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'Outreach' or 'real-life context work'?
Four profiles of working in the real-life
context of people.

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Today:

1. Background
2. Central research question
3. Methodology
4. Results
5. Discussion

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AGAINST SOCIAL EXCLUSION AND SOCIAL INEQUALITY AMONG PEOPLE IN SOCIALLY VULNERABLE SITUATIONS

2 FRAMEWORKS

QUALITY OF LIFE
HUMAN RIGHTS

6 RESEARCH LINES

QUALITY OF LIFE AND HUMAN RIGHTS
DIVERSITY
ACCESSIBILITY OF SERVICES
COMMUNITY-BASED SUPPORT
INTEGRATED CARE AND SUPPORT
QUALITY OF SUPPORT AND SERVICES

PRACTICE-BASED RESEARCH

INTERPROFESSIONAL

INTERNATIONAL DIMENSION

PARTICIPATORY

QUALITATIVE AND ARTS-BASED

The proliferation of outreach practices for people in a vulnerable situation, a search for alignment and quality assurance.

1. Background

- **'Outreach' increasingly employed** (Jiao et al., 2022)
- **'Outreach' often used but rarely explained** (Dewson et al., 2006)
- **But for which aims?** (Mackenzie et al., 2011)
  - Non-take up of rights, Deïnstitutionalisation, Community Based Support, Quality of Life, preventing evictions, Recovery, provision of specific services, … (Boost et al., 2021; policy documents)
  - 'Outreach as panacea'
- **A lack of conceptualisation** (Krabbe et al., 2021; Jiao et al., 2022)
  - Research: comparative research into the effectiveness of these different types is hampered (Moriarty et al., 2015), difficulty measuring impact (Mackenzie et al., 2011)
  - Policy: which type of 'outreach work' belongs to which objective (Mackenzie et al., 2011; Stimson et al., 1994)
  - Daily practice: difficult demarcation of tasks and responsibilities (Mackenzie et al., 2011)

- **Examples in addiction recovery:**
  - needle exchange outreach programs
  - seeking contact with hard-to-reach drug users and providing support on the street
  - mobile outreach programs aiming at recovery and citizenship (home visits)
  - …

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2. Research question

Central research question:
How can a qualitative outreach policy aimed at enhancing quality of life of people in a socially vulnerable living situation be organised on a practice and policy level?

Research question sub-study:
What different types of 'real-life context work' can we distinguish in practice?

Objective:
Gaining insight into the diversity of outreach practices in Flanders as a function of drawing up a typology, focusing on characteristics, objectives and tasks that shape outreach practices.

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3. Methodology

- **Online survey** (professional, 'wellbeing', not online)
- **11 variables:**
  - 1 variabele on sector or domain
  - 2 variables on aims
  - 2 variables on tasks of the worker
  - 6 variables on characteristics of the job (place, target group, relation, time-investment, how to get in contact with the target group, …)
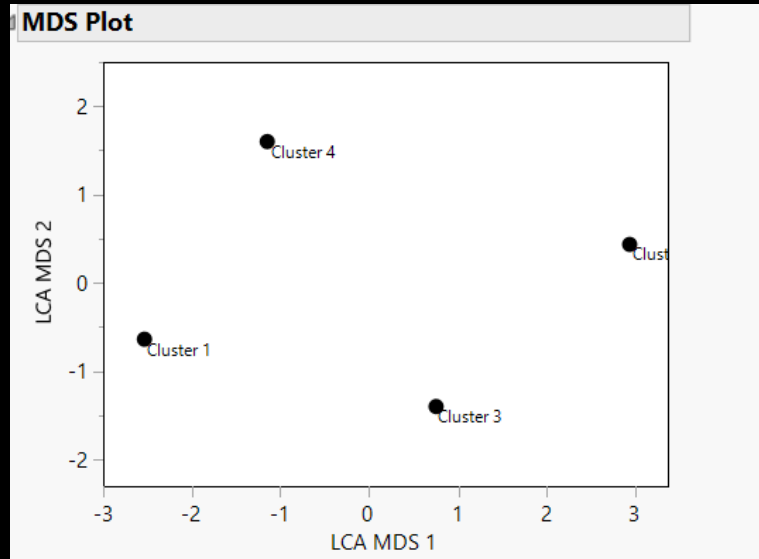- **12 domains or sectors**

  Welfare and social assistance, Disabled persons, Family and education, Older people, Health and Mental health, Youth, Housing, Integration, Education, Justice, Poverty, Employment.
- **Via federations, umbrella organisations, educational organisations, online field related magazines, social media, personal network and governments**

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3. Methodology

- 892 participants
- All sectors or domains, great diversity of functions and professions
- Data driven search for clusters through statistical analysis
- SPSS: Latent Class Analysis

4. Results

4 clusters is the best fitting model (2 to 9 clusters)

OUTREACH?	FAMILY WORK?	MOBILE WORK?	PERIPATETIC WORK? INREACH?
Cluster 1: 32%	Cluster 2: 25%	Cluster 3: 22%	Cluster 4: 20%
DOMAIN			
29% poverty	57% family	40% wellbeing	20% (mental) health
(33% wellbeing, 10% (mental) health, 0% family)	(8% (mental) health, 9% wellbeing)	(21% housing, 12% (mental) health, 1% family)	(27% employment, 23% wellbeing, 2% family)
AIMS			
64% realising take-up of social rights	60% strengthening the network of the family, 64% foster development child, 26% foster safety in family	75% increasing self-reliance, 53% QoL, 26% housing	34% (mental) health, 40% works on inclusion (social reintegration) , 34% works on employment
(63% increasing self-reliance, 39% QoL, 30% inclusion, 30% strengthening the network of the client)	(57% increasing self-reliance, 22% (mental) health)	(29% (mental) health, 39% realising take-up of social rights, 43% strengthening the network of the client)	(67% self-reliance, 41% QoL, 20% take-up of social rights, 21% strengthening the network of the client, 24% development child)
PRIORITY OBJECTIVE			
(59% target group-oriented)	(96% target group-oriented)	98% target group-oriented	(89% target group-oriented)
40% community-oriented	(4% community-oriented)	(1% community-oriented)	(12% community-oriented)
PLACE			
69% public space	90% works in home of clients	(12% public, 86% home,	54% works in other organisations
(34% home, 14% in organisations)	(4% public, 30% in organisations)	13% in organisations)	(20% public, 14% home)
TARGET GROUP			
40% works with groups	97% works with families	94% works with individuals	(88% individuals, 11% family,
(76% individuals, 16% family)	(46% individuals, 5% groups)	(46% family, 5% groups)	24% groups)
HOW TO FIND CLIENTS			
72% seeks clients		80% professional referral	21% self referral
(9% prof, 12% non-prof. referral, 9% self referral)	(12% seeks clients, 74% prof, 19% non-prof. referral, 21% self referral)	(3% seeks clients, 23% non-prof. referral, 16% self referral)	(11% seeks self, 70% prof, 20% non-prof. referral)
RELATIONSHIP			
84% voluntary relationship		48% assertive relationship	15% conditional relationship
(21% assertive, 4% conditional)	(83% voluntary, 33% assertive, 5% conditional)	(71% voluntary, 15% conditional)	(67% voluntary, 45% assertive)

OFFER			
42% groupwork, 63% participates in life client, 38 % structural policy work		79% offers direct assistance, 44% biedt indirect assistance	
(34% direct, 19% indirect assistance)	(74% direct, 23% indirect assistance, 7% groupwork, 31% participates, 17% structural policy work)	(5% groupwork, 35% participates, 11% structural policy work)	(71% direct, 27% indirect, 20% groupwork, 30% participates, 8% structural policy work)
DIRECT ASSISTANCE WHAT?			
25% casefinding, 68% publicise the offer of their own organisation	97% informs, 71 % foster safety in family	39% crisis support, 88% practical assistance, 46% conflict management, 57% engaging informal care, 88% strengthening network client, 17% social research, assessment, diagnostics and indications	
(14% social research, assessment, diagnostics and indications, 33% crisis support, 94% informs, 50% practical assistance, 35 % conflict management, 10% foster safety in family, 25% engaging informal care, 66% strengthening network client,	(10% casefinding, 6% social research, assessment, diagnostics and indications, 63% publicise the offer of their own organisation, 30% crisis support, 63% practical assistance, 12% conflict management, 30% engaging informal care, 81% strengthening network client	(11% casefinding, 54% publicise the offer of their own organisation, 94% informs, 45% foster safety in family	(18% casefinding, 13% social research, assessment, diagnostics and indications, 62% publicise the offer of their own organisation, 11% crisis support, 94% informs, 42% practical assistance, 11 % conflict management, 6% foster safety in family, 12 % engaging informal care, 60 strengthening network client
TERRITORIAL-CATEGORIAL			
51% works territorial	73% works categorial		
(49% categorial)	(27% territorial)	(57% categorial, 43% territorial)	(68% categorial, 32% territorial)
TIME			
81% works time-unlimited	31% period limited, contact unlimited, 19% time-limited		
(8% time-limited)	(40% time-unlimited)	(46% time-unlimited, 29% period limited, 11% time-limited)	(54% time-unlimited, 15% time-limited)

Cluster 1: Outreach?

- Aim: realising take-up of social rights
- Place: public space
- Case-finding
- Voluntary relationship
- (Groupwork), participating in the lives of their clients, structural policy practice
- Time-unlimited

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Cluster 2: Family work?

- Aim: foster development child, increasing safety in family, strengthening the network of the client/family
- Place: at home
- Target group: family
- Professional referral
- Offer direct assistance
- Time-limited

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Cluster 3: Mobile work?

- Aim: Quality of Life/Recovery, increasing self-reliance
- Place: at home
- Target group: individuals
- Professional referral
- also assertive and conditional relationship
- Direct and indirect assistance
- Conflict management, engaging informal care, strengthening the network of the client, practical assistance

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Cluster 4: Inreach?

- Aim: (mental) health, social reintegration, employment
- Categorial
- Place: in other organisations
- Target group: individuals
- Professioneal referral (also self-referral)
- Also conditional relationship
- Direct assistance: very divers

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5. Discussion

Limitations:

Not a representative sample.
Findings might not be transferrable to the total group of 'real-life context workers'.

Consequently, this **typology needs to be discussed by** different types of 'real-life context **workers**'.

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5. Discussion

- **4 clearly distinct clusters** of 'real-life context work'.
- Need for differentiation within the 'concept of 'outeach' in function of defining objectives, preconditions and worker profile.
- The typology provides guidance for a **qualitative deployment in practice** of the different types of 'real-life context work'.
- Consequently, 'real-life context work' or **'outreach' is no panacea** for the term itself can mean many things.

- **Cluster 1** seems to hold a **dichotomy**: group work and individual work. Reason to split this cluster in an individual and a community approach (Stimson et al., 1994)?
- Does this typology gives clarity on which form of real-life context work is desirable in which stage of recovery?

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