



## **ABSTRACT – Workshop - Promoting the socio-economic rights of older persons 2011**

### **Title: PEOPLE CENTRED CARE PLANNING for VULNERABLE ADULTS and OLDER PERSONS**

#### **Sub Theme: *Integrating and optimising Social- Health Care and Development Sectors***

**Who is the presentation for?** The presentation material is aimed at individuals, attending the 2011 Workshop Promoting the socio-economic rights of older persons held by the Socio-Economic Rights Project, Community Law Centre at the University of Western Cape in South African (22 February 2011) and working in the field of Socio-Economic and Health Development and Care Planning. The contents provide an introduction to the subject of **People Centred Development Planning (PCDP)** and aim to provide participants with a *Basic Awareness* of the need to implement a **People Centred Development Planning** approach into Socio-Economic, Health and Environmental management planning

#### **Presentation Contents**

- 1. Introduction**
- 2. Definition People Centred Development Planning (PCDP)**
- 3. Human Rights, Valuing People and Personhood**
- 4. Role and Responsibility of the Social-, Health care and Development practitioner**
- 5. Integrating PCDP into Social, Economic, Health care and Development systems**
- 6. Proposed Way Forward**

**Outcomes** The aim of this presentation is to create more awareness of the role and function a Social-, Health care or Development practitioner has to play in the integration of economic, social and ecological planning, implementation and monitoring. To inform and stimulate discussion around expectations and jointly consider the impact of current relevant legislation, guidelines and policies on Socio, Economic, Heritage and Environmental Planning. To gain a better understanding of how to help keep people centre stage in all development planning.

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### Summary ideas - Presentation Contents

**Introduction NOBUNTU** aims to create awareness, promote and support activities that will help ensure the socio-economic care needs of the most vulnerable adults and older persons in communities are mainstreamed. To research, plan and assess in a way that is realistic, sustainable and protect our valuable economic, social and environmental resources in an integrated and **Person Centred** way. I want us to consider, in practical terms, what is meant by a **Person Centred** approach in Social-, Health Care and Development planning in South Africa.

**Definition People Centred Development Planning (PCDP)** It is a fundamentally different way of thinking, seeing and working with people and especially vulnerable groups – a move from “power over” relationships to a “power with” relationship.

- For the purpose of this presentation the following terrains of development is seen as important to impact on the quality of life of **all** people, including vulnerable adults and older persons: Economy & Manpower, Social - and Health Care, Skills and Education, Housing, Safety and Security, as well as Sport and Recreation.
- No Socio- Economic, Cultural, Heritage or Environmental development planning should stand alone or aim to achieve sustainable outcomes without considering the other terrains of development that impact on quality of life.
- Throughout **Valuing people** and **Personhood** should be at the centre of planning and considered in such a way that it does not derail the achievement of required outcomes.
- Public participation should be done in a participatory appraisal way and should not only be about informing people of what is about to happen - It should always be about ensuring that Social Impact Assessments and planning take into account what is important to people from their own perspective, active listening and joint planning should form an integral part of this process.
- **People Centred Planning** in social-, health care and development planning is about assessing in a way that assist people to work out and communicate what they need.
- The Person is put at the centre of planning and all relevant stakeholders involved should get the opportunity to become actively involved in the planning process.
- Integrating this approach into Social-, Health care and development assessment and planning should assist with the achievement of more sustainable planning objectives, inform mitigation and support with finding creative alternatives.
- It is about giving structure and focus on development and planning outcomes whilst Mainstreaming, empowerment and the protection of vulnerable groups are considered throughout the planning and implementation process

**Human Rights, Valuing People and Personhood** No Socio-Economic, Health, Cultural, Heritage or Environmental planning should stand alone or aim to achieve sustainable outcomes without **Valuing people** and **Personhood** in such a way that it does not derail the achievement of required outcomes.

**Role and Responsibility of the Social-, Health care and Development Practitioner** I am not today going to discuss the traditional roles we are all familiar with – The emphasis of this presentation is to ensure structure is given and focus remains on identified outcomes whilst Mainstreaming, Empowerment and the Protection of Vulnerable groups are considered.

We need to ensure *People remain at the centre of planning*. The Person need to be put at the centre of planning, even environmental planning and all relevant stakeholders involved should get the opportunity to become actively involved in the planning and assessment process to ensure a multi functional and holistic care plan as outcome. Social-, Health care and Development planning should not only be about informing people. It should also be about reflecting about what is important to people from their own perspective, active listening and joint planning forms an integral part of the Socio-Economic, Health Care and Development Assessment process.

In South Africa we too often look at crisis management rather than preventative development and planning. We hide behind a lack of capacity and resources whilst services are fragmented and duplication waste valuable resources. Lengthy and impossible processes delay implementation and are often unrealistic and impossible to implement and maintain, especially in rural areas.

Only one small and very practical example would be that day care or service centres for older persons need to be registered as NPO's to qualify for funding – the requirements to manage a NPO, in a very isolated rural community with low literacy levels might be difficult – we agree that this is potentially the most vulnerable older people with little or no access to services – without the essential training and capacity building to enable them to do the required financial governance – they will not be able to provide the required financial statements and reports and as a result funding are withdrawn. **THIS IS NOT PERSON CENTRED CARE or CARE PLANNING** but is the reality that is taking place on a day to day basis – creating expectations and setting people up in an unrealistic way that lead to failure and disempowerment.

**Integrating PCDP into Social, Economic, Health Care and Development systems** Integrating this approach into Socio-Economic , Health care and developmental assessment and planning should assist with the achievement of must more realistic, cost effective and sustainable planning objectives to inform mitigation and support the finding of alternatives where required.

### **Proposed Way Forward**

- Establish a **Consultation Transformation Workgroup** to encourage government, local community groups and organisations to incorporate community opinions and ideas in the development and transformation of services to vulnerable adults and older persons.
- Consider ways to reduce fragmentation and duplication of services
- Re look the role, training and application of Social-, Health care and Development practitioners.
- Create awareness, promote and support activities that will help ensure that the socio-economic and health care and development needs of the most vulnerable adults and older persons in communities are mainstreamed.
- Promote standard setting for social- and health care of vulnerable adults and older persons.
- Support education and training development required so as to realise the main object of the Consultation Transformation Workgroup.
- Shift paradigms and actions of individuals and organisations with regards to Active Ageing.
- Promote person centred social- and health care assessments and management for vulnerable adults and older persons.
- Promote the safeguarding of vulnerable adults and older persons against abuse.
- Ensure structures and processers are in place to profile and advocate on behalf of vulnerable adults and older persons.
- Support the development of global partnerships for research, share and development of information related to the sector.
- Promote and enable the development of cross-racial and cross-cultural awareness and congenial interactions among all segments of South African society.

