Participatory Planning for Social Inclusion

- Step-by step guide -

The Participatory Planning for Social Inlusion (PPSI) methodology aims to improve social services aimed at poverty reduction and social inclusion through a participatory process that brings all relevant local stakeholders together, including social service users, CSOs, local authorities, government agencies, social service providers and the general public citizens. The result of the process is 1) a locally initiated and approved strategy and an action plan for the provision of social service and social inclusion 2) mutual trust is built among all relevant stakeholders, which is equally important as the strategy and plan itself.

CASE STUDY – GEORGIA

In 2016 PIN supported the establishment of municipal advisory committees for social inclusion in 4 municipalities in Georgia with significant numbers of vulnerable people (IDPs, ethnic minorities, elderly people, etc.). These consisted of senior municipal officials, local social service agencies, civil society organizations and representatives of vulnerable groups in each target municipality. These committees were established **as efficient platforms for the planning of social service policy and its delivery**. They were also provided with technical support and capacity building. Based on the findings of the participatory assessments of existing needs and services commissioned in the target municipalities, the committees jointly developed **municipal strategies on social inclusion** and **annual action plans**. In order to support the implementation of the action plans, PIN together with local authorities, launched a grant scheme with co-funding from the local authorities. As a result, new inclusive social services were established and funded by the municipality, such as the mobile home care service for elderly people living alone in isolated rural areas.

PPSI brings new quality to a territory in a number of ways and is a great source of capacity building. The strategy for social inclusion aims at providing better social services and improving the daily life of vulnerable groups and other stakeholders. Community members are actively involved in this process. They have a great chance to learn from the process, to get new skills and competencies for the future.

What is this guide about?

This guide builds-up on PIN's *info brochure* on Participatory Planning for Social Inclusion (PPSI) and provides a practical view of process of PPSI.

Next pages can help you:

→ To improve your thinking and acting in a participatory mode

→ In getting a comprehensive view of the process of PPSI (procedural and content-wise)

→ To develop a better understanding of the key milestones of the process and the roles of a wide variety of the actors

→ With practical examples and case studies from other countries that can be used as useful tips and tricks for your country

Simply put, the idea of this guide is more to provide relevant information to the reader about PPSI rather than to deliver a detailed and rigid methodology of PPSI that is meant to be copied in any situation without adjustments. There are at least two relevant reasons for such approach:

→ The situation in every country or region is different. No universal solution can be used. Every process of PPSI is unique and follows local/regional specifications. What works in one country, could be useless in another country.

→ PPSI is inherently a pro-active and open process. Organizers and most of the stakeholders involved should be open-minded people with the idea of improving the quality of the life for vulnerable groups, not just administrators implementing a methodology without considering of all of the potential impacts.

Please note:
PPSI is as much about the process as the outputs – please, do not focus only on outputs (e.g. local plan is approved and implemented, new services are provided to vulnerable groups etc.). New forms of collaboration and mutual trust is built among all stakeholders thanks to the participatory process. They all find themselves as a "co-owners" of the results. Collaborative spirit among all stakeholders is a very important outcome for the PPSI.

Who is this guide for?

This guide is intended for PIN program staff, its partners and anyone interested in participatory processes. Practitioners initiating or running participatory planning for social inclusion will find a lot of needed information and practical tips. This guide would be valuable for insiders (individuals who are directly involved in PPSI) and well as those, who just want to acquire more knowledge on participatory processes. Especially, persons linked to PIN programs should use this guide for designing and implementing PPSI.

What does the PPSI process consist of?

Even if every PPSI process is unique, we can identify several common aspects (content-wise and procedural) that should be valid for every process. The crucial point is to transform such general aspects into a particular unique process of PPSI. It cannot be ensured externally and the results depend always on the quality and the effort of all local/regional organizers and coordinators (external support – e.g. from PIN – that can just assist or provide mentoring/coaching).

As a process we can understand PPSI in following phases:

1. Preparatory phase – before we start

2. Engagement and analyses

3. Drafting the plan

4. Approval and Implementation

5. Monitoring and evaluation
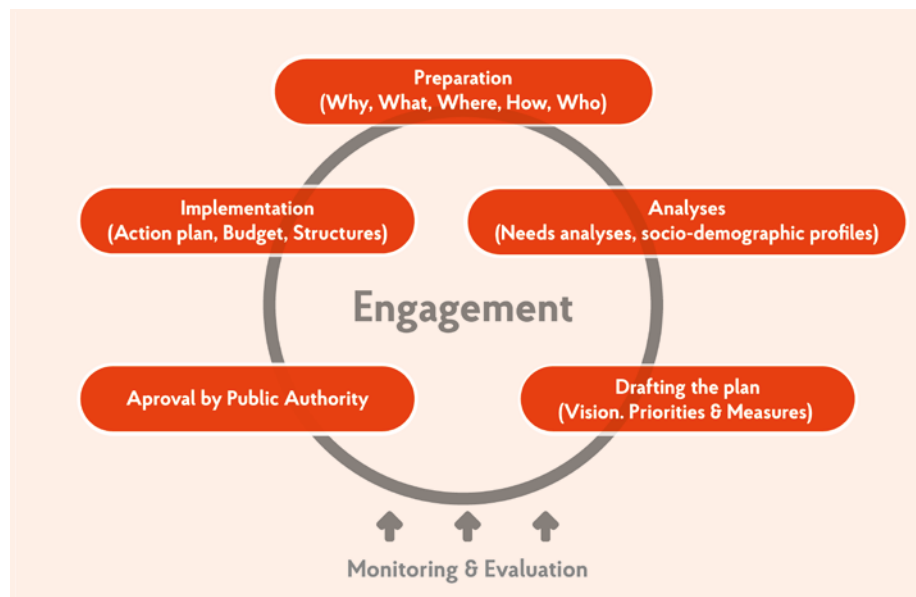
In the next several pages we will follow these phases and elaborate on them in greater detail.

There are some core principles upon which the PPSI process is based, however these can also vary somewhat depending on the country context. In Annex 1 *(p. 22)* we present the principles that were agreed on and formally approved in the Czech Republic. You can use them for inspiration and adjust them according to your specific context.

1. PREPARATORY PHASE – BEFORE WE START

There are many questions to be asked before we start with PPSI. A preparatory phase is useful for finding answers to most of them before the entire process is officially launched.

The elementary questions of any planning process should be:

WHY – we should be very well aware of all of the reasons to initiate a process of PPSI. Furthermore, particular actors will have various reasons to support or to oppose a process of PPSI.

WHAT – which issues are to be solved, what target group should we focus on, All such questions are crucial in the initial phase

WHERE – what territory we will plan for, etc.?

WHO – PPSI is based on cooperation among members of the community, institutions, organizations, experts, ordinary residents, etc. Various stakeholders need to be involved and adequate organizational structures have to be developed to steer the process of PPSI

HOW – designing a PPSI process is not easy. We should have a coherent plan for every step that will be used to implement it in the upcoming months.

Such questions sound somewhat trivial, but they are essential and easily understandable for everybody. So if you are ready, let's move on to finding the answers :-) They are worked out in more detail in the following section.

WHY – to start with Participatory Planning for Social Inclusion

Three types of motivations can be identified:

A. TOP → DOWN

→ Legal requirements defined by national authorities force local/regional public bodies to initiate the process of PPSI.

→ Local/regional public authorities wants to be more proactive and start participatory planning together with the community

→ The situation of vulnerable groups (or other target groups) is considered critical by authorities and a solution needs to be found and implemented

B. BOTTOM → UP

→ Local/regional community members initiate PPSI as a way of starting a more open and transparent communication with other stakeholders, especially with public bodies.

→ Local/regional community members initiate PPSI as a way of solving a particular social problem of the locality/region

C. EXTERNAL

→ External subjects (e.g. PIN or a particular donor calling for interventions that promote social inclusion, the inclusion of vulnerable groups, and/or participatory planning) promote PPSI as a way of supporting social inclusion. Official authorities and community members find it useful and welcome form of external help as well.

Community planning of the social services in the Czech Republic

Community planning of the social services (CPSS) is equivalent to PPSI implemented in the Czech Republic as of 1 January 2007 when Act no. 108/2006 Coll., On Social Services, came into force, which declares the duty of regional governments to develop a community plan with the cooperation of municipalities within the region. CPSS implemented on regional level are rather formal, but municipalities play a more active role and initiate CPSS on its own territory. In the Czech Republic, the municipal level seems to be more appropriate for the active involvement of the community, since the links between the providers of social services, users and public authority is more direct than on the regional level. So, a formal legal requirement (at the regional level) was in practice shifted to municipalities, which find this process to be useful for improving the quality of life at a local level.

Questions to Consider:

What are the advantages and disadvantages of each of the motivations to initiate PPSI?

What motivations are the most relevant in your situation?
Can you identify other reasons for your country?

WHAT – goals, issues and target groups

The scope of PPSI is rather broad. Sometimes it might be narrowed only for a specific vulnerable group. Generally, PPSI encompasses almost the entire community (all vulnerable groups) and a wide variety of the services. The scope of the planning depends mainly on available capacities and other specifics.

The following target groups are usually considered in PPSI:

→ Elderly people

→ People with physical disabilities / families with special needs

→ Children and youth (particularly those with special needs or who are at risk)

→ Minorities & ethnic groups, migrants/immigrants

→ People in crisis, homeless persons, etc.

→ Mentally disabled people / persons with mental illnesses

→ People struggling with addiction

Our goal here is to improve quality of the life of defined vulnerable groups. PPSI is mainly focused on planning and improving social services. Social services provide a wide range of support and assistance to increase the quality of life, social welfare and social inclusion to various groups (mainly vulnerable and disadvantage individuals or other people in need). These services may be provided by government agencies, private actors or non-profit non-government organizations.

Social services are just a part of all of the public services provided to a local community (including vulnerable and disadvantaged groups). We should also consider a number of other related (public) services and policies that affect the quality of daily life. For instance, quality of education, public transportation, spatial planning, security issues, and housing policy all can significantly affect the life of target group as well. Even if social services are the main focus, many of the needed interventions are typically performed by stakeholders that are not considered to be social service providers. Therefore, the planning process should not be limited only to social services. Other public services should be considered and planned together.

Social services vs. related public services
The following examples show the complexity of social and related public services. Even more, a slight change/improvement in related public services can indicate savings in social services:

· People with physical disabilities or elderly people usually face the problems with lack of barrier-free accesses. To solve this issue you can either provide assistance (as a person accompanying somebody in a wheelchair) to get over barriers, or you can invest into barrier-free measures enabling people to move around by themselves. Both ways solve the issue. Assistance can be provided by a service provider and it can be provided quickly. Otherwise barrier-free measures are outside of the work of social services providers, as they need more investment and time.

· Clients of the retirement home in one Czech city requested for a bus stop to be added close to the facility. When they want to visit city center, they were not able use public transport since the bus stop was located too far away for them. The organization running the home for elderly provided transportation by its own drivers. Once the municipality shifted the bus stop closer to the facility people could freely and independently travel and the special transport service was no longer needed.

WHERE – territorial scope and compatibility with other planning processes

PPSI needs to be compatible with existing planning processes in order to ensure the feasibility of the solutions. Territorial scope should also respect other local, regional and national processes and be easily understandable for all stakeholders.

How to identify other planning processes?
Dozens of planning processes are/were implemented on the intended territory. Most of them are "traditional" such as strategic planning or urban/spatial planning. Others are recent or new and innovative, such as community planning, local agenda planning activities, cultural planning, etc. Try to identify most of such processes on a given ter-

ritory. You can ask public officials as well as community leaders. An overview of such processes can provide you with contacts for the local people already experienced in planning processes and/or can help you to adjust the territorial scope of the project. Most of the social service providers operate on a certain territory, administrative units are also usually clearly defined, etc.

Municipal or regional level?
The division/decentralization of public administration differs country by country. Based on experiences from several countries the feasible territorial unit for PPSI should cover a population of approx. 10-100 thousand inhabitants. In certain cases, it means the municipal level (e.g. city and its neighboring area). Sometimes it means doing it at the regional level.

Regardless on the scope of PPSI, several principles should be applied across the process. We can develop our own principles or use the example of principles from the Czech community planning of social services *(see Annex 1, p. 24)*. Every step in PPSI should be prepared according to such principles and every stakeholder should agree to follow them before entering into the process.

WHO – variety of stakeholders

Many various stakeholders need to be involved in PPSI. We should consider social service providers and their clients, civil society and community organizations, representatives and staff of authorities, their respective councils, and committees. Stakeholder mapping will help you to identify all relevant stakeholders – for details see appendix.

The tripartite principle is applied in PPSI – at least three groups of stakeholders need to be involved:

→ **Contractors** – mainly public officials

→ **Providers of social services** – regardless of their legal status or the scope of work

→ **Beneficiaries** – users/clients, their families, broader public

Special attention should be paid to public authorities, as well as other decision-makers or opinion leaders. Their support for a PPSI can be useful, their resistance to it can sometimes be devastating.

What type of support do we need from specific stakeholders:

Public officials/contractors (politicians and civil servants) – declaration or other legal commitment to start with a PPSI process (including available resources)

Providers (regardless of the legal status or scope of work) – commitment to invest time and energy into the PPSI process

Beneficiaries (users/clients, their families, broader public) – to present public demand for the process and for better social services and also a commitment to invest time and energy into the process

Practical tips to motivate decision-makers and others to support PPSI:

Show the benefits – use examples from recent PPSI processes and show all of the positive impacts

Involve opinion leaders or other relevant persons – Try to get support from locally recognized personalities. If such well-known people (e.g. an actor originally from the region, a journalist well-known from national media, or someone with traditional authority) will support PPSI, resistance from public officials will be weaker.

Seminar or study visits – take relevant stakeholders (opinion leaders, public officials.) abroad or to a different municipality and show them the success of PPSI in practice. Let them talk to their colleagues (foreign or domestic) to get a better understanding of PPSI

Methods to be used for getting broader support and commitment:

· Information campaigns
· Happenings and events
· Personal contacts (interviews, meetings...)
· Trainings/seminars

HOW – plan the PPSI process, working structures and resources

Every PPSI process needs to have adequate organizational structures. At the beginning (before the process is officially started), we can form an initiative/preparatory team.

Initiative team – a less formal group of enthusiastic people engaged to carry out all preparatory work. The size and team composition vary. It could be a small group (e.g. 3-5 people) of active community leaders or a broader group (e.g. 10-15 people) informed by the tripartite principle. It is just a temporary team. The main role of initiative team is to develop a plan for the process of PPSI (also by finding answers to questions Why, What, Who, How, Where). Since the official structures and resources are not settled yet, external support is more necessary. Members of initiative team should be[1]:

→ Respected

→ Motivated

→ Proactive

→ Open-minded

Relevant working and organizational structures

The PPSI planning process must be adequately steered. Respective organizational structures need to be formed and officially recognized (official recognition doesn't need to come immediately. It could be recognized after the first positive actions take place). Always make tailor-made structures (based on the local needs and specifics) and try to use existing structures (use everything you can from what already works – do not form new parallel structures).

In small municipalities we can form just very simple and subtle structures (e.g. one group can combine more roles) as is shown on picture 1. Robust structures should be defined processes in bigger cities or on regional level (as detailed and robust structure is illustrated by picture 2).

1 Such characteristics should be applied to almost every stakeholder. If we engage such persons at the beginning, they may stay with the PPSI until the end.

Picture 1.

Picture 2.
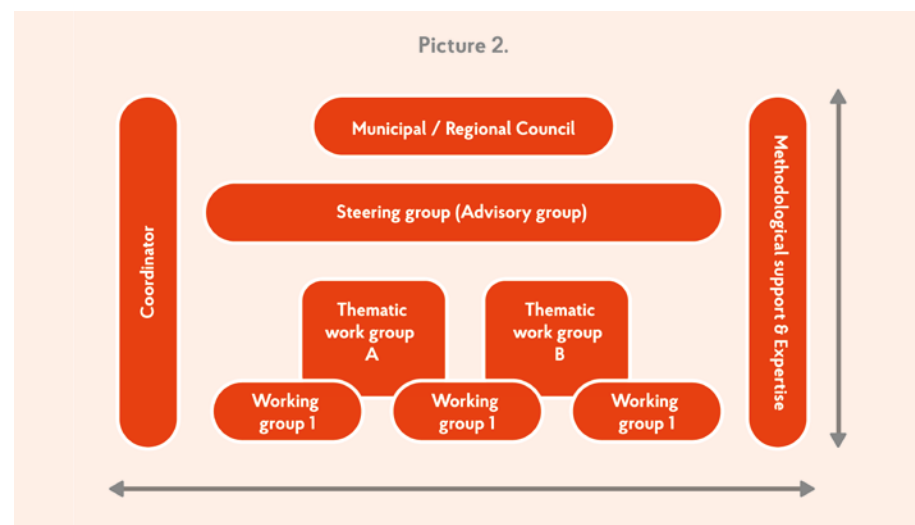
Regardless of the size and structure of the organizational and working units, they should reflect the following aspects:

→ Political leadership and institutional support – despite the fact of community origin of PPSI, real engagement of the public officials is essential. Public bodies guarantee the quality of social services and provide crucial financial resources for the running of such services. PPSI has to be linked to standard public decision-making process at least in two key moments (at the beginning – public authority will agree with the plan to carry out the PPSI process; and at the beginning – public authority will agree with the plan to carry out the PPSI process; and at the

end – results of PPSI are officially accepted by public authority and will be implemented).

→ Management and coordination of the process – the process of PPSI is demanding. Personal capacities need to be invested in the steering and coordination of the process. A detailed description of such structures is described below.

Content guarantee and professional background – depend on the territorial and content scope under which the working structures are formed. Thematic working groups focus on particular target groups (e.g. elderly, homeless people, people with disabilities, etc.). If appropriate, working groups on cross-cutting issues may be set up. A more detailed description of every organizational and working unit is provided below. Organizational and working structures are describe mainly from the perspectives of PPSI process in bigger city/region. For more subtle processes reductions are indicated.

Local coordinator of PPSI – is the executive manager of the process. He/she is usually a locally respected and capable person belonging to one of the key stakeholders - public authority/provider/beneficiary

Things to Consider:

Below is the list of potential advantages and disadvantages if the local coordinator is from a local/regional authority or a provider or a beneficiary.
See which of these can be most relevant to your situation.

Representative of public authority as a Local coordinator

Advantages:

→ Direct link to official decision-maker

→ Can intervene if the PPSI process is not compatible with other official procedures/administrative mechanisms

→ His/her involvement can be a part of an official job – can invest time and effort

Disadvantages:

→ Can manage process in a way that is less open and more bureaucratic

→ Less open-mined in finding solutions – thinking can be limited by the existing legislative and organizational framework (less experience to work with community)

Representative of a service provider (or a community leader) as a Local coordinator

Advantages:

→ Easy access to providers and other representatives of the community (directly works with them)

→ Open minded and experienced in project/process management

→ Respected within the community

Disadvantages:

→ Can be biased (to prefer target groups with whom he/she mainly works)

→ Limited time and resources (local coordinator will be an additional job for him/her)

Representative of a social service beneficiary as a Local coordinator:

Advantages:

→ Easy access to other beneficiaries and other members of the community

→ Eager to change the situation in which he/she is experienced

Disadvantages:

→ Less experienced

→ Limited time and resources (local coordinator will be an additional job for him/her)

Steering group (advisory/coordination group[2]) as an executive body that makes most of the important decisions. The steering group can consist of 10-15 persons representing a diverse group of stakeholders. It works with the following specifications:

→ Formally established and its members are appointed

→ With its own Rules of procedure

→ Provides decisions related to the process

→ Can only interfere in the content of the planning process in defined situations (content should be elaborated mainly by WG).

→ Provides outputs to official structures (local/regional authority etc.)

Working groups – Can be formed along a particular or cross cutting issue (e.g. WG for communication and involving public, WG for analysis and data processing…) or along a theme/target group. WG can be relatively stable (exist during entire process) or just temporary (They can meet just once to elaborate on a specific issue[3]). WGs develop a given part of the plan (document). The management structure provides assistance to WGs (organizing meetings, provide facilitator etc.). The structure of WGs depends on the local needs and available capacities. Try to form a realistic structure of WGs. Too ambitious a structure of WGs can fail due to a lack of personal resources and other capacities.

Usually, there are no capacities to form separate WGs for every target group. You can have only one larger WG to cover needs of all relevant target groups. Another option is to focus on more target groups by one WG for instance:

→ WG1 – Elderly people

→ WG2 – People with physical or mental disabilities / persons with mental illnesses

→ WG3 – Children and youth & Families with special needs

→ WG4 – Minorities & ethnic groups, migrants & people in crisis, homeless persons etc. & people struggling with addiction

2 You can name such body in many ways. In any case, the purpose is always the same.
3 In certain situations a workshop or well-structured meeting can provide similar outputs as temporary WG.

Methodological support & expertise for the process can be outsourced. It is best used in the form of coaching or mentoring (the core of the process should stay within the community).

Capacity building of people and organizations actively involved in PPSI is expected. For instance, a series of workshops can be prepared to provide the required capacities to participants. The following workshops were organized as part of a number of participatory planning processes in the Czech Republic:

→ Participatory planning processes in general – to provide a general understanding of what, how, with whom and how to implement participatory approaches

→ Facilitation – to acquire elementary facilitation skills

→ Data collection and analysis – to get a general overview of appropriate methods for data collection (desk research, surveys, interviews, observation etc.) and analysis (even if analysis should be left to experts, a basic understanding and rules for analyzing data can be shared)

→ Drafting the plan – to explain the key elements of designing a strategy, how to formulate it: vision, mission, outcomes, activities, etc.

Beside such practical workshops, capacity building on other general issues may be of significance. For instance, an introduction on modern, user-centered approaches to social services is a key topic for PPSI. This includes the basics of how to transform traditional (institutionalized) social services into community-based social services, what type of responsibility for providing social services can be shifted to the community, how to support empowerment of service users, etc.

PIN can help the local community in PPSI in many ways (the range of PIN's support always depends on the project or program):

→ Can assist in negotiation with local Public Authorities (esp. during the initial phase)

→ Provide methodological support and share relevant experiences

→ Help in networking and reaching domestic or foreign experts on PPSI

→ Can provide coaching and supervision

→ Can provide trainings, study visits and other forms of capacity building

→ Can be a donor to financially support local events or happenings

External experts and independent facilitators can help the process in many ways, on the other hand their role should not be overestimated.

Always consider if you want to use a local expert or an external one

Advantages of a local expert

→ Knows the local situation very well and in greater detail

→ commitment to help his/her community

→ well-known in the community (his/her expertise is available)

Disadvantages of a local expert

→ Can be biased

→ Already has established relationships in the community, with the risk that he/she will fall back on those relationships.

→ for some people they could be unacceptable (e.g. bad personal relations from the past)

→ limited ability to consider the local situation from broader perspective (connected too much by the local context)

Advantages of the external expert

→ Independent and unbiased

→ Can bring a new perspective from outside

Disadvantages of external expert

→ Is hired to complete a job (not to help the community)

→ Lacks deep knowledge of the local context

Needed Resources

When planning PPSI consider all of the needed resources. PPSI is demanding

Personnel

→ Commitment to invest time, energy, knowledge, etc.

→ Learning by doing

→ Community representatives vs. external experts

→ Capacity building (including training in many fields – public campaigning, participation, facilitation, etc.)

Financial

→ Depends on size and other local specifics

→ Reduce costs by utilizing local resources and a "do-it-yourself" community approach

→ Look for co-financing/external financial support

Information

→ Information you collect (you need a lot of information from all stakeholders, as well as the opinions and wishes of the target group, statistical data)

→ Information you provide (you produce a lot of info you need to deliver to every participant of PPSI

→ Traditional "offline" informing vs. online informing

→ The cost of the data (to collect or provide any info is demanding. Try to reduce costs).

There are many ways to reduce the costs involved in collecting/providing info.

A few tips:

→ You can use community events and festivals to provide info directly about PPSI (distribute leaflets, have a speech, etc.). You can also distribute questionnaires or interview people during these events to get their feedback and opinions.

→ For collecting data by survey you can use local volunteers or students to distribute questionnaires door-to-door and help people to answer the questions.

→ Most of your target groups regularly visit doctors. Doctors are generally well-respected people in the community – use them as a distribution channel for all of the info you need to deliver to the community.

→ Many Czech municipalities provide info through the use of so called "municipality journal/newspaper". It is usually distributed for free to every household. If it so, you can use to provide a lot of info about PPSI for free.

→ Social media are excellent for quick and direct informing and/or collecting info. Use it, if possible. Unfortunately, a lot of vulnerable groups (e.g. seniors, marginalized groups, people with mental disabilities, etc.) have limited access to modern ICT or do not have the necessary skills to work online.

Material

→ Try to use existing resources (rented offices, ICT equipment...)

→ Premises for meetings, etc.

→ Combination of online and offline" meeting to reduce traveling costs

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Visits as a way to reduce costs

Providers of social services participating in one PPSI process in the Czech Republic agreed to organize meetings of their WGs in their own premises. Every meeting was held by one provider in its office. Members of workgroup had chance to see the premises of many providers during the time. It also saved financial resources since the premises were provided for free.

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2. ENGAGEMENT AND ANALYSES

Participatory and evidence-based approaches are broadly used in PPSI. It is not easy to combine both of them in one process. Simply put: good planning requires people and data. If you rely too much on one of them, the feasibility of the results tends to be weak[4]. Engagement with stakeholders and the work with data are two of the crucial aspects of the question HOW from the previous chapters.

Stakeholder mapping

The term "stakeholder" is broadly used in many planning and participatory processes. However, the word "stakeholder" is understood differently in many languages. For PPSI, the term stakeholder means "Any individual, group or organisation that can affect or is affected by the process, project, programme etc.". Dozens of stakeholders can affect or be affected by PPSI. Before we start with engagement, proper stakeholder analysis/mapping will help us to identify and prioritise all of the stakeholders affiliated to a given issue/process *(see Annex 2, p. 24).*

Engagement

Participation is one of the main buzzwords today. At every stage of PPSI we should ask "How much should particular stakeholders be involved and what methods we will use for that?". Engagement is a continuous process that affects every phase.
The planning process in PPSI is neither a community activity implemented independently of public authority nor an official administrative process fully controlled by a public body. The planning process is a shared activity implemented jointly by all stakeholders.

The so-called Participation ladder[5] (*see Annex 3, p. 25*) can be used to better understand the various levels of public involvement. The participation ladder shows many ways of redistributing power between public officials and other stakeholders from non-participatory forms (a traditional planning process is fully controlled by public authorities) to a self-governing (the process is fully transferred to the community including making the final decision). In many situations the partnership level seems to be the appropriate level of engagement. Stakeholders have a real influence on the process as equal partners with others.

4 In extreme cases you can have either a perfect plan based on latest data but without any community ownership/support, or on the other hand a long list of unfulfilled wishes of the community.
5 There are a lot of different definitions of participation ladder. We work with just one of them.

Should different stakeholders be involved in different ways?

Yes. There is no need to involve all stakeholders equally all the time. When you prepare the stakeholder mapping, you will prioritize among all stakeholders. The most important stakeholders (such as the beneficiaries, the providers of social services or public authorities) should be involved fully and in every phase of the process. Other stakeholders (e.g. general public) need to be involved as well, but the level of their involvement can be less intensive and can vary according to the stage of the PPSI process.
For instance, if you plan to create a new facility for vulnerable children and teenagers (e.g. a youth club). Organizations running such a service, as well as representatives of youth, need to directly be involved and design it. Residents (including those without kids) living nearby should be informed about such an idea and you should consult with them about their possible worries (e.g. a senior might be worried about more noise...) to avoid a negative reaction once the facility is open.

The general public in a PPSI refers to inhabitants, residents, or citizens. Once the stakeholder mapping is done, most of the "general public" is defined as stakeholders (e.g. users of existing social services, potential users, their families, relatives, and other close persons; elderly, youth, etc.). In any case, identifying the public as a stakeholder is important in PPSI, since we always have to be sure everybody is informed about the PPSI and aware of the ways to be involved actively. Informational campaigns and other ways of raising public awareness should be aimed at defined stakeholders as well as the general public. See more details on methods and tools of public engagement in Annex 4 *(p. 26)*.

The term "beneficiaries" consists of a broad group of stakeholders/representatives of the target groups. Their involvement must be very intensive, but sometimes this can be rather difficult. We can talk about beneficiaries being:

→ Easy to involve

→ Difficult to involve

→ Almost uninvolved/unreachable

In Annex 5 *(p. 27)*, we provide a brief description of involvement of several beneficiaries representing various target groups.

Analyses

PPSI is also based on the proper description of reality using a wide variety of data. A lot of this data already exists or is easily accessible. Occasionally, planners tend to collect a lot of data without really using it.

Always consider what type of data do we really need, as well as where and how we will get it.
Even if expertise is needed for data gathering and its processing and implementation, the role of local stakeholders (beneficiaries, providers, contractors) is essential. You can also use universities (or students directly) to help you with analyses.

We usually work with two types of data:

→ **Qualitative** – providing detailed information about a few cases. Used for understanding more complex and unexplored phenomenon. Enables deep understanding of the issue. Very good for understanding small (e.g. closed, marginalized) groups. Cannot be generalized. Example of the method: Case study – a detailed description of particular situation.

→ **Quantitative** – provides limited info about many cases. Usually based on "hard" data (figures, statistics, etc. Can be generalized. Example (statistical data, data from surveys...)

Often a lot of needed data is already available from existing resources. Final reports, projects, surveys, databases and other statistical data, or existing pieces of research can be analyzed through desk research. A desk researcher doesn't have to be locally based[6] (a lot of work can be done online or at a distance). Desk research will provide a lot of necessary and unbiased data. On the other hand, there are limitations of using such data since data are not fully transferable to our situation or were collected for a different set of reasons, etc.

Field research must be prepared to provide the missing data and get an overall picture of the situation. There are a lot of methods for field research providing qualitative or quantitative data (interviews, questionnaire, observation).

The community must participate in carrying out the research. Deep knowledge of the local context is necessary for preparing surveys, contacting respondents, distributing the questionnaires, etc. Such a participatory approach in research is also aimed at building up the capacity of the involved stakeholders, reducing the costs and a higher level of acceptance of the results.

Causality versus Correlation

Correlation means that there is a certain association between variables. It simply shows a mutual connection between variables. For example, there is correlation between poverty and crime rates.

Causality means that one variable has an effect another variable. There is significant relationship between cause and effect. For example, hot weather causes higher ice cream sales.

Correlation may imply causality, but not necessarily. Scientists always need a lot of evidence to prove causality. Especially in social research is rather difficult to prove causality since there are a lot of variables (most of them undocumented) that can influence the causality.

What data do we need?

All of these pieces of data are used to prepare a series of analyses needed in PPSI. The picture below divides potential analyses focusing on selected target groups into those with preferred direct involvement and indirect involvement:
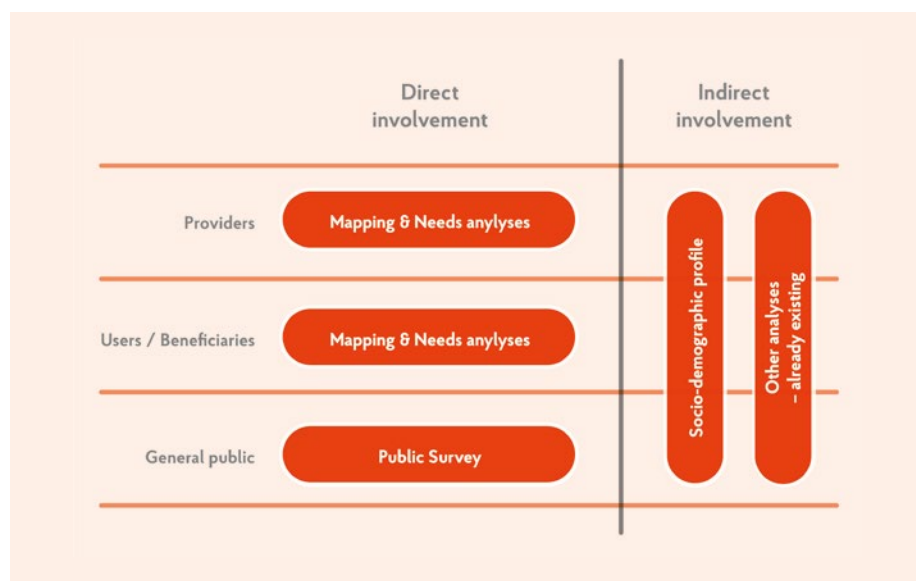
6 You can also use local expert to participate on desk research or students.

Mapping & Needs analysis of providers

Mapping of existing social services should contain:

→ Basic info – Official name/nickname, address, contact details, organizational structure, staff and overview of all provided services

→ Detail info on all social services – Each service described in detail. This means the name, type, target groups/beneficiaries, capacity (waiting list if any), financial contribution by user, operating hours, personnel capacities, financing by public/private resources, equipment, alternatives and connected services

→ Needs and plans for these services for the future – Obstacles for the future, potentials, plans

It is based on a questionnaire distributed to every provider within the territory covered by the PPSI. A steering/advisory group (with external expertise and assistance) will prepare such questionnaire and the list of providers to be involved[7].

The collected data will be used for drafting the analysis (including a financial and personnel analysis) and for an overview/catalogue of providers (see below part Drafting the plan).

Catalogue of available social services

During the process of mapping and analysis of service providers, a lot of updated is collected information about wide range of social services providers. It is recommended to use it and prepare a catalogue of social services of the given area describing services that are provided, contact details of each provider and other relevant info. The catalogue can be the first practical and tangible output of planning process. It can be accessible printed or online as appropriate. The community members will appreciate it, as it can be helpful for them. Especially if the catalogue is structured according to types of challenging social situation from the perspective of the users (e.g. help with family member with disability, assistance with care for elderly person, homelessness, etc).

7 The preparations for such mapping must be done in coordination with the Working groups and other stakeholders (e.g. consultation during public meetings…)

Mapping & Needs analysis of users

Can be based on[8] questionnaires, meetings with users, interviews, case studies etc. The analysis is done by/for[9] the working groups and should be focused on:

→ Socio-demographic characteristics

→ Services they are using

→ Problems they face

→ Wishes and plans

Do not ask only about social services, but also about the quality of life in the area (experiences, needs, interests, ideas, wishes, plans, etc.)
Look for appropriate communication channels – via providers, medical facilities, to every post box, use volunteers, etc.

Public survey/public meetings

A survey can be conducted to get a sense of the general public's awareness of social services. It is also a useful tool to disseminate information about the importance of social services and PPSI as such. The survey should also focus more on the problems in their daily life to show the link between social services and the quality of the life.

There is no need to organize a survey in a small community. A public meeting will work as well.

Socio-demographic profile

Such an analysis provides a general overview of the territory (demography, infra-structure, other societal issues, etc.) including trend predictions. A lot of statistical data can be available and a socio-demographic profile can also use time-series and/or comparisons with other cities/regions.

Using a public survey as a means of communication with the broader public

Most of us have already heard about some survey results. TV and radio broadcasting is usually full of opinion polls concerning public affairs (e.g. voting preferences, trust

8 The method of data collecting depends on the differences of the target groups.
9 Working groups may not have capacity to do analyses by themselves. Analyses can be prepared by external researcher and „just" commented on by workgroup.

in public bodies, etc.). However, the vast majority of people have never participated in such survey.

PPSI changes the situation. People change their role from being a passive user of results to being the authors of the survey (e.g. members of the steering group) and the respondents (if the public survey is distributed door to door, everybody has an equal chance to share his/her opinions and/or ideas. It is a real kind of progress and such an approach can attract more passive people.

A great change embodied by PPSI is from planning *for* the people to planning *by* the people.

3. **DRAFTING THE PLAN**

The strategy of social inclusion is a tangible result of PPSI. A strategic document in PPSI is usually designed for approximately a 5 year period. The drafting of the strategy can be divided into three steps as indicated in the following picture:
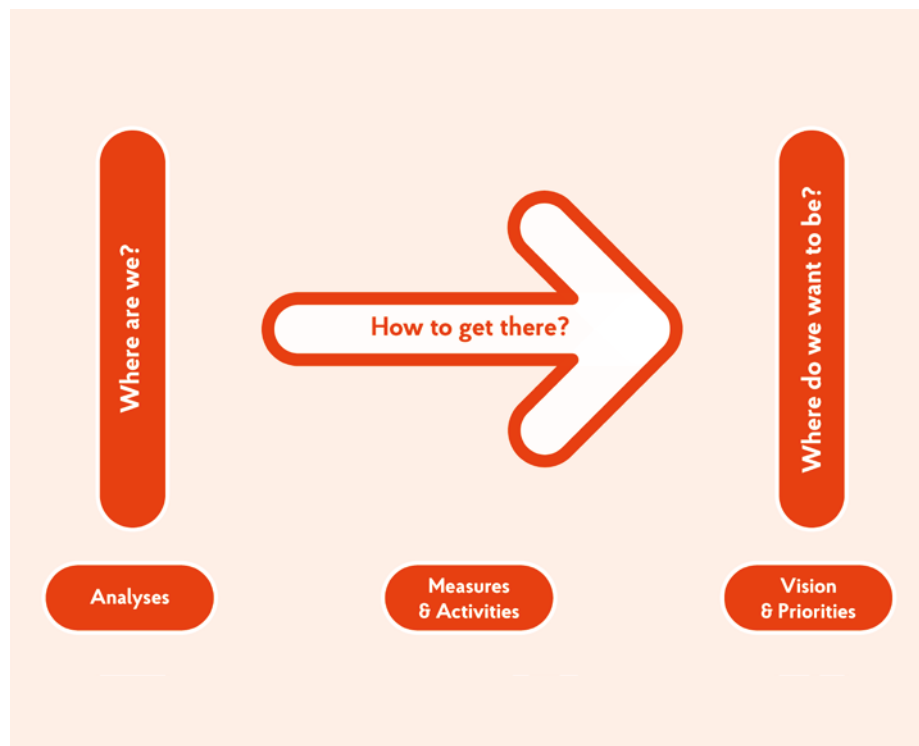
Where we are

Analyses will help us understand our situation from many perspectives. Strategic thinking starts with understanding today before we start to think about tomorrow. Particular analyses were described in the previous chapter. A SWOT analysis can be produced as a synthesis of the previous analytical step and as a starting point for thinking about the future as well.

SWOT analysis

Many resources exist about SWOT analysis. Good results were noticed when the SWOT analysis is prepared by the working groups themselves. Experts on strategic planning assist them (explain the method, only getting involved if necessary). Each working group will prepare a separate SWOT analysis covering only the selected target groups. Then a joint meeting for all WGs is prepared to present a particular SWOT analysis, eliminate duplications and finalize it. Prioritizing (e.g. by stickering) is preferred.

Where do we want to be

Designing the future is a very exciting activity. It is also demanding (people need to be trained in strategic thinking to open their mind and to be more creative). The future can be described through the elaboration of a vision and priorities/goals. The vision should be:

→ Forward-looking

→ Motivating and inspirational

→ Reflective of the local culture and core values

→ Linked to the relevant legislative framework

→ Aimed at bringing benefits and improvements to the community in the future

→ Define a reason for existence of social services and where it is heading

The vision can be a statement that describes the desired future (approximately 5 years) of the community. It focuses on the future and what the community/local system of social services wants to become. It gives direction.

It can be also a slogan or a very short text (1-2 sentences) showing the direction and help people to identify with such progress.

How to get there

The vision focuses on long/midterm perspectives. An **Action plan** is usually used to define measures and activities to be taken in the upcoming years (usually 2-3 years). It is a more detailed implementation plan focusing on Specific interventions (measures and activities) expressed in a measurable way and with more detailed terms on how to achieve these priorities. Every activity/measure needs to be described at least by:

→ Description of the Measure – provide a detailed explanation of the measure

→ Timetable/schedule – to be aware of the deadlines for every milestone. It should be really feasible

→ Target group – specify all beneficiaries of the measure/activity

→ Output of the Measure – all tangible results of the intervention. It is also important for the monitoring and evaluation of the process

→ Implementers/partners – every measure/activity needs to have a specific implementor/

→ Holder as a responsible person for its implementation. All cooperating subjects will be specified as well.

→ Resources – Mainly financial resources need to be well specified (e.g. to be planned in public budgets in the upcoming years). Other resources (e.g. personnel, equipment, etc.) will need to be described as well.

Outputs vs. Outcomes vs. Impact

An output is the direct/real product of our activity. An output is achieved immediately after implementing an activity/measure. Outputs are important to report about your Action plans. An output can be easily measured (e.g. a number of trained people, new services provided, increasing the number of clients...)

Outcomes are related to a longer time-period to show the changes that occur because of your measures/activities. It can be also understood as differences made as a result of implementing the measures. Some of the outcomes are difficult to measure, or are almost unmeasurable. Outcomes are more linked to priorities (e.g. improving the situation of the target group).

Impact can be understood as a long-term result of the planning process. It could be also characterized as lasting or significant changes in the community. The impact can be also identified after the end of an implementing period of PPSI.

In general, it is easy to report about outputs and more difficult about outcomes/impact. The problem of causality vs. correlation makes the situation even more complicated.

For instance, you plan to improve the situation of a marginalized group. You can organize trainings to provide specialized and in demand working skills for your target group.

Output = the number of trainings/trained persons.

Outcomes – unemployment rate of the target group decreased – trained people find a job easier.

Impact – Survey done in couple of years show a higher satisfaction rate than the previous one. New jobs help people to live a better live for a substantial part of our target group[10].

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10 This is just an example of the logic of interventions. As you can see, the idea behind defining outcomes and the impact description could be questionable. Did the positive changes happen directly due to your training? Or were there other influences involved (e.g. economic growth created a demand for more human resources at same time, new state support to employers made them to focus on marginalized group, etc.)?

A Community/Strategic plan (as a document) is the result of your efforts. The structure of the document depends on local specifics and traditions. As an inspiration, the following structure of the strategy is provided:

Introductory part

→ Foreword, mission, reasons for the planning, etc.

→ Broader context (e.g. support from donor, external help, etc.)

→ Process of PSSI and timetable

→ Management and organizational structure

→ Process of updating the plan

Analytical part

→ Could be just a short summary and links to all analytical documents

Strategic part

→ Vision – objectives/priorities (including a short description)

Implementation part

→ Detailed description of activities/Measures

→ Schedule of the implementation (milestones for each Action plan)

→ Structure for implementation (including the financial arrangements)

→ Monitoring and evaluation of the implementation

→ Action plan for coming period can be added (e.g. as a separate document)

Evaluation and monitoring

→ "Success" of the implementation needs to be monitored and evaluated

→ Indicators for each goal and measure help to show you the progress and the level of implementation

As was discussed previously, social services are not the only thing that improve quality of the life. Many other services (outside of the social system) can make significant positive changes. If your planning process focused on both aspects[11], the strategy should be drawn as:

→ Joint/comprehensive document. All aspects needed for a better life of the target group are included in one strategy. The distinction between social services and other (related) public services is clear (using graphic and section division in the text).

→ Two separate plans – where the distinction is evident.

Such a strategy can be prepared as either a short document (e.g. 10 pages), or as a long and comprehensive book (dozens of pages including many annexes). The final length always depends on local specifications. Actually, the drafting the document is rather expert work. Don't be afraid to use an expert for writing the document. The expert will be able to help you with the format, wording and structure, otherwise the content is still determined by the locals and owned by the community.

Consider

Don't plan only new services – do not forget about the sustainability of existing services.

Focus also on cross-cutting issues – try to formulate cross-cutting priorities to avoid overlaps.

Try to implement modern, user-centered approaches in social services. Think about how to support transformation from traditional social services providers to community-based social providers.

11 If you do not plan to focus on other public services for target groups, try to establish an effective mechanism to deliver the message about the need for such services to relevant decision-makers. Once you have collected the ideas and needs for a given target group, it would be a tremendous shame if nobody even considers them.

4. APPROVAL AND IMPLEMENTATION

Working groups and other actors work intensively, and the result of their effort is a draft of the strategy (and/or Action plan). Even if many stakeholders were involved in drafting the document, having a thorough consultation with the entire Community is essential before we go for final approval. The final approval of the strategy is given by the relevant public authority. Once a Strategy/Action Plan is approved the process is not over. Implementation starts as long running activity. The Strategy or Action plan is just a planning document. Its implementation in practice will bring real changes to the life of the community.

A certain level of formal public consultation is a part of many planning processes. Effective public consultation means to get as close as possible to most of the stakeholder and to use every opportunity to get feedback before approval. We need to be aware that an open-planning processes can be abused by well-organized interest groups. The combination of several methods for consultation can avoid domination by only a few interest groups. Below we offer several tips for better and more effective consultation procedures:

→ Organize a big public meeting to present and consult draft of the Strategy or encourage local authorities to organize the meeting Present and discuss general aspects of the Strategy together and then divide participants according to their interest to consult preferred priorities in more details. During the meeting you can ask participants to use stickers to show their satisfaction with particular parts of the Strategy.

→ Working teams are present during public consultations. People need to know the people who prepared the strategy/plan. Personal contact can help to resolve possible misunderstandings – members of WGs will explain the document and can react to comments immediately.

→ Involve decision-makers. If Public officials are present and see the public support to the drafted Strategy, they will be more likely to support during the approval process. This gives the whole process more authority and a greater amount of local ownership.

→ Combine the public meeting with a happening event. Most of your planning activities are almost over. It is time to celebrate the output (even if it still has not been approved), thank all engaged people and try to get a commitment for the implementation phase.

→ Collect individual comments and organize consultations with interest groups. You can develop a simple commenting form for individuals, it can help them in formulating of their comments (e.g. besides text/ written comments, use emoticons to evaluate Strategy/ particular priorities/measures, etc.). Try to ask organized stakeholders (associations, providers, etc.) to provide more formal feedback.

→ Use offline and online methods for gathering feedback.

→ Try to be as personal as possible in reaching out (during the previous steps you collected a lot of contacts, use all of them to ask for final consultations).

→ If you are aware of missing any target group in the final consultation, approach them directly and ask for feedback.

→ All comments must be settled, and the result published. If you disagree with the comment, always provide arguments that explain why. There is no need accept every comment, but an explanation about why some comments are not included is important.

→ Organize consultations during other public events organized in the community. Use every chance to approach the general public. Or try to organize your "own" accompanying events to attract the public (e.g. open doors at the premises of a social service provider to show what social work looks like in practice).

The approval of the document is the role of the public authority. Public authority is an independent body with its own sovereignty; therefore we cannot affect their decision directly. Administrative procedures and the decision-making process has to be known to PPSI organizers from the beginning and PPSI is designed to be compatible with it. If the decision-makers were involved in previous phases, they will most probably support the output in the decision-making process. You can prepare a short summary of the implemented planning process and the results as well (you can use short reports, leaflets, posters or organize an exhibition in a public space to present the planning process).

Decision-makers are usually busy people and most of them are not familiar with the issue of social inclusion. Prepare for them short, easy-reading materials[12] to explain to them your effort. Photos, charts, figures are better than a lot of text.

12 When we talk about materials (not only) for politicians, we should Keep It Short and Simple. This is also known as a KISS instruction :)

Implementation of the Strategy is mainly under the responsibility of the public authority. At the same time, it can be understood as a joint activity of the public authority, community organizations and other relevant stakeholders.

The public authority (PA) is frequently short of personnel/expert resources. Community organizers can offer to be more actively involved in implementing the results. When the strategy is approved by the public authority, the responsibility for implementing it can be shared among the PA, community organizations and others. The official implementation process can then be steered by an official advisory body based on representatives from the PA, the community and others. Such a body can meet regularly (e.g. four times a year) to supervise the progress of implementation.

The implementation of the Strategy as such is mainly about preparing particular action plans as a real mechanism for implementing the results.

The implementation of the action plan is mainly about identifying every implementer/partner that is responsible for each measure/activity.

Most of the financial resources for implementing are expected to come from public budgets. PIN as an external organization can offer co-financing to the planned measures/activities for instance through co-financing a grant scheme for services jointly with the public authority.

Regardless of the results of PPSI we should be ready to implement a few tangible outputs to show the planning process is not just about paperwork. Even small changes can boost the commitment of the public (people can see, their engagement is worth something and brings practical outputs).

5. **MONITORING AND EVALUATION**

Monitoring and evaluation (M & E) are often used as synonyms. In fact, they are not. Even if they are an integral part of any project or process as continuous activity is oriented to every phase.

Monitoring is an ongoing assessment to determine whether all activities are proceeding as planned. Monitoring is based on data collection about all implemented activities to provide feedback if the process proceeding as it was planned. Monitoring focuses more on outputs from the beginning of the process.

Evaluation, on the contrary, is a more scientific activity. It is also done on a regular basis, but it can be done after a certain point of time of the project/process. It is linked more to the outcomes or impacts. Evaluation looks rather at the bigger picture than on the details of a particular activity.

Monitoring and evaluation has to be applied throughout the planning process and the implementation period (as a part of the implementation structures and procedures).

There are at least three main reasons to use Monitoring and Evaluation:

→ **Evidence and control** are both a rather formal way of M & E and can also be understood as an audit. Hard, quantitative data are usually monitored (the implementation of individual events, number of participants, number of copies, etc.). It is usually designed to verify that the used funds were used correctly and in accordance with the project. The results of M & E are published in the final report.

→ Providing **recommendations** and other information relevant for future decisions that aim at systematic increases in the quality of the outcomes and/or management. It looks at the achievement of the project/process along with both positive/negative, intended/unintended effects. Data and methods of a qualitative nature are combined with a quantitative approach.

→ **Gathering and sharing the knowledge** and skills is a part of the capacity building of PPSI. All engaged persons/organization get new skills and knowledge. "Lessons to learn" are unique sources of inspiration for our future work. Best practice can be also shared outside the community (on the national or international level).

M & E can be implemented by:

→ External evaluators – as an independent, unbiased experts

→ Internal evaluators – as a part of the self-evaluation,

→ As a participatory evaluation – Participatory evaluation and monitoring simply means that those who were the subjects (directly involved) of the process are also involved in the evaluation itself. Participatory assessment is then a learning process for all. Participatory M & E can take many forms: Stakeholders are not only the subject of M & E (e.g. respondents), but also interviewers or they suggest new areas to be evaluated; Stakeholders are also asked to interpret data on M & E.

Consider

What are the advantages/disadvantages of external/internal/participatory M & E?

FINAL WORDS

This guide was not designed as a comprehensive handbook to PPSI. Our team addressed several key questions related to PPSI, even if we do not provide complete answers to all of them. Finding the answers is a very creative process and an open mind is needed as well as in participatory planning. We remember that some of the civil servants in the Czech Republic were frustrated when they were forced to design their own participatory planning process of social services instead of implementing a given mandatory methodology. Representatives of communities were less reluctant to this new approach. This type of situation was typical around 2005-2007. Attitudes have changed since this time. The participatory planning of social services is nowadays an integrated part of planning social affairs in the Czech Republic.

We believe you will find this process useful for your country context as well. If you need more information or support to design such a process and to help you to find your best answers please contact our good governance advisors.

ANNEX 1
General principles of community planning of social services in the Czech Republic

ANNEX 2
Stakeholder mapping

ANNEX 3
Participation ladder – practical way of understanding different levels of participation

ANNEX 4
Methods and tools of public engagement

ANNEX 5
Target groups – How to involve beneficiaries?

ANNEX 1

General principles of community planning of social services in the Czech Republic:

Tripartite principle – at least three groups of stakeholders need to be involved:
· **Contracting authority** – mainly public officials
· **Providers** – regardless of legal status or scope of work
· **Beneficiaries** – users/clients, their families, broader public

Equality principle – everybody has a right to be involved and to provide his/her points of view. Nobody should be excluded.

Real needs principle – the general analysis and standards need to be compared with the real local needs of all stakeholders.

Consensus principle – everybody should agree with the final decision. Voting is replaced by reaching consensus.

"Everything is public" principle – all information is available to everybody

Feasibility principle – the planning process respects the local capacities. The scope is adjusted to local needs and possibilities.

Cyclical principle – the plan is not a rigid document. It needs to be monitored and updated as needed.

Competency principle – specific skills and competencies are needed for the process (e.g. management skills, facilitation, consensus building, etc.). Experts can be used when necessary and local actors should try to acquire new competencies as well.

Proportionality principle – both the process and the outputs are important in PPSI.

ANNEX 2

Stakeholder mapping

If you are thinking about stakeholders, select them on the basis of their importance and impact rather than the size or activism of the stakeholder. Small or less active, unorganized groups of citizens (e.g. minorities, marginalized groups and others) are often less able to actively participate. But often they are directly and substantially affected by the decisions being made. Such stakeholders should be encouraged to participate and their voices need to be heard. Stakeholder mapping will help you to understand better how to deal with stakeholders. Stakeholder mapping can be implemented in 2 easy steps by any initial team functioning as the Steering group (usually a group of 10-15 members):

→ Firstly, you have to identify stakeholders. Try to make a list of all potential stakeholders. This can be quite a long list. Everybody you find somehow connected to the issue of the decision-making should be on the list. It is better to define more stakeholders (even if you find them to be irrelevant for your process later) than to overlook someone. An easier way of identifying stakeholders is to make various categories and then define the stakeholders within each of the categories. You can also define categories of stakeholders in sub-groups (be sure to present the results of subgroups to the entire group to reduce possible duplications). When producing a list of stakeholders write each stakeholder on separate card.

→ Secondly, try to prioritize them. You can use concentric circles (as you can see in the picture below). Place the cards on the circle, the one that is the furthest from the center of the circles (i.e. the outermost circle). Every member of the group can shift every card on step to the center. Simply, if you consider the stakeholder important, you can move his/her card one step closer to the center (but each member can shift each card only once). All members of the group work at the same time (they are shifting the cards simultaneously). When the process is finished, the stakeholders closer to the center are the ones considered the most important.

Based on such stakeholder mapping you can decide how intensively you will engage with each stakeholder (the more important stakeholders should be engaged with more)

ANNEX 3

Participation ladder – practical way of understanding different levels of participation

The Participation ladder is a general concept broadly used in participation theory. The original ladder was introduced by the sociologist Sherry Arnstein in the 1960s. It has been developed in many different versions since that time.

The Participation ladder shows various level of transferring power and influence on a given issue or process from a Public Authority to other stakeholders or to a community. The idea of the ladder means that a higher step on the ladder shows a greater amount of influence by the community on the planning process:

Self-governing

Partnership

Consultation

Feedback

Informing

Self-governing – The Public authority delegates decision-making responsibility to stakeholders. Can be understood as the highest level of participation, but for PPSI this is often irrelevant. For PPSI it is less important who is making the final decision, It is more important if all relevant stakeholders were effectively involved in the decision-making/planning process.

Partnership – Real cooperation can be assured only if all stakeholders (including the Public authority) act as equal partners. Nobody dominates and reaching a consensus is preferred. Everybody has real influence on the final decision. Partnership is a demanding model – all participants have to be ready invest time and energy to work on a partnership basis.

Consultation – This is a two-way communication channel. The Public authority discusses an issue with other stakeholders. The Public authority is in direct contact with

the stakeholders that can help improve mutual understanding and eliminate some misunderstandings.

Feedback – The Planning process is still fully on the shoulders of the Public authority, but community members and other stakeholders can provide feedback or submit any other comments. The Public authority usually has no real obligation to consider such feedback seriously.

Informing – Typical for many traditional administrative processes. A Public authority fully controls the planning process. The general public or other stakeholders are not involved at all. The Public authority just informs everyone about the results.

The level of participation can vary during a PPSI. Not every stakeholder must be involved equally at every stage. Always consider what level of participation you use in each phase of PPSI. The following schemes in the chart below combine the participation levels and process of PPSI. There is no standard model defining participation at every phase. As is indicated by colored lines a particular PPSI process can reach different levels in every stage (as it always depends on the local conditions).
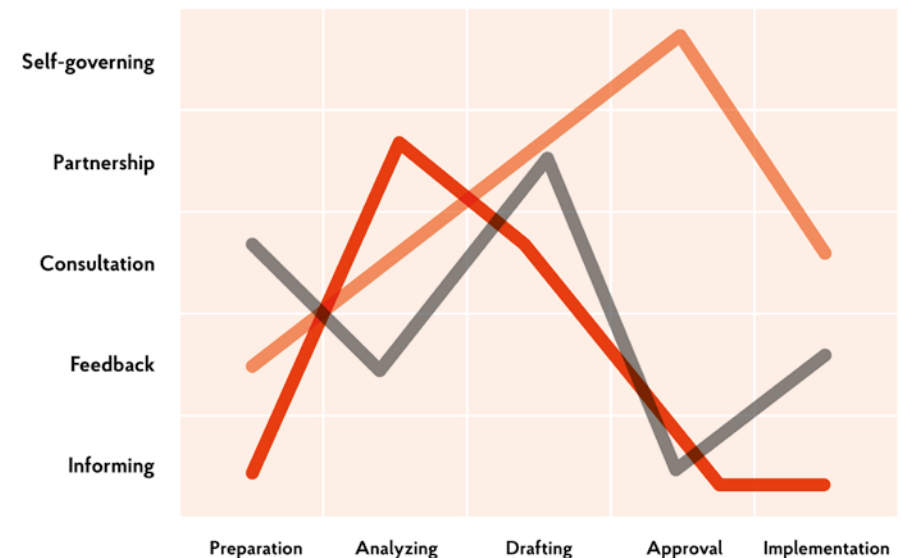
ANNEX 4

Methods and tools of public engagement

For informing:

→ Informational telephone line, Citizens' Information Centre

→ Press release, Press conferences

→ Leaflets, posters (distributed to households, at public spaces, or even through temporary info kiosks set up by the project)

→ Brochures

→ Exhibition and presentations

→ Mail merge (incl. e-mail alert)

→ Interviews/articles in the media

→ Happenings

For feedback:

→ Surveys

→ Interviews/group interviews/focus group(s)

→ Phone interviews

→ Panel

→ Interactive displays

→ Open mailbox

For public consultation:

→ Round Table Conference

→ Public meeting

→ Discussion forum

→ Public Debates

→ Local committee of citizens

→ Happening/festival

→ City walks

For partnership:

→ Workshops

→ Planning weekend

→ Citizens' working groups

→ Town Hall committees

For self-governing:

→ Referendum

→ Election

→ Citizens' jury

→ Neighborhood committee

ANNEX 5

Target groups – How to involve beneficiaries?

Beneficiaries are a heterogeneous group. We provide a brief description of selected beneficiaries from the perspective of their involvement. Once you want to attract beneficiaries to be an active member of PPSI, you should focus on the issues that are interesting for them.

Target group	How to involve	Issues they are most often interested in
Elderly	· Usually easy access to PPSI – a lot of active people and users of socialservices · Direct involvement is preferred · Do not forget to focus on isolated elderly with no links to community	· Housing · Medical care · Free time · Public transportation
People with physical disabilities	· Usually easy access – a lot of active people and users of social services · Existence of associations and other NGO · Do not forget any type of disability	· Medical care · Housing · Free time · Problems in daily life · Public transportation
Families with children with special needs	· A lot of active people (especially young families with kids) · Do not forget to focus on vulnerable families · Very active on-line	· Free time · Problems in daily life · Education

Target group	How to involve	Issues they are most often interested in
Children & youth	· Very active and beneficial to the process, if motivated · Informal channels are better than official ones · A lot of organizations are already working with youth · Provide them with more freedom and independence	· Free time · Education · Drugs
Minorities & ethnic groups	· Can be very heterogeneous · Difficult to involved directly · They usually send "a representative" or activists · An informal approach is better · Very individual access is needed · Youth from minorities can be used as an mediator and interpreter between the planners and the representatives of minorities	· Unemployment · Education · Housing · Culture
People with mental disabilities	· Usually difficult to access directly, better to use somebody as an intermediary, but trying to enable such people to speak on their own behalf · Mostly in contact with providers · Work with them in their home or well-known environments · Very individual access is needed	· Unemployment · Housing · Education · Free time · Health care · Social support services

Target group	How to involve	Issues they are most often interested in
People in crisis, homeless people, etc.	· Almost impossible to involve them directly · Better to use an intermediary (e.g. Street-workers, social advisors, etc.) · Only an informal and individual approach is possible (meet them in their home environment)	· Unemployment · Housing
People with addiction	· Again are difficult to involve them directly · Use a member of the therapeutic community, former drug addicts, etc. · Better to use an intermediary (e.g. Street-workers, social advisors, etc.) · Only an informal and individual approach is possible	· Unemployment · Free time · Health care · Field services
Women (in equal position to men)	· Approach them in their "safe" space · Use women to contact other women working on these issues · First level of involvement should be done through a neutral issue (e.g. children's issues)	· Kids and youth issues · Health care · Unemployment · Education