to pursue and act in the interest of another where the latter defines his or her own interests and through the process of advocacy gains a certain degree of power to pursue them.

The Local authority's definition of advocacy outlines the role of the 'Community Advocate' as:

> 1) To overcome disadvantage suffered by specific sections of the community in getting access to services and
> 2) Advice because of discrimination and deprivation;
> 3) To provide information about service needs within those communities and feedback service delivery to them;
> 4) To provide a way into advice work for newer communities or those whose needs have only recently been recognised and to ensure that these communities have a policy voice at all relevant levels.

The members of the Consortium have also agreed on a definition of independent professional advocacy:

> Advocacy means representing people's rights and helping people make choices and get services to which they are entitled. People are entitled to receive services which take account of their sex, ethnicity, culture, religion, age, impairment, housing status, mental health and whether they are lesbian or gay.

The SRB advocacy project

The Advocacy Project is funded by the SRB Fit For Work initiative and aims to improve access to health services thereby improving people's health and ability to work.

The project was initiated in 1999 and was at that stage working closely with the Newham Social Services where it was based. Its aim was to be a vehicle to bring all advocacy providers together. The information and needs of providers co-ordinated by the project was to be used for the strategic development of the Advocacy services in the borough. The strategic plan for the borough as a whole was to be developed and implemented by the borough's local steering group. The latter was also to work as an advisory body for the SRB project. The steering group appointed a co-ordinator for the Advocacy Project and the latter was given the task of co-ordinating statutory and voluntary organisations, collating information from providers, and offering a central point of access for advocacy service providers.

Since then the project has become more independent and by October 2000 the Consortium was established as an independent voluntary organisation with Charity

status and aims to provide support for advocacy providers, training for advocates, and join together services.

A management committee of advocacy providers representing the voluntary sector heads the Consortium. The management committee is responsible for agreeing the official definition of advocacy that is to be used by all members. Decisions that are taken by the Consortium go through the management committee.

The members join the committee through voluntary self-nomination and seconding that takes place at the AGM. The committee is independent of the steering group. The director of the Consortium (SRB co-ordinator) is responsible to the management committee. The director has part time staff such as project administration officer (1) and sessional advocates (4) who are responsible to her.

During its lifetime the SRB project has had a number of achievements that may be summarised as follows:

Definition

There are many understandings about how advocacy should be practised and what it represents. Furthermore there is often confusion between the roles and responsibilities of an interpreter and an advocate. The Consortium has together with its members reached a definition of independent professional advocacy.

Standards

The Consortium aims to co-ordinate and enhance advocacy work and act as an umbrella organisation in the borough. The Consortium has set standards towards which all its members work. Set standards involve the following areas:

- Referral processes
- Role of advocate
- Confidentiality policy
- Advocacy service providers
- Complaints procedure
- Advocate code of conduct

Training

Another achievement has been the development and maintenance of the Core Competency Training Course that has been accredited the status of an Open College Network course. To date the project has run eight courses, with a total of 143 graduates.

Partnership

The Consortium is working together with different organisations to establish and support the development of advocacy services. The organisations that sign up as

members of the Consortium are given the opportunity to contribute to the developments of advocacy services in the following areas:

- Strategic development of advocacy
- Development of kite mark for advocacy
- Development and maintenance of standards

Database

A database has been established containing the names and contact numbers of the advocates trained by the Consortium. The Consortium also finances the costs of a sessional advocate if there is a need for the service but no available funds exist to pay the advocates.

Support group

The Consortium facilitates the networking of advocates representing voluntary organisations within the borough. The support group meets once a month and invites guest speakers to address issues and problems that the advocates may be confronted with in their every day work. Each session allows for networking and the advocates share experiences and discuss difficulties that they are facing.

Accredited certificate

The project has received £100,000 from King's Fund Millennium Grant (from a total of £1 million to be spend on developing advocacy services) to develop a certificate in advocacy on University level. The course started in September 2001 at the University of East London. The course has been developed in partnership with the Urban Learning Foundation, Making Training Work and the University of East London. A steering group, the Advocacy Certificate Qualification Consultation Group, has been heading the development of the certificate. This group consists of health professionals from the greater London area such as Health Authorities, East London and the City Health Authority (ELCHA).

THE RESEARCH

Introduction

The fieldwork for the research took place between August and December 2001, two years after the SRB Advocacy Project was set up as a self-regulatory body for the development and maintenance of advocacy standards in East London. The evaluation aims to assess the progress made by the project towards achieving its objectives to:

▪ Co-ordinate, join up and enhance advocacy work in East London in order to increase access to health services.

▪ Provide training and support for the advocacy workers.

Research methods

After an initial discussion with the project co-ordinator a multiple research strategy was adopted using with both qualitative and quantitative data. To understand the issues involved in co-ordinating advocacy provisioning a decision was made to interview individuals on the Newham Primary Care Trust Access to Services group (n=3) and members of the Consortium management committee (n=3). Those interviews and an interview with the project co-ordinator were conducted face-to – face, and took between forty-five minutes to one and a half-hour. One additional interview was carried out over the telephone with a former member of the Newham Advocacy steering group. The purpose of this interview was to understand the initial aim of the steering group and its involvement with the project. The interview also assisted our understanding the dynamics between the steering group and the management committee. This interview took twenty minutes.

To evaluate the support and training for advocates of the 115 students that had graduated from the Core Competency Training Course 30 per cent (35) were interviewed. Fifty seven per cent (20) of those were interviewed over the telephone using a semi-structured questionnaire and forty three per cent (15) by distributing self-completion questionnaires to students graduating in August 2001.

In addition a postal survey was designed to gather views on the project from the advocacy providers. Twenty-six agencies that provide advocacy were contacted by telephone and asked to complete a questionnaire concerning the services of the Advocacy Project, and of gaps in services. Although most of the advocacy managers agreed to fill in the questionnaire, only 50 per cent (13) of the questionnaires were completed and returned.

Observation and attendance at one management committee meeting support group meetings (3), and one steering group meeting complimented the interviews. Past minutes from the management committee and the steering group meetings have also been analysed. Due to the suspension of the steering group meetings no further meetings were observed. Cancellation of a management committee meeting

that was to have taken place in late November also limited the attendance of the researcher. The meetings ranged from one and a half to two and a half-hours.

Interviews

The purpose of the interviews with the members of the Newham Primary Care Trust Access to Services group (referred to in this report as the steering group) and the management committee was to understand the complex issues arising as a result of co-ordinating relatively young service providers and more established services represented by the statutory organisations such as Primary Care Trust and the NHS. Their views on the implementation of the project were also sought.

The information gathered through the telephone interviews and the self-completion questionnaire from graduates sought to obtain an understanding of the impact of the training course on the participants. The former also provided the research with valuable information regarding the effect the course has had upon their every day working environment and on their confidence in executing the tasks given to them.

The postal survey to the managers of advocacy agencies provided information regarding the usage and satisfaction of the services provided by the Advocacy Project, on gaps in identified services and the assistance advocacy providers require to provide a service to their ever increasing numbers of clients.

Scope and limitation of research

The researchers experienced some difficulties in trying to access the service users (eg advocacy providers and advocates). The advocacy providers had little time to fill in questionnaires or even to answer a few questions over the telephone.

In analysing the data it turned out that many of the advocacy providing agencies did use the services provided by the Advocacy Project without the advocacy managers being aware of it as their staff attended Support Group meetings without their knowledge. This suggests that it is likely that the services used are underestimated.

At the initial interview with the project manager the main concern was the future strategy of the project in terms of setting common standards for advocacy practice. During the evaluation the focus of the project changed to a focus on the provision and development of advocacy training. Initially the data was gathered with the aim of providing information about the project's former main objective. However the research was adapted to provide as much information as possible about the project's new direction.

This section is divided into two parts. Part one deals with the findings related to the extent to which the project has managed to co-ordinate and join the existing voluntary and statutory advocacy services in Newham. The second part deals with the findings related to service users and advocates. A conclusion and notes on future considerations follow this section.

Part I

The Steering Group (Newham Primary Care Trust Access to Services Group)

The findings outlined in this section pertain to the implementation of the SRB Project.

Aim of steering group

The steering group was set up with the aim of providing strategic development to advocacy services in Newham. This was to be achieved by co-ordinating the services in the borough and developing training and support with the intention of filling gaps in the existing services, for example making sure training for advocacy providers working in specialist fields such as mental health and learning disabilities is available. The Advocacy/ Improved Access to Services Project was to co-ordinate statutory and voluntary organisations under one roof to provide the steering group easy access to information regarding the existing services in Newham and their needs.

At a latter stage the Consortium was set up at the request of advocacy providers who were not members of the steering group, to inform them about the development of services. The members of the steering group decided that their membership should remain the same but welcomed the Consortium as a sub-group that could provide information for the advocacy providers.

Group development

Initially a person with a long history in the field of advocacy headed the steering group. Her long experience made her well aware of the tensions within advocacy provision and gave her credibility and an opportunity to challenge existing structures.

> *'Advocacy practice is a political minefield and many employees in health services do not recognise them as such. Strategic control is needed at senior level otherwise the advocacy services fall apart and politics take over. There needs to be a strict focus on the needs of those receiving the services otherwise the momentum is lost'.*

At the initial stage of the project the chair had an important role and contributed to the project through her contacts. Difficult questions were managed through a close relationship between key persons of the steering group and the project. The discussions were concentrated on practical issues related to the strategic development of the services.

More recently the discussions of the group have resulted in divisions between the voluntary and statutory organisations. The voluntary sector stopped attending the steering group meetings primarily because they felt they had no influence over the decisions that were made and felt they were not listened to. The new chair decided to call off the meetings in October 2001 until further notice due to poor attendance and a lack of commitment by the group.

Perception of responsibility

The steering group members felt that their responsibility towards the project meant they would be involved in the whole process of decision making, from giving initial advice to approving the final decision. However the group's responsibility as advisory body to the SRB Advocacy Project was weakened when the Consortium established itself in the voluntary sector. The statutory representatives felt they had lost the influence over the direction taken by the project as the project changed its focus from setting common standards to providing and developing advocacy training. The following comments express their concerns:

> *'The steering group has nothing to do with the Consortium what so ever. It has no power to tell the Consortium what to do or not to do'.*

> *'[The steering group] is supposed to be an advisory body, but its current role is nothing more than information sharing'.*

The cancellation of steering group meetings further minimised the influence the steering group had on decisions regarding the development of the Advocacy Project. The interviews demonstrated a concern that decisions had already been made before the issue had been taken up for discussion in the steering group. According to the Project co-ordinator decisions had to be made outside the steering group meetings in order to meet the targets and milestones set by the SRB. The decisions were taken through the management committee of the Consortium.

The increasing difficulty the services found in working together was shown in the presentation of a funding bid to the steering group. The bid was presented to the steering group by the Project co-ordinator, as making bids for future funding was necessary to meet the milestones set by the SRB. However, the steering group decided not to support the bid as they found it too ambitious. The Project co-ordinator found the support of the group essential as the voluntary sector struggle to make successful bids. She found the lack of support directly contributed to the Consortium being unsuccessful in putting forward bids.

Project involvement and accountability

The representatives felt they were key stakeholders in the project and their loss of influence was perceived as detrimental to the whole project. Having little

knowledge of what the Consortium was doing for the voluntary sector the representatives of the steering group felt that the former had failed its initial aim.

> *'The Consortium is not working in partnership [sic], to integrate the services, which I believe was the initial aim of the project. The Consortium is doing its own thing without involving its stakeholders. The problem does not lie in the project itself but in its implementation. It is a question about how you get everybody else onboard'.*

It was the general understanding that the steering group played the role of the experienced body before the project had become independent. As the group felt the Consortium was no longer accountable to an experienced body, represented by individuals in senior positions with extensive experience of advocacy provision and its development in the borough, there was concern over the development of the project. The Consortium's accountability to its funders (SDP) and the Management Committee of the Consortium were not seen as being able to carry that type of responsibility. At the initial stage line management had been with Newham Social Services. However the line manager of the project never actively worked on the project or attended meetings. This had also been lost in the process of gaining independence.

The interviews showed that the uncertainty of how the Consortium developed its working practices led to doubt about the standard of the services it provides and thus a reluctance to use the services.

> *'Each organisation or institution has their own set of standards which they are working towards when employing advocates. I am not sure if the Consortium has looked into the matter to see what standards already exist.*

> *'If we [the statutory organisations] do not know how the Consortium work or do not have confidence in the standards that are being set by them, we will not be able to use their services'.*

Project services

There is a reluctance to use the services provided by the Consortium among the statutory representatives on the steering group. The credibility of the database is being undermined due to lack of confidence in the work of the project. The statutory agencies are unsure about the professionalism of the advocates named on the database. However, as the comment below illustrates, the statutory representatives are aware of the constraints under which the Consortium works.

> *'A database has been set up, but only including those that have gone through the training provided by the Consortium. The initial aim was to have a database for all the advocacy services in Newham. It would be too hard for the Consortium, as it is set up today, to complete that type of database. It can be done if the Consortium is run in a different way, if there is an ownership of it, where standards and a level of training is agreed upon'.*

The findings have demonstrated a lack of understanding of the development of the services provided by the Consortium. This is caused partly by breakdown of means of communication through cancelled meetings. But also through lack of

competitiveness in services as the project's narrow milestones clashed with the statutory services more long-term plans and views, and a lack of understanding of and respect for different working strategies. The support that the steering group was to provide for the project was lost.

The management committee

The findings below are contrasting the views of representatives from the statutory organisations with those from the voluntary sector.

Expectations of membership

Findings from the interviews showed that the members joined the management committee for different reasons. For example one of the members joined to access information for the voluntary organisations for which the representative works, another member hoped that joining would assist her organisation in access funding since her own attempts had failed. As an ethnic minority representative her experience reflects recent investment by the Home Office to improve the fundraising techniques of the BME sector. Richard Stone, an adviser to the Stephen Lawrence inquiry told a conference:

'Institutional racism is apparent in the exercise of discretion by trustees and the bias of grant committees, those most in need of grants are the least likely to receive them[13].

The third member expected that her membership would offer her active participation in making decisions about the future of the project. The interviews also revealed high expectations that the Consortium would assist in the development of the voluntary organisations by taking them through bureaucratic procedures, one example being to assist the completion of funding application forms.

Membership responsibilities

As mentioned above the representatives had high expectations of becoming members of the management committee. However, all representatives spoken to found it difficult to be active and attend the meetings regularly due to their professional commitments and responsibilities. The findings show the voluntary services to be highly stretched and one member argued she had had to visit 35 clients on the same day due to lack of staff.

Two members had not been able to attend the management committee meetings for a long period due to their other professional commitments

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[13] The Guardian, 7th of November 2001.

Role of the committee

The interviewees expressed concern that decisions seem to be taken outside the management committee meetings. As with the steering group the management committee members found that they only had limited opportunity to influence the decisions that were made. For example one member mentioned the production of the Newsletter where the members had only been invited at a latter stage to give feedback on small issues such as design and colouring.

The research reveals a general confusion amongst the members regarding the responsibilities of the management committee. One member thought that the roles of the management committee were vague and that information distributed at the meetings already had an agenda as they arrived. She also thought that decisions regarding the aims, objectives, and future activities of the Consortium were taken without the involvement of the Committee.

> *'I think the reason why we only have a limited possibility to make changes to the decisions that has been made stems from the fact that the Consortium's agenda is going through the management committee. The active body is the Consortium'.*

When asked what the management committee had achieved the members referred to the initial set up of the committee.

> *'The important achievements of the committee has to do with the initial setting up of the committee. We studied the constitution in order to follow the rules and regulations. We also played an important role in researching into what already existed, so as not to reinvent the wheel.*

The interviewees showed an uncertainty about what services the Consortium provide which demonstrated a lack of involvement in the activities that have been taking place. One of the members interviewed was not so sure if the Consortium had any information on her specialist field. She expressed a concern about the fact that the most excluded in the society were still largely forgotten. She gave an example;

> *'Asian women with learning disabilities are often excluded because the services provided for people with those kinds of disabilities are much concentrated around Day Centre care. But the parents of a girl with learning and communication difficulties will not send her to a Day Centre since they are afraid that she will suffer abuse. Only an advocate can help her speak for herself and help her address the needs she has'.*

Relation to statutory institutions

The interviews with the members of the Committee confirmed that they felt intimidated by the statutory institutions and their practices. Yet the need for the voluntary and statutory organisations to work in partnership was recognised.

The observations carried out showed there is reluctance to discuss approaches to problems and handling of clients when representatives from a statutory organisation are present. The findings have also demonstrated that the

intimidation is more strongly felt by women, as men were more likely to voice their concerns during support group meetings. One member saw the potentiality of set standards as building a bridge between the different services.

One of the interviewees was concerned that the agenda of the Consortium had changed; it had started up in a statutory setting and has increasingly moved towards voluntary action. She thought that the Consortium should re-launch itself stressing its neutral position. She thought that this was imperative if all different services were to be incorporated.

The representatives showed expectations that the Consortium would be able to bridge the gap between the services.

The first section outlines the findings from the postal survey targeting the advocacy managers of voluntary and statutory organisations. The aim of the survey was to understand which services of the project were being used and to what extent the service users found them satisfactory. The second part of the section discusses the findings from the interviews with advocates trained by the Project on the Core Competency Training course. The interviews aimed to find out the level of satisfaction with the training and to estimate its impact upon the skills of the graduates.

The views of the advocacy managers

Thirteen organisations responded to the survey, one of which represented a statutory institution.

Advocates

Most of the organisations that responded to the survey had a small number of advocates:

Table 1

Number of Voluntary and Paid Advocates (n=12)
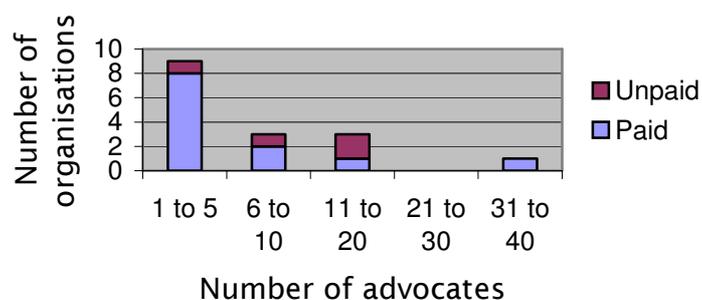
One organisation did not have any advocates or provide any advocacy services at the time of the interview, but gave useful feedback to the researchers and outlined the services they required. These findings are therefore included in the findings of this report.

The table shows that of the sample selected all organisations have paid advocates (12, 92 per cent) and only four employ volunteers. The majority of the organisations work with smaller numbers of advocates and only three employ more than ten advocates.

Services provided

Most of the 12 organisations provide services for health institutions (9). Four provide services for educational institutions and two for organisations that work with crime prevention. Four from the sample provide services to specialist groups such as targeting people with disabilities or otherwise identified groups according to gender, age and resident status (eg. women, children, or refugees).

It can be argued that the specialist services might encounter difficulty if they come across a client with different language needs than those that are provided by the organisation. Should this problem arise the data bank managed by the Consortium could be accessed. The database has details of advocates listed who are available for temporary/ permanent employment.

Languages

Of the 12 organisations that offer advocacy services ten offered bilingual advocacy services, covering 31 languages between them. One organisation has expertise in ten languages, and two only offer services in one minority language. Thus few organisations provide a service in a wide range of languages.

Table 2
Example of languages represented in advocacy service (n=10)

Language	Number of organisations	Language	Number of organisations
Urdu	6	Chinese	2
Punjabi	4	Swahili	3
Hindi	4	Albanian	1
French	4	Lusoga	1
Spanish	2	Kikongo	1

The languages covered by different advocacy organisations should represent the ethnic and cultural diversity of Newham. Research has found that where advocates speak and write a wide range of languages, social exclusion is more effectively addressed (Sills & Desay 1996). The research findings suggest that the advocacy services in Newham are limited to a few languages. There is a role for the consortium to encourage the provision of the advocacy services in a broader range of languages.

Training

Half of the twelve organisations that employed advocates provide in-house training for their staff. Only one provides training exclusively for those that have never had any advocacy training before. Of those providing training four organisations ensure that on going training is provided.

Half of the twelve organisations have used the training provided by the Advocacy Project. All six found the training has been useful. Below are some benefits identified by the organisations.

Table 3
Benefits with training provided by the Advocacy Project (n=6)

	Number
Raising awareness of boundaries of roles of advocates	2
Increase knowledge, experience	2
Sharing of information and providing contacts	2
Better understanding of good practice	1
Helped in personal career development	1

Total does not add to 100 per cent since some mentioned more than one benefit.

The common view amongst those interviewed was that ongoing training is always welcome as the field is developing and it is important to keep up with developing practices.

Other services used provided by the project

Almost all the organisations (11) claimed to have used other services provided by the project, with only two organisations not having used any of its services.

These are the services the 11 organisations recognised having used:

Table 4
Services used by 11 organisations (n=11)

	Number
Inclusion in the Newham Directory of Advocacy Service Providers	9
Showed interest in the University Course Certificate	7
Asked for general information	7
Attended professional talks on advocacy	7
Asked for training material	5
Have been offered support	5
Attended support group meetings	2
Asked for professional advice from co-ordinator	1

It is likely that this is an underestimate as some organisations were unaware that services they were using was provided by the Advocacy Project.

Levels of satisfaction

Six of the 11 organisations were positive about the services provided by the project. Two expressed their dissatisfaction due to the lack of available specialist knowledge and one organisation commented that there was lack of communication (one

organisation). Two said they have only had limited contact with the services of the project and found themselves unable to answer the question.

Services not provided for

Two organisations that provide advocacy services said all their needs are being provided for by the existing services. The majority of organisations identified gaps in the services provided. One representative did not know and one did not answer the question.

The services that they feel should be provided for are identified by the eight organisations as follows:

Table 5
Services required by advocacy organisations (n=8)

	Number
Counselling, review of casework	4
Networking, sharing information	2
Motivation on role of advocacy	1
A central point of access to advocacy sources	1
Free language classes to cope with client needs	1
Certificate in Advocacy	1
Training	1

Some agencies mentioned more than one service not provided for

These findings demonstrate that a number of organisations were unaware of the range of services provided by the project where networking or sharing information and training has been provided. One example is the organisations that provide specialist services. They were not aware that the project could offer them with the specialist knowledge that they needed. These organisations seek their specialist support from more regional and national organisations such as Mind and Age Concern.

These findings also suggest that there is scope for improving publicity about the Advocacy Project, its role, and its services. The recent distribution of the first quarterly newsletter is likely to meet this shortcoming.

Use of other support agencies

Four of the 12 organisations make use of other support agencies, which in all cases provide specialist services. One representative said they are currently looking for support agencies that provide advocacy services.

The four representatives stated they were happy with the services provided by these organisations. In addition the one agency that did not employ advocates but contracted them from outside claimed that it is very hard to find advocates. The person stated that there is a lack of advocates in the borough, and that more resources need to be found to provide training etc. There is the potential of the project to fill this gap by widening access to the database for a wider range of public.

Local/ National umbrella organisation

The majority (7) of the twelve organisations that provide advocacy services for the borough thought services would benefit from a local or national umbrella organisation.

Table 6
Views on an umbrella organisation (n=12)

	Number
In favour of an umbrella organisation	7
Not in favour	2
Not sure	1
No answer	2

Four of the seven in favour of an umbrella organisation argued that such an organisation is needed to:

Table 7
Reasons for need of an umbrella organisation (n=4)

	Number
Set standards on what advocacy means and how it should be provided	3
Centralise information resources	1
Provide training	1
Provide information	1

Numbers do not necessarily add up to number of respondents since some mentioned more than one reason.

These findings show that there is a demand for an umbrella organisation. The majority found such organisations should be voluntary (3) and only one argued it should be statutory. Three representatives argued that it should be run by a partnership between the two. One argued it did not matter whether it was a voluntary or statutory provision provided partnership working and user involvement was a central activity.

The reasons given for having a voluntary led umbrella organisation were as follows:

- To avoid statutory bureaucracy
- To have a campaigning remit
- To provide independent advocacy

Accredited university course in advocacy

Three respondents of the 13 had not previously heard of the university course. Two of those three showed direct interest in the course and said that they would be

interested in further educating their staff by enrolling them on the course; and one was possibly interested in doing so.

In total twelve of the 13 showed varied interest in the course.

Table 8
Interest in University course in Advocacy (n=12)

	Number
Interested in the course	8
Maybe interested	2
Probably interested	1
Perhaps in the future	1

The organisation that does not have any advocates at this moment showed an interest in making use of the course in the future. One of the organisations was not interested in using the course for its staff.

Main problems faced by advocacy service

The managers of the organisations were asked what the biggest challenges were in providing advocacy services in and around Newham. The responses of the 12 organisations that provide advocacy services were as follows:

Table 9
Problems faced by Advocacy services (n=12)

	Number
Too much demand for services, not able to meet the needs	4
Lack of funding	2
Specialist advocacy information (especially in different community languages)	2
High turnover of staff (voluntary and students who represent the bulk of the staff)	1
Salaries are too low	1
Limited provision of advocacy services	1
Lack of knowledge and direction of where agency should be going	1
Unhelpful statutory organisations	1
Duplication of service provision	1
Territorialism and competition between provider agencies	1

Some agencies mentioned more than one challenge they faced and therefore the numbers do not necessarily add up to 12.

The comments made by the advocacy managers show problems that the services are faced with are around overstretched services, lack of funding and the difficulty in finding specialist information.

One manager commented that the fast turnover of staff was directly linked to the low salaries that advocates receive.

Access to information

The representatives of the organisations were asked if they found it easy to access information for advocacy providers. Of the 12 that provide advocacy services eleven answered the question and their comments were as follows:

Table 10
Access to information (n=11)

	Number
Information is easy to access	5
Information is NOT easily accessible	3
Don't know	2
Information is fairly easy to access	1

The majority (six) found information easy or fairly easy to access. However three commented that they had difficulties in finding information and two were not sure.

Further comments

The agencies were encouraged to give us further comments about advocacy and its importance. Three of the 13 organisations chose to do so. Two commented on training and the importance of providing some kind of in-house training for their employees.

> *We are developing in-house training which will be provided for all our advocates*

> *On-going in-house training helps to improve advocacy work. Group discussions give awareness*

The other agency commented on the situation of various agencies providing advocacy.

> *There is room for more partnership working between agencies.*

Views of the trainees and graduates of the Core Competency Training Course

This information was obtained from the 35 advocates who had graduated from the Core Competency Advocacy Training course. The research showed that some of the trainees who had completed the self-completion questionnaire struggled with both understanding and expressing themselves in written English. This difficulty was not apparent during the telephone interviews where the participants had no problems in expressing themselves in English.

Personal characteristics

At the time the survey was conducted, 100 people had received Core Competency training divided by 31 (31 per cent) males and 69 (69 per cent) females. The interviewees were predominantly women reflecting the greater participation of women in the courses.

The majority of the sample was aged 25-49 years.

Table 11
Age of graduate respondents (n=35)

	Number
18-24	4
25-39	18
40-49	11
50-59	1
Over 60	1

The age categories used are as on pre-existing project monitoring forms

Eight trainees reported having disabilities, five of whom were registered as disabled.

The majority of students were from minority ethnic groups as shown in table 12.

Table 12
Ethnicity of students (n=35)

	Number		Number
African	13	Asian Other	3
Asian/African	1	Caribbean/ West Indian	2
Asian/Indian	1	White UK	2
Asian/Pakistani	1	White Other	1
Asian/Bangladeshi	3	Other Ethnicity	3
Asian/Chinese	5		

The categories used are as on pre-existing project monitoring forms.

Information about the course

To date advertising the course has been limited to agencies with an interest in advocacy due to the high demand for the courses and the limited number of available training places. The research findings reflect this policy. Just over half of the trainees heard about the course through their employer.

Table 13
How information about the course was received (n=35)

	Number		Number
Employers	18	Employment agency	1
Friends and family	9	Staff at council housing	1
Through previous training course	1	Through refugee centre	1
Through local newspaper	1	Internet	1
At a day centre	1	Personal contact with the co-ordinator	1

Employment history

Of the 35 trainees fourteen (40 per cent) were in paid employment, twelve (34 per cent) were doing voluntary work, and six (17 per cent) were studying. Five graduates (14 per cent) were unemployed at the time of the interview[14]. Two graduates commented upon how attending the course had improved their employment opportunities. One graduate was offered voluntary work at the organisation where she had done the placement for the course. Another graduate was promoted and offered paid employment at the same organisation where he had done voluntary work. The research shows that many graduates were already working as advocates when they started the course.

Course fees

For 21 majority of graduates (60 per cent) their workplace was responsible for paying the course fees. None of the graduates spoken to had paid for the fees themselves. Three reported the course was free since they were on benefits and five that it was free because they were unemployed at the time of applying. Two were not sure how the course fees were paid and four did not respond to the question. Of the 15 graduates only two said they would have attended if they had not been paid for. Ten (83 per cent) reported that they would not have been able to afford the fees.

The research findings suggest that if the funding subsidies for the fees of the course are cut the number of the students on the course will be substantially reduced. Although many of the students have higher degrees most are in low paid employment.

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[14] The number does not necessarily add up since some graduates were doing more than one activity.

Education and training

The majority of the graduates interviewed had various certificates and are well educated. Eight graduates had postgraduate degrees and two had completed a HNC/D. Only one graduate mentioned a teaching certificate as the only formal education achieved. The rest of the graduates showed a range of qualifications from NVQ's and BTEC's, to completed A-levels.

Of 20 graduates only five reported having had previous training in advocacy. Four of those five stated that the training had been provided by previous managers. Only one had received training from an independent source[15]. One graduate who had had previous training in advocacy welcomed an independent training course. She had been looking for further education in the field for a while without any success.

> *'The norm is that you have to get a job first, before getting the training. The few independent agencies that provide training also provide locals with placements on the course before considering applicants that live outside the borough'.*

The reason graduates gave for attending more than one training course were as follows:
- Widen knowledge and experience
- Update skill that had already been obtained
- Enforce already existing knowledge

Reasons for going on the course

Fifteen interviewees gave a variety of reasons why they were on the course. Seven had enrolled in order to gain the certificate in advocacy skills, five were hoping to find a career in paid advocacy, three enrolled for interest, three to get access to a university place and another two were aiming to use the qualification for voluntary advocacy, one had enrolled simply to get advice on what advocacy meant.

For all the trainees their training was compatible with their future plans as the majority intends to use the skills they had learned on the course. One trainee was not sure what she wanted to do in the future, and one said she wanted to use the qualifications to get a better job than the one she had at the moment.

- Two wished to continue to study advocacy at university.
- Four mentioned using the skills they have learnt by working as an advocate.
- Three mentioned other careers (social worker, employment consultant, and criminologist), where they hoped to be able to use the skills they learnt on the advocacy course.

The fifteen students that graduated in August were asked what else they felt needed to be covered in the course, all fifteen replied that they thought the course covered everything they expected. Most of those interviewed were 'very satisfied

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[15] This independent agency no longer provides advocacy training.

with the way the course empowered advocates' (86 per cent), with the information given about advocates (79 per cent), with the practical advocate advice given (71 per cent) and with the career advice for advocates (69 per cent). Overall eleven (73 per cent) rated the course as excellent for their purposes, two (13 per cent) rated it as very good, and another two (13 per cent) as good.

Course impact on professional development

The graduates were asked how and if the course had helped them in their professional life. The table below shows their answers.

Table 14
Statements on professional development (n=15)

	Number
Getting a deeper understanding of what advocacy entails, and how it should be practised	12
Gained knowledge, skills and experience	7
Showed how to deal with clients and being assertive	6
Gained confidence	5
Gave valuable information regarding where to find assistance and further information	3
Helped me contextualise what I am doing and formalise knowledge that I already had	2
Meeting people	2
Helped me look critically at the ways in which I was performing my duties	1
To give value to what I am doing	1
Getting to know other views and ways of doing things	1

The numbers do not necessarily ad up as respondent in some cases gave more than one benefit.

One graduate commented upon the fact that the course and the personal assistance she had received through the course by the Project Co-ordinator had led to her opening up.

> *'I used to be very introverted and shy. Through the practical exercises of the course I was able to open up and sell myself. I have done things after finishing the course that I would never ever have dreamed about doing before. I have even set up and run courses for women'.*

Only three graduates of the whole sample of thirty five argued that the course had not helped them in their professional life. Two said that they had been looking for advocacy work but had not found any. One graduate was made to do the course by her manager and did not think that it had helped her in her professional life.

The 20 graduates were asked to comment upon statements regarding their experiences at work after having gone through the training.

- I feel more confident in the tasks given to me (n=15, 75 per cent)
- I have a better understanding of what my tasks are (n=15, 75 per cent)

Two students did not agree with the above.

Impact on working environment

The graduates were asked to comment upon the working environment in which they were in at the moment, or had been in since finishing the course. Sixteen out of the twenty answered the questions. They had the option to say if the statement were true or false. Most graduates felt the training had had a positive impact on their working environment and on how they were being treated at work.

Table 15
Positive effect on working environment (n=16)

Statement	True	False
My colleges more frequently ask for my opinion on matters concerning work	12	4
My colleges trust my judgement more	11	5
I feel more integrated in my working environment, more accepted	11	5

Only three of the graduates felt that little had changed with regards to their working environment after they had received the training. Below are the experiences they expressed.

Table 16
Lack of effect on working environment (n=16)

Statement	True	False
I am still treated as a non-professional	3	13
I still feel excluded at work	1	15
I do not feel my colleges appreciate me more just because I have done the training	1	15

One graduate commented upon the fact that the statements were not so clear-cut as some people had a tendency to treat him as a non-professional. Another graduate commented upon the fact that 'non-professionals' are receiving better treatment nowadays. One graduate who has been working as an advocate all through her training commented upon the fact that

> *'it is not enough to have professional skills. You need to be professional, that is having a certificate and the skills that are required for the job. The Project co-ordinator has given the advocates the chance to require the skills necessary'.*

The following section summarises the main findings and makes recommendations for future developments.

CONCLUSION AND FUTURE CONSIDERATIONS

This evaluation has assessed the progress the Advocacy/ Increased Access to Services project has made towards achieving its objectives. In order to do so the research has drawn upon the experience of service users and the views of the major stakeholders. This section summarises the main findings and provides future considerations for the project.

Partnership

The project's aim to co-ordinate existing advocacy providers in the borough has been successful to the extent that the Consortium has been able to attract and provide support for voluntary organisations. The voluntary organisations have to some extent welcomed and embraced the partnership that has been introduced by the project and the members of the Consortium have set standards to which all its members strive to achieve. However the voluntary organisations' participation in the partnership is heavily restricted by their heavy workloads of professional duties and responsibilities towards meeting the needs of their clients.

The representatives of the statutory organisations have to a lesser extent accepted the way in which the Consortium has developed and are critical about the implementation of the project. The members of the steering group felt they were the key stakeholders in the project to advice future developments as well as directions. Lack of communication, partly triggered by incompatibility between and understanding of different working practices caused further separation between different advocacy providers, which also led to a split in existing networks. The findings show that the steering group was not successful in bringing together the statutory and voluntary sector.

Support for advocacy providers and advocates

The project has been successful in providing voluntary organisations with support through professional talks, networking and information sharing. The project has filled a gap in which overstretched services have little or no time to search for information or further develop their services.

The research has demonstrated that there is further scope to assist the services by marketing its projects such as the support group to a wider audience. The meetings of the support group which are facilitated by the Consortium provide an opportunity for networking, information sharing, and an opportunity to solve difficulties and problems by sharing experiences. Expansion of this group can be used to fill the gaps in service recognised by the advocates and advocacy providers such as motivating and informing advocates about their role, providing a platform for discussions on casework practice and bridging the gap between different service providers.

The research has revealed that voluntary organisations have put much faith in the Consortium as many find that it is the only agency that listens to them, and assists them in addressing their concerns.

Training

The training provided by the Consortium has been well received by the advocates and advocacy providers in the borough. Most of the advocacy training is available only to people already working as advocates or people who live in a particular borough. The training provided by the Consortium has broken those boundaries, as the training is now available to everyone. The training gives the advocates more skills and knowledge about what advocacy involves and has the potential to integrate the advocates into their working environment as well as giving them more self-confidence.

The database on which the trainees are added after their graduation has the potential of providing the borough with more sessional advocates and making sure the availability of a more broader spectrum of knowledge and skills among the borough's advocates. However, for that to happen institutions and organisations need to be informed about the level to which the graduates have been trained in order to build up the confidence in the service.

The Consortium

As the relationship with the steering group has broken down the development of the project has fallen on the Consortium. Considering the small number of employees of the Consortium (one full time, and three part time, and four sessional advocates) the workload is immense. The research has found that the co-ordinator for the project took on much of the responsibility for the maintenance and development of the project as it became more independent. The co-ordinator felt a new focus of development had to be sought as the relationship with the steering group was breaking down and the project had to meet its milestones.

Due to the large workloads of the small number of staff the Consortium has recently been hard to contact. Communication is important as the advocacy providers need access to the services available and this will need to be improved if the project was to continue.

Below are recommendations for the future development of the project. The following issues may be considered:

Partnership

▪ Joint training for the statutory and voluntary representatives on the steering group and the management committee as well as for staff of the Consortium. This could enhance an understanding of different working practices and address the distrust between the different agencies. Issues concerning problems related to partnership work would also need to be raised and discussed. A professional in partnership work and with the knowledge of the tensions in advocacy practice could run or facilitate these lectures.

- If the steering group is to work as an advisory body for the voluntary sector it needs to be able to provide support outside the scheduled meetings. Given that the funding available for the voluntary sector is often short and led by tight milestones the supporting agency needs to be able to provide assistance when required and not to be restricted by its own bureaucratic procedures.

- The management committee, steering group, and the co-ordinator of the project need to be given clearer roles and responsibilities to clarify similarities and differences between the different posts/ tasks. This is particularly urgent as the project has changed its focus.

Support for advocates and advocacy managers

- There is scope for expanding the project by targeting wider interest groups both in regards to the training and the services provided by the Consortium.

- Training could be provided for advocacy managers to give them the skills and confidence to express themselves in meetings and when addressing formal networks.

- More talks or short courses on funding and how to find potential funders could be provided.

This report recommends further development of partnership work between the voluntary and statutory advocacy services to co-ordinate advocacy services. However, partnership work needs to be informed by cross-institutional and organisational understanding. In some contexts the statutory sector organisations will be more effective. Whilst in other circumstances voluntary sector practices are more appropriate. Ideally, the sectors should compliment each other with a view to providing a holistic service that meets the need of users.

This includes the possibility that service users wish to have the same advocate to meet their needs in a range of different circumstances, for example, at a housing office, in a hospital or the dentist.

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