Social Policy and Community
Social Service Development
Project in Lithuania

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Department for Europe
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1. Executive summary

1.1. Brief description of the project

The goal of the Social Policy and Community Social Services Development Project, Component 2 was to ascertain whether or not the provision of Community Day & Home Care services offers a viable alternative to the care of vulnerable individuals, including children, young adults, handicapped, disabled and the elderly in residential institutions. In order to gain the necessary experience the Ministry of Social Security and Labour, together with World Bank and Sida, established 14 social service centres in 6 different municipalities in Lithuania. The programme commenced in 1997 and was planned to stop in 2002. All 14 social service centres were established in 2001. The establishment of all centres progressed according to the original plan and no major difficulties were encountered, with the exception of Social Service Centre of Šiauliai. Here, problems related to the selection of facilities, delayed the opening of the centre until 2001.

The objectives, input indicators, output indicators, outcome indicators and impact indicators of Component 2 are documented in STAFF APPRAISAL REPORT No. 15376 LT, January 15, 1997 and are summarised below as follows:

Objective
To establish viable and cost-effective community based social services that address local needs.

Input indicators
- Investment in the design and renovation (including civil works) of three education centres
- Local resources (in kind contributions) to cover recurrent and other costs

Output indicators
- Three education centres and three multi-service centres are functional by early 1998
- Mid-term evaluation of all centres December 31, 1999 and a final evaluation including a plan for replication to be produced by December 31, 2001

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1 The list of established social service centres can be found in Appendix 3
Outcome indicators

- By 1999, the recurrent costs per client served are consistently lower than the recurrent costs per institutionalised client in all pilot projects
- By 1999, client surveys show that over 50% clients involved in pilot projects are satisfied with the social services they receive

Impact indicators

- Establishment of a cost-effective community level social service system tailored to meet the needs of individuals who are vulnerable, or at risk of institutionalisation.

The intention from the outset of the project was to place strong emphasis on addressing the needs of future clients. A number of project objectives were defined in order to reflect this. These objectives were intended to act as ‘guiding principles’ for the work of the various social service centres and they are as follows:

| I) | To make all possible efforts to prevent new clients from being placed in institutionalised residential care; |
| II) | To provide clients with community-based social services in their own homes because such services are comparably cheaper than housing clients in large scale residential institutions; |
| III) | To create preconditions for the effective use of the individual's opportunities and capacities; |
| IV) | To apply effective and efficient methods of community assistance in dealing with a large range of problems that clients have. |

Secondly, the project focussed on objectives related to the overall development of social service provision at both the national and community level in Lithuania. Objectives of the project have therefore been to:

| V) | Assist in the development of social service provision in Lithuania, promoting innovative ways to deliver social services to vulnerable individuals; |
| VI) | Create a harmonious system of activities in order to create the preconditions necessary for the development of effective and efficient (in social and economic terms) community based social services. |
| VII) | Create the conditions necessary for the integration of disabled individuals into society and local communities, by providing them with home help and community based social services, as well as working to change the public attitude towards the disabled. |
With regard to the work with clients in the centres, the primary intention of the programme was to focus on the organisation of social work. A key aim of the centres was to present a new type of community service, not only working directly with the clients, but also with their families, relatives and the wider community in order to build local capacity to support self-assistance. The key goal of personnel working with clients in the centres is to assist people in becoming as self-sufficient as possible within the local community, thus providing a viable alternative to long-term institutional care, while at the same time offering client’s access to a variety of innovative social services, which will ensure their smooth integration into local communities and independent living.

As a result of this, the third objective of the programme was linked to the training of staff members. The aim is to promote new and effective work methods to assist individuals in dealing with their problems as well as to create a system of self-assistance.

Some members of staff attended training courses in Sweden and Lithuania. Tutors, from Sweden, regularly visited the centres and helped to improve the process of providing self-assistance. Consultants from Stockholm University, School of Social work have held regular meetings, throughout the duration of the programme, with working groups from the municipalities to discuss the current situation, problems and project activities. Staff members of the centres have continuously received assistance and methodological support from tutors from Stockholm University.

The fourth and final objective of the programme has been to build up a documentation system in the centres. The aim of the documentation system has been to create a data base that would help to ensure effective case management, the rendering of efficient assistance, to assist operative personnel in making decisions related to changes in a client’s needs, as well as to support the use of a variety of flexible forms of practical assistance.

All centres should use the mentioned documentation system, but it is not absolutely perfect and personnel face different problems in using the system. It can be observed from the results of the survey that staff at a number of centres are quite...
reserved about the potential and necessity of replicating the system in other municipalities.

The facilities of some of the social service centres have undergone a number of changes and improvements over the past few years.\(^4\)

1.2. **Purpose and focus of the evaluation**

The evaluation assesses the impact of the centres and the effectiveness of the programme in relation to the original objectives. A key aim of the evaluation is to provide the necessary information on which the MSSL and municipalities can base decisions about possible future replication of the centres throughout Lithuania.

In order to be able to address questions pertaining to the possibilities and value in replicating the centres in the future, the evaluators have paid special attention to assessing the activities carried out at each centre:

a) Detailed evaluation of implementation of project parameters by each centre:
   - Have project objectives been implemented?
   - To what extent is there a justification of the projected personnel structure?
   - Was the target group of clients correctly defined?

b) The evaluation also contains an analysis of the impact of the changing context in the sector on the programme during the period 1997-2002:
   - If the scope of the project changed, what new objectives emerged, what objectives have not been implemented and why?
   - Why have there been changes in the project objectives, the personnel, the number of clients, and structure of the centre (objective and subjective reasons)?

c) Finally the evaluation aims at setting up a number of concrete recommendations with regard to the future replication of such centres in other municipalities.

One more important aspect of the evaluation has been to assess the significance of the centres and the impact that the programme has had on the development of the national and municipal social service network. This part of the evaluation has been based on the collection of the following data:
   - Quantitative data concerning current status of the centres

\(^4\) See details in Appendix 9 - part A-H
• Interviews with representatives from the municipalities and Ministry
• Data regarding current trends and problems faced by the social service system
• Desk study of research reports, articles and other documentation.
• Results of the questionnaire distributed to all heads of the social service centres

All further details regarding data collection is described and accounted for in the Annex Report to this evaluation report.

1.3. Findings, conclusions and recommendations

1.3.1. The overall objectives of the programme have been successfully reached

I) To make all possible efforts to prevent new clients from being placed in institutional residential care.

The analysis of activities at each centre showed that this objective has been met. The new social services provide a viable alternative to institutional residential services and they considerably improve the quality of life of clients and their families.

II) To provide the clients with community-based social services in their own homes because such services are comparably cheaper than housing clients in large scale residential institutions.

It is the role of all the organisations involved in the programme to provide community based social services. The evaluation concludes that it would be exaggerating the point to say that it is always cheaper to provide community-based social services rather than institutional residential care in financial terms. For example, it costs almost the same to provide services to disabled children via day education centres as to provide support to clients in residential institutions. There are very high standards of service provision in the newly established social service centres: activities are tailored to assist clients in the recovery of their independence and time is also spent working with families, this work is not undertaken in residential institutions. This is reflected in the costs associated in providing these services. As the level of social service provision is comparatively lower in residential institutions so too are the associated costs of providing these services. (See table 3 in Appendix 6 and table 1 in appendix 8).

It is important to note, that the costs of providing Community Day & Home Care services will of course be higher during the early stages of establishing the new
services. Looking at international experience, for example, in Scandinavia, it has been clearly demonstrated that in the long run Community Day & Home Care services provide better and cheaper ways of treatment for most clients in comparison with those receiving treatment from residential institutions even if high quality treatment is offered by both sets of social service providers. This said, it should be remembered that some clients require constant residential treatment twenty-four hours a day and therefore it would be a mistake to think that there should be no place for residential institutional care in the future.

III) **To create preconditions for the effective use of the individuals opportunities and capacities.**

Stockholm University has done a remarkable job in training the heads and staff at the centres to deliver more effective and dignified forms of treatment. Most of the individuals working in the centres are aware of their own capacities and are able to use the opportunities available to them in their work.

IV) **To apply effective and efficient methods of community assistance in dealing with a large range of problems clients have.**

Effective and efficient methods of community assistance are in fact applied in the established centres. Experience of applying these methods is shared with staff members working in similar organisations from other municipalities. Some basic methods that are used and being shared include:

- Systematic work with biological families of foster children in order to bring them back to their families;
- Working to offer an alternative to residential care for disabled children by training children to be more independent while at the same time working to integrate them into society;
- Creating conditions for the re-building of social relations for clients who have become dislocated from their families and society, for example, ex-prisoners;
- Training women to help themselves and each other and to work with those who have violated women in order to find a solution to break the circle of violence;
- Creation of a co-ordinated system of complex social assistance for work with addicts and mentally handicapped and disturbed individuals.
1.3.2. Faulty elements in the projects

Objectives that have not been met are mainly related to the following three factors: weak financing, insufficient qualifications and a lack of systematic case assessments.

The weak financial support from municipalities has in many cases been a major cause of problems. During the project design process insufficient consideration was given to the level of funding required to ensure the sustainability of the regular functioning of the centres, in other words the financial provisions were too low (see part G in appendix 9). In fact, it only became clear what the exact running costs of the centres were going to be once the centres were up and running. It has in fact been common for municipalities to attempt to reduce funding allocated to the centres by cutting the number of personnel and services rendered.

During the initial phases of the project some staff did not possess the necessary qualifications or experience to work with particular groups of clients (see part F in appendix 9) this is not an uncommon problem when there is a high turnover of staff and new members of staff have not been exposed to new ways of working with clients and therefore lack the general understanding and skills to work with different groups of clients. For example, in one situation training parents to play with and stimulate a disabled child was problematic because the parents were not motivated to do so and the staff working with them underestimated the significance of such motivation and did not have the skills/strategies to encourage parents to become more motivated.

Finally, insufficient systematic case assessment has been and still is a challenge in many centres. For example, when estimating the number of clients, some education centres for children did not consider that a lot of low-income families living in rural areas cannot afford to bring their children to the centre. Some families actually choose not to take advantage of the services on offer from the centre and others simply cannot actively participate in the process of educating their children in co-operation with the centre’s personnel because of the problem of access to the centre. It has been shown that a number of clients living in rural areas need access to transport services in order to benefit from the new social services on offer but no provisions, practical nor financial, were made to find a solution to this problem from the outset of the project. Therefore, the current solution is as follows: children from one side of the region are brought to the centre one week and from the other side of the region the next week.
1.3.3. The impact of changing context and objectives

The project objectives set in many centres were supplemented with new objectives and/or modified to reflect the changing conditions in the sector. Some centres significantly increased the scale of their activities in comparison with their forecasted activities (for example, the centre for battered women and their children in Vilnius, and the social service centre in Šiauliai).

In general, the number of clients was greater than expected. However, the total number of personnel was less than originally planned (*tables 1 and 2 in Appendix 6*).

Changes both in the number of clients and in the number of personnel are due to:

- The rapid development of the social service sector resulted in better systematic planning of service provision, the identification of new opportunities, and the modification of existing organisations or services provided by municipalities;

- Changes in the legislative framework. The Catalogue of social services (2002) provided for new types of services the principles and procedures of payment for social services set forth that: clients must pay for social services (1998); funding of services in the education centres would be based on the principle of providing the full range of students services (following the relevant decree of the Ministry of Education and Science), which have required changes in the personnel structure;

- The limited financial resources of the municipalities, as they try to deliver cheaper services in order to save money. This has triggered changes in the organisational structure, the project objectives, for example, gathering diverse services in one location (in Švenčionys, Šiauliai), the reduction of administration costs; the decentralisation of service delivery to communities (Švenčionys Admission Office);

- Greater attention has been paid to the assessment of client’s needs in order to deliver effective services that meet each client’s individual needs. Personnel saw for themselves that delivering effective assistance is directly linked assessing the client’s needs correctly. When more attention was paid to assessing the needs of the clients, new ‘needs’ were identified, which resulted in the expansion of services, and changes to the structure and organisation of centres;

- Greater attention was paid to assuring the sustainability of services. The experience of education centres for children was that it is necessary to establish, in each municipality, centres offering a full range of services for dis-
disabled individuals from every age group (from pre-school children and to the elderly). Age limitations within these centres had to be reviewed so that both children and adults receive the help they need. For those education centre graduates that are adults and can there are plans to establish self contained residential units.

Maintenance costs and service delivery costs in the new social service centres are basically similar (insignificantly lower or higher) to other organisations in the country. (See table 1 in appendix 8 and 3 in appendix 6). However, it is difficult to compare the two directly as there is no precise information to enable such a comparison with regard to the number of clients, services delivered, methods applied, etc.

1.3.4. The impact at the national and municipal level

V) Influencing the development of social services and promoting innovations in the social service sector

During the lifetime of the programme a total of 5 conferences were held for staff members of municipalities, schools of social work, and representatives of NGOs on the development of community social services. The experiences of social service centres were shared and problems related to the social service policy in municipalities were addressed. In addition to this, all pilot centres are sharing their experience with other municipalities. Representatives from municipalities and NGOs have visited the centres. Relevant seminars are also held in the pilot centres.

VI) Demonstrate a system of harmonious activities in order to create preconditions for effective and efficient (in social, economic terms) conditions for the development of social services in communities.

This objective has only been partly achieved. Some centres have become the footholds for change in municipalities, initiators of innovations, and co-ordinators of inter-institutional and interdepartmental collaboration in municipalities. Good teamwork has been established and work methods have been adapted to meet local and individual needs. Yet, the establishment of the fully harmonised, co-ordinated system of activities in inter-institutional and inter-departmental terms has not been fully achieved.

The programme has contributed to the enlargement of community services in the country and as well as a growing understanding of the need to prioritise the development of community-based services.
VII) Create the conditions for the integration of disable individuals into society and
the local community by providing them with the services they need as well as
working to change the public attitude towards the disabled.

Compared with the situation in 1998, the general public, politicians, and parents of
disabled children now have a much better understanding of how to work with dis-
abled children in a day centre instead of placing the children in long terms institu-
tional care and believe that this work produces very good results in terms of the
progress that the children make.

It is becoming a common conception that the establishment of long term sheltered
accommodation for children that come from problematic families does not offer a
solution to the problem for such children, but just serves as an interim solution, a
tool to bring the child back to his/her family. This realisation will encourage social
workers to improve their qualifications and skills in dealing with the (re)building of
family networks.

The attitude of the general public to the disabled and their participation in society
is changing in rural and urban communities, people have opportunities to meet
and communicate with disabled persons in everyday situations (shops, schools,
the administration rooms of municipalities), instead of just seeing them in institu-
tional care establishments (see figures in part B and D 9).

The establishment of many social service centres in the centres of municipalities
and small towns, rather than just being located in big cities, has contributed to the
reduction in regional disparities in terms of the network of service provision.

1.4. Recommendations concerning future replication

The actual numbers of activities, personnel, and the number of clients differ from
those originally projected. On one hand, this can be considered a positive phe-
nomenon, processes of natural change and development, of course providing that
these processes of change do not require substantial reforms or changes to the
structure of the centres. On the other hand, with the benefit of hindsight the man-
gers of many centres think they would have established slightly different centres
today given the knowledge they have now. They explain they did not have a clear
vision of the way that things would unfold. In the future they would recommend us-
ing new ways of activity modelling and forecasting in order to design centres that
would meet long-term needs instead of just addressing the immediate needs of clients.

Assessments of the services that social service centres should provide must be as detailed and extensive as possible, covering all aspects related to service delivery.

It is necessary to consider the organisation of transport services as an integral part of the centre’s activities and to take into account the costs of providing these services.

In addition to working on a description of project objectives and financial estimates, new project proposals should also address the creation of inter-institutional and interdepartmental co-operation systems. Systems of inter-institutional co-operation should be worked out to include details of not just the parties of co-operation, but also the forms, methods of such co-operation, likely obstacles and ways to eliminate them.

Taking into consideration the fact that most municipalities currently have quite well developed systems of social service provision, great attention should be paid when replicating the centres to ways in which the centres can be integrated into the existing service system in order to provide high-quality services at the lowest possible cost.

In terms of the dissemination of experience, we recommend that establishing methodological centres within the social service centres would help build on the progress that they are making it will also ensure that the knowledge acquired in terms of skills, for example, for working with problematic families and the motivation of parents to work with their disabled children is retained in the centres regardless of changes in personnel.

Another possibility is to disseminate experience of the centres more systematically, using for example, the training centre of social workers as the basis for organising various training courses in different work methods as well as the dissemination of information regarding the experiences of social service centres.
2. Programme Context

2.1. The development context of the project

The whole programme ended in 2003. Over the period 1997 to 2002 the system of social service provision in Lithuania changed significantly. Today most municipalities in the country have several different types of social service organisations (community based, residential or NGOs), in comparison with the one or two they used to have, that provide services for elderly, disabled persons, problematic children and families, etc.\(^5\)

The network of community-based services has in particular developed during these last years. Though reliable statistical information concerning community services is not yet available, some research shows that community-based services are beginning to dominate in the social service sector. For example, according to research carried out in 2000, the number of children cared for in community based schemes offering temporary accommodation outnumbered those being cared for in traditional residential institutions.

Between 1997 and 2002 the labour market for social workers also changed. Today, social workers specialising in many different areas are educated at a number of universities, colleges and other schools in Lithuania. In 2002 there were about 4000 trained social workers, so the provision of social service organisations with qualified experts is not such a thorny problem as it was in 1998. However, there is still the need to give these qualified social workers the opportunity to develop their skills further, for example, in terms of learning effective methods to work with different groups of clients and individuals, as such specialisation in terms of the skills social workers have are still relatively limited in Lithuania.

\(^5\) Reports of research initiated by the MSSL and carried out by the Institute of Labour and Social Research on the development of service network:
- “Evaluation of the need for community based social services and analysis of services provided by community based centres; costs of such services”, 2001
- “Systematic evaluation of activities of various care institutions for children in the region (county, municipality) in the light of application of advanced forms of children care”, 2001
- “Research of social economic efficiency of social services in municipalities”, 1999
- “The need for social services by elderly individuals in rural areas and service development recommendations” 1999
Lithuania is still in transition in terms of the development of its services, as emphasis is placed on establishing quality and efficiency indicators instead of the development of the service network. There is talk of the need to establish social service organisations, as well as the need to address such problems as the systematic assessment of customer’s needs, assuring the quality of the services rendered, the structure of funding, the rationalisation of the service structure, and ways to improve qualifications of service providers.

The legislative framework governing the social service system is also changing. The Ministry of Social Security and Labour developed a ‘Concept of the Social Service Reform’ that served as a basis for the drafting of a new law on social services, new procedures for service financing and payment for services, as well as standards for general and specialised social service organisations, etc.

Therefore, the context in which the pilot centres could be replicated has significantly changed. When considering the possible replication of the pilot centres, the external conditions affecting the establishment of such organisations have to be considered, and a thorough analysis concerning the existing social service network in each municipality should be made.

It can be observed from the results of the interviews with the six managers of municipal centres that most of them believe the centres could be replicated only after taking the present particularities in each municipality into consideration (see figure in part H in appendix 9).

However, the existing centres in some municipalities cannot satisfy the demand for social services yet and managers of the centres find it reasonable to develop further services of the aforementioned type (see figure in part C, in appendix 9). One can presume that this could be an issue that future centres, should the pilot centres be replicated, could face.

Taking into account that for the time being the key emphasis is placed on the improvement of quality and efficiency of the services, ‘replication’ should focus on the replication of effective work methods and the experience of service organisations rather than the ‘physical’ replication of such organisations. For example, replication might involve, how to provide services for family with problems seeking to

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bring their children back to the family; how to organise assistance for women who were exposed to violence; how to achieve the best possible community integration of disabled children, etc.

2.2. Project history

Having regained independence, Lithuania started the creation of a substantially new system of social service provision, where responsibility for its extensive development, in accordance with Law on Social Services 1996, was vested upon local communities (municipalities). The period following the adoption of the law could be described as a quantitative leap in the development of social services, as the number of social service organisations increased rapidly with the enlarged supply of services. Municipalities were concerned about ways of establishing services, the number of social service organisations, as well as conducting assessments of the need and scope of services. The development of the service network was initiated and funded by the municipalities. The Government and international authorities also made significant contributions in promoting and sponsoring the process by funding progressive programmes of social service development.

One of these programmes was the project on Community Social Service Development initiated by the Ministry of Social Security and Labour, World Bank and SIDA. Between 1997 and 2000, according to the project implementation plan, fourteen community centres were to be established in six municipalities.

As Lithuania inherited the Soviet system of residential institution services only, community-based social services and development experience in 1997 were extremely limited. This programme emphasised the priority and importance attached to the development of community-based services as an alternative to residential services. The plan was to establish such community service centres that either did not or rarely existed in Lithuania: day education centres for children with mental disabilities, employment centres for disabled adults with mental disabilities, centres for women exposed to violence, temporary accommodation for ex-prisoners, and social rehabilitation centres for alcoholics.

The establishment of such service centres for the above-mentioned groups of clients was based on an analysis and assessment of the needs in terms of social service provision.
This programme had without doubt a significant impact on the development of social services in Lithuania. The significance of the project was stressed as early as the end of 1997 by representatives of municipalities who took part in the research carried out by Vilnius and Stockholm Universities. The managers of the centres interviewed during this research also stressed that the programme constituted a major push for the development of new services in the country (see figures in part H in appendix 9).
3. The Evaluation Methodology

3.1. Reasons for the evaluation

The activities of pilot projects were regularly monitored and analysed throughout the implementation of the project. This evaluation was to be the final stage in the evaluation of the centres’ activities following the conclusion of the project implementation period.

The following institutions carried out interim evaluations of the centres’ activities:

- During World Bank missions the mission members were regularly visiting the centres and making particular recommendations on further the improvement of their activities (more information is available in memos of World Bank missions).

- A project co-ordination group co-ordinated the activities of the centres, gave recommendations on the work of the centres, collected information, analysed outcomes of the centres’ activities, and drafted annual activity reports.

- Activity supervision work groups were also interested in the outcomes of centres’ activities and contributed to tackling existing problems.

- In 1997, the Ministry of Social Security and Labour, Vilnius University and Stockholm University organised the evaluation of the centres’ activities. They prepared three questionnaires (for social service providers, staff members of pilot centres and customers of the centres) and carried out a questionnaire survey in six pilot municipalities. Service providers were also interviewed in other municipalities in order to find out the influence of experience gained by the centres on the national system of social services.

3.2. Approaches and Methods

The evaluation of the centres’ activities was carried out on the basis of the evaluation concept and requests that have been discussed and submitted by representatives of the MSSL, World Bank and Stockholm University. The methods of the evaluation were as follows:

- Analysis of the documentation concerning the design of the centres, intermediate evaluation reports (1999-2002) on the centres’ activities, research material covering the centres’ activities from 1997 onwards. (see appendix 11)

- On site observation: visits to all 14 centres and interviews with the heads, employees and the clients of the centres in order to learn more about the problems encountered and the types, quality and costs of the services.
Standardised questionnaires (see Annex Report, appendix 10 - Questionnaire) and informal interviews conducted with: the Heads of the centres and employees of the centres; the heads of the departments of social assistance or education in the municipalities; the representatives of the Ministry of Social Security and Labour.

3.3. Limitations of the study

The greatest limitation to this evaluation was the time allocated for carrying out the evaluation. Only fourteen weeks were given for the collection and processing of the data, studying the activities of each centre, as well as writing reports in both English and Lithuanian. The requirement to produce reports in Lithuanian and English meant that additional time was needed for the translation and editing of reports (about three weeks).

Therefore, the evaluation pivoted around methods of evaluation that could be conducted within the time assigned for the evaluation, they included: interviews, questionnaires, monitoring, and the analysis of documents. Unfortunately, it was impossible to carry out standardised surveys of clients and staff members of the centres or prolonged monitoring of their activities. Accordingly, the evaluation of some the projected objectives of the centres and in particular those related to the feelings and changes to the situation of clients, was quite difficult. The evaluation of such objectives in the report is based more on indirect information (information on case changes recorded in the documentation of the centre, individual monitoring, etc.), instead of being based on client’s information. There were no opportunities to carry out a more detailed analysis of the extent to which clients are satisfied with the assistance/services they receive. In order to compensate for this bottleneck, attempts have been made to get more information, even if fragmented, about each centre from different sources and to make general comparisons, looking for contradictions or similarities.
4. Findings, Conclusions and Recommendations

This section of the report contains an assessment of the achievement of the projected parameters (objectives, staff, clients, work methods, and services provided) of all 14 Centres, a detailed case study for each centre can be found in Appendix 5 to the report.

This section contains an analysis of what new or additional objectives of the activities, services or methods have emerged since the establishment of the centres, and the extent to which these have modified the projected activities and results achieved in the centres. There is also a description of changes in the conditions or circumstances that might have an impact upon the possibilities to replicate the centres in other municipalities in Lithuania.

The evaluators have analysed whether the key objectives set for each of the centres have been reached, as well as the influence that any external or internal changes have had on the development of the centres, if any.

The aim is to state:
- Whether each centre has proved itself to be a good model delivering relevant services that may be replicated in other municipalities without making any major changes to the model;
- If any changes or modifications were made in terms of the projected objectives or any other parameters of the centres, or if any new objectives or parameters emerged, and the projected model therefore changed. It is necessary to discuss the worth in replicating the modified model;
- In some cases, it might be that the altered conditions (for example, new laws, the network of services at the municipal level, the professional skills of social workers, etc.) mean that it is better that only ideas, methodologies, activities or arrangement of services be replicated rather than the centre and its work in its entirety.

Furthermore, at the end of this chapter some more general comments concerning the activities of projected centres, changes in communities following the establishment of the centres, problems associated with the results of questionnaire-based surveys carried out are made. In our opinion, all this will reflect not only the specific aspects of the each centre, but also provide an overview of the trends and problems that should be taken into account when considering if and how to replicate the centres in other municipalities.
### 4.1. Vilnius: Centre for Battered Women and their Children

#### 4.1.1. Findings

<table>
<thead>
<tr>
<th>Legal status</th>
<th>The centre is an entity financed by the municipality</th>
</tr>
</thead>
<tbody>
<tr>
<td>Projected objectives</td>
<td>The key objective of the centre is to provide temporary shelter and other required support according to the needs of the clients, the main aims being to help:</td>
</tr>
<tr>
<td></td>
<td>• Battered wives and their children</td>
</tr>
<tr>
<td></td>
<td>• Women with children in difficult periods of their life by providing rehabilitation and psychological services</td>
</tr>
<tr>
<td></td>
<td>• Avoiding residential care services. For children – to avoid them being placed in children homes</td>
</tr>
<tr>
<td></td>
<td>• Women in taking care of their children, get them involved in the systems of self-help</td>
</tr>
<tr>
<td></td>
<td>• Unemployed women to find a job and a place to live</td>
</tr>
<tr>
<td>Clients</td>
<td>The program was expected to serve between 30-50 women and their children; the current number of the clients in the centre is considerably higher than projected.</td>
</tr>
<tr>
<td>Other results</td>
<td>The range of services provided by the centre has expanded, there are new client groups and new services that had not originally been planned in the project.</td>
</tr>
<tr>
<td>Staff</td>
<td>In the Project it was envisaged to have a staff of 19. At present, the staff is 1.8 times larger than projected; the relative number of technical staff is also higher than expected due to the nature of the services provided. It has not, because of financial reasons, been possible to employ a lawyer to work in the centre as envisaged.</td>
</tr>
<tr>
<td>Financing/payment of services</td>
<td>Due to the increase in activities the project experienced a corresponding increase in staff costs. However, the centre has managed to reduce the service cost per client. The service fees paid by the clients amounts to 0.01 % of the total cost of the institution.</td>
</tr>
<tr>
<td>Change in objectives and trends in the present activities</td>
<td>The project has evolved during the period of its duration, having achieved its original objectives the target groups and activities have changed and developed. The crisis unit is an especially important feature in the centre today. Another important element has been the growing involvement in the education of the local communities which is helping to raise public awareness. These run parallel to important attitude change processes within other organisations and institutions. Three important trends in the “environment” of the centre has been identified:</td>
</tr>
<tr>
<td></td>
<td>1) Change in attitude especially at the political level</td>
</tr>
<tr>
<td></td>
<td>2) Increase in network activities between professionals, especially at the municipal level</td>
</tr>
<tr>
<td></td>
<td>3) Labour market situation for the social work specialist – increase in supply of trained professionals.</td>
</tr>
</tbody>
</table>
4.1.2. Conclusions

The projected capacity of the centre in terms of the services offered and work methods to be used has been fully realised. At present, however, the projected activities of the centre have been supplemented to a large extent with new activities; their scope has expanded due to a need for new services and the identification of new client groups. It is difficult to say whether or not the situation and the demands were fully analysed during the inception phases of the project. It could of course be that it was simply impossible to foresee these circumstances given that full range of demand had not fully manifested itself at this time.

A number of external factors have had an impact on the context for the development of the centres, they include for example:

- A change in the opinion of society towards violence against women created demand for new services such as short-term crisis assistance;
- The emergence of new problems in society has formed new client groups, for example, victims of human trafficking.

Therefore, the centre has ‘outgrown’ its projected parameters such as original objectives of the centre, the characteristics of the clients and the staff, and the range of services to be provided. The work methods used, team work, work with the family etc., remain the same as those proposed in the original project plans and are used to their full extent. Perhaps the only difference is that there is a greater focus on the importance of working with offenders as this is considered to be such an important part of addressing the problem as a whole.

The number of both clients and staff is essentially greater and their structure is essentially different as compared with the relevant planned indicators.

When highlighting the key aspects of the centre it is particularly important to point out the significance of the centre as a centre of innovation in the development of this type of services of the country, and the introduction of new work methods and training.

4.1.3. Recommendations

The centre could become, with funding for additional staff positions, a methodological centre for the country with sufficient expertise in terms of different work
methodologies and organising ways of providing assistance to help victims of violence.

As regards the replication of the centre, two options are possible, depending upon the specific situation of the municipality where such replication will be carried out: a) replication of the centre in its entirety, making sure, however that the particular conditions of the municipality are taken into account during the planning process, and that a detailed assessment of the demand for the services is made as is an assessment of the possibilities for the integration of the centre into the existing service system of the municipality; b) replication of the expertise of the centre’s staff in providing assistance tailored to meet the needs of individuals and in arranging assistance to battered wives. There could well be more demand for the second option. Bearing in mind the financial difficulties of the municipalities, attention should primarily be paid to creating a model of the required services at minimum cost and by finding a way of integrating the model within the existing system of services. The services provided by such a centre should not overlap with ones already provided in the municipality.

The expansion of the network of services will require qualified experts to work with victims of violence, therefore, graduates with the BA or MA degree in social work should receive additional training. Alternatively, some form of specialist training at universities could also be an option.
## 4.2. Vilnius Centre “PARAMA”

### 4.2.1. Findings

<table>
<thead>
<tr>
<th>Legal status</th>
<th>The centre is funded from the budget of the municipality. It is subordinate to the Vilnius Social services centre and it is not a legal person.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Projected objectives</td>
<td>The main objective of the Project is to develop an integrated system in Vilnius to help those addicted to drugs and alcohol to get involved in the treatment and social rehabilitation process</td>
</tr>
<tr>
<td></td>
<td>1) To reduce the number of problems related to alcohol and drug abuse</td>
</tr>
<tr>
<td></td>
<td>2) To develop an efficient social work services structure for those addicted to alcohol and drugs. Furthermore, to provide consultancy, care and treatment services to individuals and families who suffer from alcohol and drug abuse.</td>
</tr>
<tr>
<td>Clients</td>
<td>It was envisaged that the annual number of clients visiting the centre would be about 700, and the number of new clients per week would be 30. The centre keeps no track of such information therefore it is difficult to say to what extent the said targets have been achieved. The centre only keeps records of only those clients who are registered, i.e. those who regularly received services not those who have just visited the centre. In 2002, the annual number of registered clients was 291.</td>
</tr>
<tr>
<td>Other results</td>
<td>The activities have gradually been developed further. During recent years there has been an increase in the range of the working methods used at the centre, new programmes have been launched for the work with parents of drug addicts, with children from risk group families (development of social skills, At-Ateen, etc.)</td>
</tr>
<tr>
<td>Staff</td>
<td>The original number of staff was estimated to be 5, but today 7 people are employed at the centre. There has been a very high turnover of the centre’s staff. Throughout the duration of the project nearly all employees have changed.</td>
</tr>
<tr>
<td>Financing/payment of services</td>
<td>The centre has encountered difficulties in getting sufficient funds. There are current initiatives to raise additional funds.</td>
</tr>
<tr>
<td>Change in objectives and trends in the present activities</td>
<td>At the present time, the actual activities of the centre are limited to the activities and services outlined in the project objectives. The aim is to make both the provision of planned services, the application of work methodologies more efficient, and to realise the project objectives to their full extent. As regards the differences in the projected objectives and current activities, the evaluators only note a greater focus on some aspects of giving assistance to families. Both the development of the legal framework and the social services net-</td>
</tr>
</tbody>
</table>
network, in particular, for those who are addicted to alcohol, has not been marked by any particular progress over recent years. More attention seems to be given to tackling drug abuse.

4.2.2. Conclusions

It is impossible to ensure the success of this type institution without there being a good system of cooperation, in particular without the development of an inter-institutional coordination system. The evaluation of the centre “Parama” indicates that there are essential problems with, and obstacles to, the development of an effective system of cooperation. In order to facilitate the development of such cooperation activities some of the laws and regulations must be amended and supplemented.

It was originally envisaged that the objectives of the institutions should have been reached to a varied degree. However, the problem remains that there is no integrated system of service provision and cooperation within the sector in Vilnius that enables those addicted to alcohol or drugs to get involved in the treatment and social rehabilitation process.

The development of such an integrated system requires creating: a) an institutional network, b) forms and methods of assistance c) support networks for clients. The kind of integrated system being described ensures the transfer of clients between institutions as well as continuity in the assistance received by the clients, those working with the clients should also be fully aware of the client’s circumstances and the forms of assistance they need to receive and are receiving. At present the objective of inter-institutional development has been realised only on a basic level: the cooperation between healthcare institutions and rehabilitation groups for drug abusers is not efficient enough. Healthcare institutions are particularly inert and tend to adhere to the old model of activities when there were no social institutions and services for the group of clients they are working with. Furthermore, they try to cover all aspects of assisting the client themselves without trying to recognise the need to and benefits of cooperating with the social security system. This said two other aspects of the integrated system have been more or less achieved. Forms of assistance have been systematically designed and family networks are involved in the rehabilitation process. However, staff remarked that they felt that these aspects could still be improved further.
Projected figures for service coverage (number of clients) have not been reached. Efforts to find volunteers and the involvement of these volunteers are insufficient, despite them being identified as priority areas.

According to the project description, women were singled out as a priority group to work with. It was envisaged, for example, that special publications would be produced, highlighting the problems of female alcohol abuse. They do not exist. Moreover, no database containing information on drug and alcohol abuse in the city of Vilnius has been created, so the evaluators were not able to collect data for drug and alcohol abuse in the city.

Thus, the majority of the project objectives have only been reached to a certain extent and further work is required in order to reach these objectives. One of the major obstacles to the project objectives being reached is undoubtedly the high turnover of the staff working at the centre, meaning that there has not been the desired continuity that would have helped to achieve these objectives more quickly.

4.2.3. Recommendations

The first step towards developing this type of centre in other municipalities should be to focus on the assessment of possibilities to establish inter-institutional cooperation and the potential obstacles to this. A detailed plan focusing on inter-institutional cooperation, client transfer, and the continuity of assistance, ‘incorporating’ new services into the network of community services should be worked out. Therefore, for the purposes of establishing such a centre, an inter-institutional group should be formed that includes representatives from all organisations/institutions involved in dealing with this particular problem/service area. The way that this cooperation should work should be clearly documented and an analysis of the functions of all the institutions that may be involved in the cooperation should be conducted.

The idea of providing such services in a systematic way could be passed on to other municipalities. They could adapt it to meet their own circumstances and needs. The demand for such services is obvious in Lithuania but is satisfied to very low degree; therefore, the replication of such centres would have a real impact in Lithuania. In most of the municipalities those suffering from alcohol and drug abuse may only apply/go to medical care establishments some of which have AA groups. However, no forms of complex assistance are offered in these municipalities. If centres like ‘Parama’ are going to be replicated those setting up the cen-
tres must endeavour to employ highly motivated people and should therefore pay particular attention to the recruitment of staff.

In the opinion of the manager of ‘Parama’, supplementing the current terms for obtaining social assistance could serve as a means for motivating the clients to become involved in the rehabilitation process. For example, those who are suffering from alcohol and drug abuse might be made to visit to a social rehabilitation institution in order that they are eligible to receive their social benefits.
4.3. Vilnius training centre for people with mental disabilities “Mes esame”

4.3.1. Findings

<table>
<thead>
<tr>
<th>Legal status</th>
<th>This is the only one of the 14 centres that is not funded from a municipal budget, but is rather a public entity in its own right established by the municipality.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Projected objectives</td>
<td>The key objective of the centre is the efficient integration of mentally disabled people into community life, which includes helping them to obtain vocational skills, providing social and psychological rehabilitation as well as training for them in terms of self-help.</td>
</tr>
<tr>
<td>Clients</td>
<td>In 2002, the number of clients, as compared with the estimated number, was considerably higher. The number of clients at the centre is about 62 per month.</td>
</tr>
<tr>
<td>Other results</td>
<td>This is the only institution in Lithuania that provides occupational training services and employment at the centre, or in the open labour market. The services provided by the centre form a complete employment system, including an assessment of their abilities to work, finding the appropriate courses for them in terms of professional training, and finishing with finding a regular job. One of the original objectives of the centre was to create an expert training centre that could be used to spread the centre’s expertise in working with disabled people to others.</td>
</tr>
<tr>
<td>Staff</td>
<td>The number of staff is higher than originally envisaged in the initial stages of the project. Staff members working directly with the clients include 14 social workers, 11 occupation specialists, 0.75 psychologist, 0.75 kinesis-therapist, 1.0 nurse, 0.5 physical training teacher</td>
</tr>
<tr>
<td>Financing/payment of services</td>
<td>Throughout the existence of the centre neither the number of the clients and services provided, nor the number of staff working at the centre was stable. This is had an impact on the cost of the centre. The costs of running the centre are relatively high and financial problems can be foreseen. The clients contribute to approximately 4% of the total operating cost.</td>
</tr>
<tr>
<td>Change in objectives and trends in the present activities</td>
<td>It has been unrealistic to think that the centre can help find jobs for a large number of clients in the free labour market. Therefore, the centre is currently discussing the possibility of obtaining social enterprise status. This will increase employment opportunities and their ability to form new classes etc.</td>
</tr>
</tbody>
</table>
4.3.2. Conclusions

The majority of the objectives of the centre have been achieved. Only the objective of establishing a methodological training centre for experts has not been achieved. The centre is currently under pressure to modify its activities and objectives, given how hard it is to find employment in the free labour market, as well as an increased demand from disabled people to live independently, i.e. the projected activities must be supplemented with new ones, due to a demand for new services which have emerged. The issue of whether or not to open a methodological training centre for experts remains open and as yet no decision has been taken.

The number of personnel is much higher than planned in the project because the centre has modified its activities, new functions have emerged and there has been an increase in the number of clients. The centre has changed its status from being institution funded by the municipal budget to being a public office. This has meant contributed to an increase in the number of additional responsibilities for staff as well as their workloads. Costs per client are quite high considering that non-residential care services are provided here and clients are only at the centre during the daytime. However, the specialists of the centre often have other roles, for example, the person responsible for interdepartmental cooperation, or for disseminating the centre’s methodological experience to other centres. It constitutes additional workload for workers as well as additional expenses for the centre.

The centre is particularly important in terms of the raising public awareness of such services and their significance, also, in terms of the alternatives to residential care services. It serves an as impetus for the development of the services in Lithuania.

4.3.3. Recommendations

The replication of this model would work well in the municipalities of major cities because:

- The services are quite costly, and the financial potential of small municipalities (due to the procedure of the municipal budget formation) is way lower than that of the municipalities in cities;
- Substantial resources are required for the development of such services;
- It will be problematic to sell products in rural locations due to the fact that markets, as is the purchasing capacity of rural populations;
- It is not clear whether what the demand in terms of clients will be for such services;
Taking into account the living standards of the populations living in rural areas, in the regions, they would not be able to pay for the services.

Replication of the centre’s move to get social enterprise status is advisable if possible.

The type and number of handicrafts produced in each municipality should depend upon local demand for such products in the municipality.

The development of such a centre should be undertaken in conjunction with the development of self-contained residential units so that the elderly can live independently within the community.
4.4. Vilnius: Šeškinė Day Care Centre "Atgaiva"

4.4.1. Findings

<table>
<thead>
<tr>
<th>Legal status</th>
<th>The centre is a unit of an entity funded from the budget of the municipality, and it is not a legal person as had been foreseen in the Project.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Projected objectives</td>
<td>The main goal of the project is to improve the social conditions of elderly and disabled people who live in Šeškinė residential district. This overall goal is broken down into a number of objectives:</td>
</tr>
<tr>
<td></td>
<td>• To develop premises where elderly and handicapped people can communicate and avoid social isolation</td>
</tr>
<tr>
<td></td>
<td>• To resort to various means in order to encourage elderly and disabled people to visit the centre.</td>
</tr>
<tr>
<td></td>
<td>• To provide all type of practical social services, such as catering, laundry, etc.</td>
</tr>
<tr>
<td></td>
<td>• To provide consultancy on health issues</td>
</tr>
<tr>
<td></td>
<td>• To provide social and psychological consulting services</td>
</tr>
<tr>
<td></td>
<td>• To organise various activities, such as exhibitions, concerts, and lectures on various topics, etc.</td>
</tr>
<tr>
<td>Clients</td>
<td>The projected capacity of the centre was 50 clients; today around 42 clients use the centre on a daily basis.</td>
</tr>
<tr>
<td>Other results</td>
<td>The project was to have a focus on providing services to the elderly and people with major disabilities. However, the majority of clients in the centre are of a younger age and are fully independent people, there are actually no disabled people using the centre.</td>
</tr>
<tr>
<td>Staff</td>
<td>It was originally proposed that there would be five members of staff. Today there is a total 11 (7 of these are home care personnel that got transferred to the centre in 2002).</td>
</tr>
<tr>
<td>Financing/payment of services</td>
<td>The management finds the funding for the centre almost sufficient, and no direct financial problems are being faced. The clients do not pay for the services at the centre.</td>
</tr>
<tr>
<td>Change in objectives and trends in the present activities</td>
<td>The centre has not changed or expanded its activities. The transfer of the home-care personnel constitutes more of an organisational change, and has no direct impact on the objectives and guiding principles for the centre.</td>
</tr>
</tbody>
</table>

4.4.2. Conclusions

The centre has helped to improve the quality of life of those elderly people visiting the centre. It has achieved most of the projected objectives with the exception of providing consultancy services on health issues, and consultations with a psychologist.
However, the centre makes no effort to involve people who are well advanced in age and the disabled in its activities, as was planned in the project. It is possible to predict that if more dependent clients visited the centre this would increase running costs, for example extra staff and transportation costs and more intensive consulting services. Therefore, the primary focus is on elderly people who are more independent. However, day care services for independent elderly people may be provided in more flexible, more diverse and less costly forms, as such clients are able to use public transport, etc.

The current activities of the centre have been modified in comparison with the projected objectives, as the present objectives and the range of services include home assistance services. Such changes may be taken as a rational step in that the said services will enable the centre to get closer to less independent clients and possibly to get them involved in the activities of and events arranged by the day centre.

4.4.3. Recommendations

The centre should target clients who are less independent, as their specific circumstances contribute to their high degree of isolation in the society. This would require providing transportation services, escort services, and adapting their environments. The provision of information, consultancy, leisure time, and other services to people who are more independent could be undertaken by boroughs and NGOs. Laundering or showering services could be provided in a centralised way via public utility companies. At such centres, independent clients could be offered just, for example, household services, such as laundering, showers, etc.
4.5. Education Centre for Disabled Children in Molėtai Municipality

4.5.1. Findings

<table>
<thead>
<tr>
<th>Legal status</th>
<th>The centre is funded from the municipal budget, more specifically by the culture and education unit of the municipality, as was envisaged by the project.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Projected objectives</td>
<td>The key objective of the centre is to help children and young people with mental disabilities to lead an independent life according to their abilities and possibilities, reducing the load from their parents and foster parents. This includes:</td>
</tr>
<tr>
<td></td>
<td>• Providing mentally disabled children and young people with adequate training.</td>
</tr>
<tr>
<td></td>
<td>• Developing social rehabilitation services, training children to lead an independent life after they leave the training centre</td>
</tr>
<tr>
<td></td>
<td>• Helping families to educate and train their children</td>
</tr>
<tr>
<td></td>
<td>• Training families how to behave with mentally disabled children</td>
</tr>
<tr>
<td></td>
<td>• Providing families with psychological assistance</td>
</tr>
<tr>
<td></td>
<td>• Integrating young people into community life during their stay in the training centre</td>
</tr>
<tr>
<td>Clients</td>
<td>The original intention was to provide assistance to 25 children at a time; this target has been met during the last couple of years.</td>
</tr>
<tr>
<td>Other results</td>
<td>Clients of the institution are disabled children and youngsters from 10 to 20 years of age with more pronounced mental or psychological disabilities, while those with minor disabilities have been integrated into normal educational establishments. Today children and youngsters with medium- and high-degree as well as complex disabilities attend the centre.</td>
</tr>
<tr>
<td>Staff</td>
<td>It was planned that there would be 19 positions at the centre, an average of 24.5 staff are employed at the centre. It has not been possible to employ a social worker due to a lack of resources.</td>
</tr>
<tr>
<td>Financing/payment of services</td>
<td>The cost of employing additional staff has of course increased the operating costs of the centre. There has also been an increase in maintenances cost for the building. The centre received additional funds during 2002. The services provided by the centre are free of charge.</td>
</tr>
<tr>
<td>Change in objectives and trends in the present activities</td>
<td>The centres has not changed or expanded their objectives. There has been a slight adjustment of activities i.e. the inclusion of pre-school children at the centre.</td>
</tr>
</tbody>
</table>

4.5.2. Conclusions

In terms of objectives, the majority of project indicators were achieved. The main weakness is insufficient work with the family, for example, assistance to the family...
in training and educating children and teaching parents how to behave with them. Moreover, the majority of parents from rural areas are described as so called ‘problem families’ who lack the motivation to participate in any training or to acquire knowledge and skills. The project particularly emphasised the objectives of providing assistance to parents and families; however, there is a problem of the parents’ participation in the process of training and consulting, because they refuse to be involved in this process. It is difficult to establish closer links with parents in particular among problem families or because some families have such heavy workloads in rural areas and therefore do not have the time to take part in any training activities. On the other hand, changes in the law have contributed to changes in the priorities of some centres. Since the centre is not a social service centre but rather an educational institution, the main aim should be to train children. Work with families is just one of the aspects of implementing such a project.

The centre pays a lot of attention to maintaining disabled children’s rights to education. The municipality has two mini buses and two drivers who bring children from the whole region to the centre. Other municipalities do not usually pay so much attention to this problem and such services are therefore inaccessible to the children from other regions. The centre does not have sufficiently large or equipped premises and consequently cannot fully provide certain services or not at all in some cases, for example, for the development of cooking skills.

Due to the absence of employment establishments for young adults who are admitted to the centre only up to the age of 21 it is not possible to ensure the continuity of services.

Since the municipality is not in the position to provide other educational possibilities for children of pre-school age with higher degrees of disability, there is a need to admit such children to the centre.

Due to small numbers of children of young adults in the centre, it does not organise training in wood work, for which special machines were procured, in accordance with the original project objectives.

According to the regulations of the Ministry of Education, education groups are formed without taking into consideration the disabilities of children. The groups are too large for children with high degrees of disability. Staff numbers, therefore, are too low for the education and care of such children. Since the workload of the staff is very heavy, it is difficult to ensure the adequate quality of work.
The inconvenient location of the centre, in a remote rural area, does not readily facilitate the social integration of children.

4.5.3. Recommendations

Certain aspects of this model should be replicated in other municipalities in terms of the way to organise team and individual work. However, in its entirety this institutional model should not be replicated when considering the inconvenient rural location. Such a centre should ideally be established in a town or settlement, or even better - in a kindergarten or school. In terms of the institutional structure and costs of running such a centre, the costs would be lower if the centre functioned as a subdivision of a kindergarten or school, thus eliminating the need for such a large maintenance/technical staff. There is no doubt that such types of centre should be established in a municipality centre, or in a larger settlement. This is critical in terms of the integration of disabled children into the community and the establishment of better links between them and the society.

For the purpose of establishing such centre in the municipality it is necessary to work out the demand for services according to different age groups of children. If the municipality cannot educate small (pre-school age) children in kindergarten groups, education groups for pre-school and school age children should be formed in such a centre.

When establishing such centres consideration should be given to providing transport services to clients and to how they will be financed because inhabitants of rural areas are not necessarily able to take their children to the centre. As a rule, one means of transport is not enough for this purpose, because the regions are large.

The size and type of premises necessary for organising the training processes and for providing all of the required services must be considered carefully.
4.6. Anykščiai Education Centre for Disabled Children

4.6.1. Findings

<table>
<thead>
<tr>
<th>Legal status</th>
<th>The centre is a subsidiary of the municipal secondary school and is supervised by the department of Culture and Education in the municipality</th>
</tr>
</thead>
<tbody>
<tr>
<td>Projected objectives</td>
<td>The overall objective of the project is to assist disabled children, by:</td>
</tr>
<tr>
<td></td>
<td>• Providing assistance to families in resolving pedagogical, social and medical problems</td>
</tr>
<tr>
<td></td>
<td>• Stimulating the self-confidence of the mentally disabled</td>
</tr>
<tr>
<td></td>
<td>• Preparing individuals for independent life and work in society</td>
</tr>
<tr>
<td></td>
<td>• Teaching individuals to understand the world and to be fully valued members of the community</td>
</tr>
<tr>
<td></td>
<td>• Developing individual training programmes for each child adapted to their own circumstances</td>
</tr>
<tr>
<td></td>
<td>• Avoiding the placement of disabled children in residential care institutions.</td>
</tr>
<tr>
<td>Clients</td>
<td>The centre was set up to provide assistance to 25 children at a time, aged from 10 to 21. Today 40 children use the centre.</td>
</tr>
<tr>
<td>Other results</td>
<td>The centre believes that it would also be a good idea to have a pre-school training class.</td>
</tr>
<tr>
<td>Staff</td>
<td>It was envisaged that 19 staff would be employed. The centre lacks a psychologist and a nurse in its staff, but it has a teacher of music and a kinesitherapist. The total number of staff is approximately 17.</td>
</tr>
<tr>
<td>Financing/payment of services</td>
<td>The centre has faced financial problems, but last year financing from the municipality proved to be sufficient.</td>
</tr>
<tr>
<td>Change in objectives and trends in the present activities</td>
<td>The pre-school children education group is an addition to the original project activities; otherwise the project has progressed as planned.</td>
</tr>
</tbody>
</table>

4.6.2. Conclusions

The planned objectives of the centre were reached. Forming one more group of pre-school age children expanded the projected activities. As a result, the staff numbers increased and certain supplementary activities were provided in view of the needs of younger children.

Having formed a pre-school group, the staff numbers increased: 1 specialised teacher, 1 assistant and 1 educator.
The clients as well as the staff of the centre need the services of a psychologist but it does not seem as though a psychologist will be employed in the near future.

Not all those that need to have access to the centre do because there are considerable transport problems. One means of transport is insufficient to render services to all children of the region. Therefore, the children from one part of the region are not taken to the centre. Annual transportation costs amounted to LTL 15.6 thousand (about 6 per cent of the total maintenance costs of the centre). The parents paid a total of LTL 6.6 thousand in charges in 2002 for transportation.

The applications of some potential clients were rejected because there is no way to transport them to the centre.

This region has very favourable conditions for providing social services to the disabled on the whole: the county established a home for the disabled where a group of them can live independently in the community. Those that are willing can live at this home. Others can attend occupation groups that are a part of this group home. A complex system of social services provided to the disabled from early childhood to older age has been established in the municipality.

The Society “Viltis” plays a very important role in the sphere of work with families of disabled children. This Society motivates and encourages the involvement of parents in the process of training their children in tandem with the staff of the centre.

4.6.3. Recommendations

The project objectives of the centre were fully realised and proved to be realistic. The only slight change relates to the present expansion of the objectives following the establishment of a pre-school education group.

The centre functions as a key node in the delivery of a complex system of social service provision within the municipality. It may be replicated into other municipalities as a successful model offering continuous services, effective assistance and low servicing costs.

In order to achieve better training results in terms of enabling the mentally disabled children to become more independent and to live on their own as far as possible, it is important to begin their education and training at the youngest possible age. Therefore, the centres of such type in rural regions should host children aged from
4 to 21. In large towns, in which it is expedient to have more than one training institution, centres should be established for groups of clients of different ages.

When establishing such centres careful consideration should be given to providing transport services: that is, whether such service will be provided by the centre and financed with its proceeds, or whether it will be organised in other ways, for example, involving the transportation services of social support units of the municipality.

The Head of the centre believes that in the early stages of establishing a centre it is very important to give careful consideration to all the services that are needed in order to provide assistance to children and young adults of different ages and with different disabilities. If this is not done it will be necessary to alter the staff structure which can be difficult and can hinder the process of training the children.
### 4.7. Švencionys Social Rehabilitation Centre for Disabled Children

#### 4.7.1. Findings

<table>
<thead>
<tr>
<th>Legal status</th>
<th>The centre is a subsidiary the municipal’s “Gandriukas” kindergarten, which is under supervision of the Department of Culture and Education of the municipality. The centre is funded by the municipality.</th>
</tr>
</thead>
</table>
| Projected objectives | The centre will comprise four subdivisions: a special kindergarten group, a group for school-age children, occupational services for the disabled and the accommodation home. The specific objectives are to:  
  - Guarantee medical and social rehabilitation services for the disabled children.  
  - Guarantee home services for these children  
  - Develop abilities of children and considering their needs and wishes.  
  - Teach children skills that will enable them to live in local communities. |
| Clients | The planned number of clients (15) has not yet been attained |
| Other results | It was projected that the clients of the centre will be children aged from 3 to 8 and would include those that are mentally and physically disabled. The majority of children should have cerebral palsy. Presently, children aged from 5 to 15 with mental and complex disabilities attend the centre. |
| Staff | The staff of the centre admitted that the centre had numerous staff formation problems, because of the failure to consider in advance the number and type of specialists required at the centre. Today there are 9.5 employees it was originally planned that 6 would be employed. |
| Financ-ing/payment of services | Financing provided by the municipality is sufficient. In 2002, the Centre did not have additional funds, other than the municipal sources of financing (with the exception of charges collected from parents for transport services). |
| Change in objectives and trends in the present activities | The present activities of the centre actually conform to the implementation of the project objectives. |

#### 4.7.2. Conclusions

The majority of the planned objectives of the centre were reached. Due to the lack of financial resources one activity that was originally planned was not realised, that is the delivery of medical services from a physician. However, at present the centre does not have a physician and the aforementioned services are not provided.
Given the degree of disabilities the children who attend the centre have, the special teacher has a lot of work to do. This is likely to reduce the efficiency of the education services that are provided. The experience of this and of other similar centres clearly shows that the workload of specialists is disregarded when it comes to recruiting staff. The size of groups should be determined by the extent of the disabilities of the children.

Since 2000, in order to ensure accessibility to the centre transport services are provided for the children. The costs of providing the transport services are quite high compared with the total maintenance costs of the centre (they account for about 4 per cent). Therefore, when establishing such types of centres the aforementioned costs should be calculated and a way of funding transport services should be found. Today the transport costs for the centre are excluded from the total budget of the centre as they are financed directly from the municipal budget.

The second group for children of pre-school age was formed in the centre. Some specialists think that serious consideration should be given to the situation when these children reach the age of 21. In order to ensure the continuity of training services, the occupational therapy centre should be established to solve this issue.

The success of education depends upon the age at which the education of the child begins. The records of all pre-school age children must be maintained to ensure their timely integration into the education system.

4.7.3. Recommendations

The model of the centre should be adjusted because some of its objectives were not reached (delivery of medical services, provision of home help for children). It was a good idea to establish the centre under the auspices of the kindergarten. This automatically creates preconditions for communication between the disabled and other children, contacts, understanding each other, etc.

For the purpose of establishing such centre, the delivery of transport services must be considered including all the associated costs of providing such a service.

The Project plans must include a breakdown of staff numbers and the structure of the staff; otherwise the staff recruitment problems are likely to arise. The size of education groups should be predetermined by the extent of the disabilities of the children.
4.8. Švenčionys Temporary Residence for Children

4.8.1. Findings

<table>
<thead>
<tr>
<th>Legal status</th>
<th>The home is a subsidiary of the municipal ‘Social Services Centre’ and is funded by the municipality.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Projected objectives</td>
<td>This centre was established to provide assistance to children from problem families. Its services cover temporary accommodation services, protection against child neglect and avoiding in-patient care services.</td>
</tr>
<tr>
<td>Clients</td>
<td>According to the plans the centre should host children aged from 6 to 16 years. 15 children can live in the centre at a same time. The centre can provide assistance to about 60 children per year. Presently 15 children live in the centre. Only 24 children per year (on average) received assistance in the centre during the period from 1998 to 2002.</td>
</tr>
<tr>
<td>Other results</td>
<td>The centre has developed a new assistance program “Linas”, which in addition to the children from the centre helps those from problem families of the community. Moreover, on the initiative of the centre, a non-governmental organisation “Parents Against Drugs” was established</td>
</tr>
<tr>
<td>Staff</td>
<td>There are 6 employees it was originally planned that there would be 7. The centre has not been able employ a psychologist. There is high demand for the services of a psychologist in the treatment process.</td>
</tr>
<tr>
<td>Financing/payment of services</td>
<td>The management of the centre assessed the present financing of the institution as “almost sufficient”. The clients’ parents do not pay for services. However, there are plans to introduce charges that some parents will pay.</td>
</tr>
<tr>
<td>Change in objectives and trends in the present activities</td>
<td>There are no changes in the original objectives or targets of the project. The centre will attempt to establish the unit to manage the selection and training of foster parents.</td>
</tr>
</tbody>
</table>

4.8.2. Conclusions

Projected objectives have been partially reached. About forty per cent of clients receive care in residential institutions or in families other than their own. This is because most of these children come from problem families and their parents, for example, might be alcoholics. Assistance provided by the centre and other municipal services to such problem families is not sufficiently developed.

Irrespective of the principal objectives of the centre, which were to identify the reasons of conflicts in the family, help the families to settle their problems, the focus
of the work of the staff of the centre is the actual assistance rendered by the centre.

Politicians of the municipality as well as the staff of the centre are of the opinion that such institution must be established within the municipality. In provides children with shelter, when they cannot return home because of extreme and unfavourable circumstances with regard to their families. Such institutions should be established within each municipality.

The number of clients in temporary residence depends greatly upon the work of the children’s rights protection service. While sometimes the number of clients in the centre is very low, there are times when the centre is hardly able to host all those who need help.

It has been acknowledged that the strengthening of work with families is needed, but it is rather difficult to reach this objective just based on the endeavors of the centre.

The centre is planning to develop work with the family by establishing adult discussion groups.

To improve the assistance provided to children a psychologist and leisure specialist need to be employed. There are few opportunities to organise leisure activities for such children.

4.8.3. Recommendations

In general, the replication of the model of this institution would not be expedient, because now such institutions are established in nearly all municipalities: 38 municipalities have temporary care or children’s homes, weekly children’s homes have been established within 38 municipalities; there are temporary care homes that have been opened by 11 non-governmental organisations, and 44 domestic families provide temporary care.

In terms of replication of the institution’s business methods and organisational experience this would not be recommended as the institution has not achieved outstanding results in the sphere of development of working methods (work with families in particular), because only about 66 per cent of the children return to their families (compared with 80 per cent in other analogous institutions of the country).
The idea of establishing a unit managing the selection and training of foster parents might be raised when thinking about the replication of aspects of this centre.
4.9. Utena Education Centre for Disabled Children

**Utena social support and education centre for children**

The centre is an educational establishment of the municipality and as such is funded by the municipal budget. The centre provides additional social training and social care services. The centre is subordinate to the municipal culture and education division. At the outset of the project it was envisaged that only one subdivision be established and, that is the centre for training children with mental disability, however, later these plans were adjusted. At present the centre comprises three subdivisions: Special daytime training unit; Provisional children’s care group; Family crisis group. The administration and maintenance of all these services is provided jointly to all three units, with the exception of the group of specialists directly dealing with clients, which has been formed separately, whereas the first, second and third units have the same staff.

### 4.9.1. Findings

<table>
<thead>
<tr>
<th>Legal status</th>
<th>This department functions as a subdivision of an institution funded by the municipality - Utena Social Support and Education Centre for Children.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Projected objectives</td>
<td>The key objective of this centre is to provide assistance to children and youth adults (10-20 years of age) with mental disabilities and to render training, social and medical services to their families. This includes:</td>
</tr>
<tr>
<td></td>
<td>- Social integration of children and young adults</td>
</tr>
<tr>
<td></td>
<td>- Working with mentally disabled clients according to individual programs, particular attention to be paid to the development of skills to enable the individual to live an independent life in the community.</td>
</tr>
<tr>
<td></td>
<td>- Providing qualified assistance (medical, pedagogical, psychological and legal) to children and young adults</td>
</tr>
<tr>
<td></td>
<td>- Prevention of placement of mentally disabled children in the in-patient care establishments.</td>
</tr>
<tr>
<td>Clients</td>
<td>The number of average number of clients that have used the centre since its establishment is slightly smaller than projected. On average, 27 children attend the centre every year</td>
</tr>
<tr>
<td>Other results</td>
<td></td>
</tr>
<tr>
<td>Staff</td>
<td>The current number of staff is smaller than envisaged in the planning stages it is 18.5 compared with the initial 25.</td>
</tr>
<tr>
<td>Financing/payment of services</td>
<td>The management of the centre assessed the present financing of the institution as “almost sufficient”. In the management's opinion, the costs of the centre considerably exceed the costs envisaged at the planning stage</td>
</tr>
<tr>
<td>Change in objectives</td>
<td>Particular attention of the centre is paid to improvement of the specialists’</td>
</tr>
</tbody>
</table>

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* Lithuanian Social Policy & Community SSD Project – evaluation
4.9.2. Conclusions

The centre implemented a project that meets all the project objectives. Children and families are provided with high quality and effective assistance. The system of teamwork is also well developed and organised. Employees of the centre are strongly motivated to seek further development and are planning to initiate the establishment of a methodological centre in connection with this institution.

Certain parameters of the centre were slightly modified. The number of employees diminished upon the reduction in number of administrative and maintenance staff when the provisional children’s care group and the crisis centre were established under the same auspices. At the outset of the project a psychologist and kinesitherapist were excluded from the establishment, but finally the centre engaged their services.

The centre also needs a logaoedics and contact assistant for work with children suffering from serious disabilities. The establishment of such a centre should include the aforementioned specialists.

Since the rooms used for training exercises are very small, the groups of clients are also small. If the premises were larger, it would be possible to form larger groups. On the other hand, considering that the development impairments of the clients are complex it is best to keep group sizes small even if the premises were larger.

4.9.3. Recommendations

It might be useful to share with other similar institutions the experience the centre has had in terms of the teamwork involved in organising assistance to the child as well as to the family.

The way to share such experience might be to develop a methodological education centre associated with this institution, and engage specialists from Utena County who work in this sphere.
4.10. Utena Temporary Residence for Children and Family Crises Group

4.10.1. Findings

| **Legal status** | This is a subsidiary of municipal institution – Utena Children’s Social Support and Education Centre and as such is funded by the municipality. This centre emerged from the children’s temporary care home established by resolution of Utena municipality in 1997. |
| **Projected objectives** | The principal objective of this centre is to provide social, pedagogical, psychological assistance to children who find themselves in critical situations, to assist in normalising family relations and to return a child to the family. Other objectives:  
- To protect children against violence, neglect, including sexual coercion.  
- To provide appropriate living and training conditions for children who find themselves in critical situations and are deprived of parental care.  
- To seek positive changes in the biological family of a child.  
- To find foster parents for a child who cannot return to his family  
- To place children in residential care institutions in exceptional cases  
Furthermore there is a range of specific objectives concerning the work with the family. |
| **Clients** | It was planned that the social support department should provide temporary accommodation services to 35 children and 3 families. In 2002 the temporary care services were rendered to 72 children; services in the family crises centre – to 14 women with 28 children |
| **Other results** | At present the centre is working in three directions: work with children; work with family; work with a child and family outside the centre. |
| **Staff** | The 19 staff working at the centre today matches the initial staff plan. Given the current needs of clients, the centre also needs a lawyer. There are no employees working with problem families of children who live in the centre. |
| **Financing/payment of services** | The numbers of clients in the centre kept growing during 1998-2002. Meanwhile, staff numbers were being reduced year-by-year and only in 2002 did they increase slightly. The management of the institution assessed the present financing as “almost sufficient”. |
| **Change in objectives and trends in the present activities** | Seeking efficiency in the delivery of services, more attention should be paid to providing preventive services to the community and families; however, the number of staff needed for the development of such services is insufficient. The centre is planning to enlarge the family crisis group, because these services are in great demand and they are effective. |
4.10.2. Conclusions

The centre has practically reached its project objectives. It has accumulated extensive experience of teamwork and work with families seeking to return the child back to the family. Things are moving ahead. Work with the family and activities related to returning the child back to the family are continuously improving, as those involved are looking for new and more effective ways to do so. One of the newly envisaged activities is the development of preventive work with families within the community. Meanwhile these activities are limited by lack of staff and financial resources.

Employees of the centre are strongly motivated to improve their work seeking to return the child back to his family and to avoid placing children in residential care. Experience of the centre gained particular importance after the Ministry of Social Security and Labour approved the Regulations on Children’s Temporary Care in 2001. Almost all municipalities lack experience of effective work with problem families.

The surveys revealed that foster parents do not understand that the purpose of child guardianship in their family is ultimately to return the child back to their biological parents. Moreover, they do not understand how achieve that.

4.10.3. Recommendations

Many municipalities have established temporary care homes or groups for children. But, as a rule, the work with family is not sufficiently developed. Irrespective of the formal focus of the need to return the child back to the family, there are, in reality, not enough staff trained who know how to do that. Experience of the centre in the sphere of complex and systemic teamwork with the family would be very useful to the children’s care institutions in other municipalities.

The centre has well a well developed system of teamwork and experience in the use of methods of work with the family in the community, as well as strongly motivated staff. Therefore, it would be expedient to establish a methodical unit based at the centre that can be used as a means of sharing experience and providing training. This experience will be of great demand among specialists who work with children.
## 4.11. Švenčionys Reception Centre (AGENCY)

### 4.11.1. Findings

| **Legal status** | This centre is a unit of the social security division in the municipality engaged in planning and coordinating the provision of social assistance in the region. |
| **Projected objectives** | This Service is responsible for the clear identification of the client’s problems, providing consulting services, advice, and ways of settling problems, mediation between different institutions in resolving the problems. The activities include:  
- collecting and analysing information about the social situation of clients and demand for social services in the region.  
- identifying and assessing social problems.  
- finding ways of resolving problems.  
- informing the municipal Board about social problems in the region.  
- providing consultations on social matters. |
| **Clients** | Projected annual numbers of clients was about 1000. At present, compared with the projected figures, this number is considerably larger. In 2002 the Agency accepted 5219 clients |
| **Other results** | The Agency accepts people who apply for social services, as well as all those who need social support (payments, charity and technological assistance). In addition, much information is provided by phone. People who receive such information are registered as clients |
| **Staff** | At present the Service employs 4 social workers |
| **Financing/payment of services** | The total maintenance costs of the Agency declined marginally over the past few years compared with the costs incurred during the initial period of activities. |
| **Change in objectives and trends in the present activities** | At present the reorganisation of activities of the Agency is envisaged by delegating part of its functions to the social works’ organisers in the district municipalities (seniūnija). The number of functions performed by this Agency will diminish and the Agency will accept only those people who are referred by the social workers from district municipalities when they are not able to settle the problems there. |

### 4.11.2. Conclusions

The centre succeeded in implementing the established Project objectives, but now its structure is undergoing changes. The journey to the centre for the majority of clients is long as the centres is located a long way from the centre of the municipality (for example, a one-way ticket from the most distant area of the region costs LTL 6 for the potential beneficiary of social benefit, so he has to pay LTL 12 for the whole journey which makes up 10 per cent of the amount of social benefit). In view
of the above, part of the functions from Agency are delegated to the local munici-
palities (seniūnija).
As a result, the importance, structure and functions of the centre activities are be-
ing modified.

4.11.3. Recommendations

Given the circumstances described above, replication of the centre as a whole
would not be expedient. Consideration should be given to the possibility of replica-
tion of only certain aspects of working methods and work organisation. For exam-
ple, experience in casework and the development of networks.
4.12. Švenčionys Program for Former Prisoners

4.12.1. Findings

<table>
<thead>
<tr>
<th>Legal status</th>
<th>This Agency functions as a subsidiary of the Social Services Centre</th>
</tr>
</thead>
</table>
| Projected objectives | The principal objective is to facilitate the re-socialisation of people released from places of imprisonment.  
- To provide each person released from places of imprisonment with work and provisional dwelling in order to prevent them from re-offending.  
- Employment issues should be settled in cooperation with the labour exchange. If there are no opportunities for permanent employment, the possibilities should be provided for public works. |
| Clients | 10 people can live in the centre at a time and about 30 individuals can avail themselves of the services of this centre per year. 28 people used the centre in 2002. |
| Other results | Since majority of such clients released from imprisonment are alcohol addicts, the Agency employs staff that organises the required services. The centre initiated the establishment of AA, AL-ANON self-assistance groups for such people |
| Staff | At present the centre employs 5 members of staff. |
| Financing/payment of services | The total maintenance costs for the centre increased considerably over the last year. Clients have to pay for living in the centre and the costs of this depends upon their individual income. This covers 2.4 per cent of the annual cost for running the centre. |
| Change in objectives and trends in the present activities | Over the past few years the problem of alcohol and drug addition became particularly noticeable among people released from places of imprisonment. Therefore, it is necessary to employ a social worker to work with addicts. |

4.12.2. Conclusions

The centre practically implemented all of its objectives envisaged under the Project. Assistance delivered by the centre is quite effective: people get temporary or permanent shelter, or are provided with assistance in returning back to their families. Finding employment, however, has not been so successful due to the general unemployment problems of the region, as well as the general disposition of society towards former prisoners. However, as a result of the activities of the centre; the standpoint of society is changing in a positive direction. Nevertheless, successful attempts in finding temporary jobs stimulate integration and self-assistance.
There are few opportunities for organising the employment of former prisoners during their free time, however, this type of activity is necessary and should be developed.

The activities of the centre expanded considerably when the needs for new activities and services appeared. The numbers of employees of the centre increased due to the need to provide social rehabilitation services to alcohol or drug addicts.

The clients of the centre need help from psychologists but this service is not provided in the centre at the moment.

Staff qualifications in the centre are insufficient, and employees need training.

4.12.3. Recommendations

The centre has been slightly modified as an institution and there is the need to provide new services and forms of assistance. This should be taken into consideration when thinking about replication of the centre (see the Section “The newly formulated objectives and present trends of activities”).

On the other hand, centres of such type are no longer new in Lithuania, compared with the situation in 1998. Similar institutions are already functioning in certain municipalities. Every municipality should seek to establish its own organisational pattern. Such a pattern should be viewed only as a basis for further development and adjustments.

Consideration should be given to the replication of experience in the sphere of certain methods of work with a client and his environment. That is, experience of systemic and complex work with a client and his environment with a view to resolving the problems of employment, housing/shelter and returning to the family.
4.13. Švenčionys Home Delivery Service for Elderly

4.13.1. Findings

<table>
<thead>
<tr>
<th>Legal status</th>
<th>This Service functions as a unit of the social services centre which provides the elderly and disabled with home help</th>
</tr>
</thead>
</table>
| Projected objectives | The principal objective of this Service is to satisfy the home help needs of the elderly with a view to avoiding their placement in residential institutions. The Service engages in the following activities:  
- Training home-helpers.  
- Providing transport services to people who live in rural areas and farms.  
- Expanding the range of services provided (preparation of wood, machinery for agricultural or forest works, etc.).  
- Supply with facilities for the provision of new services |
| Clients | Projected annual number of clients was about 600. In 2002 the Service provided services to 792 individuals. |
| Other results | In addition to the delivery of particular assistance, home-helpers pay considerable attention to stimulating the self-assistance of the beneficiary of the services. |
| Staff | The Project envisaged employing about 100 staff for the purpose of this Service. Until 2001 the Service employed 41-42 staff, by now this number has reduced to 35. The municipality is not in a position to hire more staff. |
| Financing/payment of services | Total maintenance costs for the institution fluctuated slightly between 1998 and 2002. The situation has stabilised over the past two years. The clients pay for services according to their income and family structure. The client payments made up made up to 3.7 per cent of the total costs of the institution. |
| Change in objectives and trends in the present activities | There have been no major changes in the original goals and objectives of the project. |

4.13.2. Conclusions

The centre has fully implemented the objectives established in the project, and its activities are quite effective. The objectives and activities of the Service, however, have changed slightly: the Service acquired a new group of clients – the problem family with children which needs specific services; the different staff structure has been generated, and the social work organisers of local communities established the basis for the activities of this Service.
Home-helpers do not have sufficient qualifications.

4.13.3. Recommendations

The replication of the centre as a whole would be inexpedient, since analogous services have already been established within all of the municipalities.

The majority of people in Lithuania, in particular the elderly live in rural areas, therefore, the provision of household services, like those provided in Švenčionys municipality is of particular importance to them. Consideration should be give to the replication of the experience gained in organising the delivery only of certain services (for example, help with agricultural works).
4.14. Šiauliai Municipality Social Services Centre

4.14.1. Findings

<table>
<thead>
<tr>
<th>Legal status</th>
<th>The centre is an institution funded by the municipal budget.</th>
</tr>
</thead>
</table>
| Projected objectives | The purpose of the centre’s activities is to prevent clients being placed in residential institutions, plan community based social services and to contribute to the closing down of large institutions in the long run. The centre should take account of individual client’s needs and circumstances and should support and provide help to the disabled to enable them to live an independent life at home.  
  - This centre should integrate itself into the town’s social services network this would facilitate the diversification of non-residential care services.  
  - The project should finally guarantee the quality and diversity of social services making those that need social support feel more protected and safe, to this end the centre should provide psychological assistance |
| Clients | According to the original plans the centre’s clientele was to comprise adults over 18 years of age. The daily number of individuals who need support and services of the centre was envisaged to be some 70-80 people. At present about 20-30 clients visit the centre every day. |
| Other results | The centre is planning to provide sick people with home nursing services. Such services are in great demand, but now this objective is not being implemented due to the lack of resources and absence of the possibility to allocate funds between social support institutions and health care establishments. |
| Staff | There are currently 27 employees working at the centre. The original plan was to employ 39 employees. The centre does not engage occupational therapy specialists. Furthermore, the centre had no possibility to increase the number of home-helpers as was planned. |
| Financing/payment of services | The centre is currently trying to attract new sources of financing or volunteers for the purpose of developing activities. The fees clients pay account for 3% of the total operating costs. |
| Change in objectives and trends in the present activities | Within two months of opening the centre its structure was extended to include two more social services institutions – the support service and the recreational service. The centre is looking for new and better forms of organising the servicing of clients. |

4.14.2. Conclusions

The projected objectives were practically implemented. Services rendered by this centre are in great demand within the community. Clients of the centre are satis-
fied with services provided to them, as they help to improve the quality of their life, make them feel needed and protected in the society.

Due to the financial situation in the municipality the personnel of the centre were not fully formed. With a view to rendering all planned services the centre attracted volunteers or engaged specialists according to special programs. The centre still lacks specialists, its employees’ workload is considerable and sometimes they are short of time or possibilities to work individually with the client.

One objective established under the Project remains not implemented, that is the delivery of home nursing services. The need for such services is great, however, due to lack of resources and absence of the possibility to allocate the funds between social support and health care institutions this objective is not realised.

The centre was modified, expanding its activities and now it hosts under its auspices two more services – the recreational and support service.

The centre does not yet work to improve the qualifications of employees who work in social services sector, but it has plans to develop these activities. The centre has experienced and qualified personnel and premises suited for training.

Šiauliai is a large town and one centre is not enough, therefore there are plans to establish one more centre to provide similar services in more remote districts of the town, and to guarantee better availability of services for the population residing in these districts.

4.14.3. Recommendations

Recently, social services centres were established in many municipalities (Vilnius, Klaipėda, Jurbarkas, etc.) with municipal bodies coordinating the delivery of social services. These centres apply different models of the organisation of services. It is difficult to say which centres operate more effectively, since such a comparative analysis was not carried out. In order to provide recommendations as to the replication of this centre, it would be expedient to compare its activities with the activities of other similar centres.

The network and organisation of the social services in the municipality is diversified and this model replicated in its entirety would not suit all municipalities.
The experience of Šiauliai Centre acting as the ‘umbrella’ for the provision of miscellaneous services, in the sphere of work with mentally disabled people in the community is obviously of value and should be shared with other municipalities. The development of a network of social services for mentally ill clients is very important in terms of the implementation of the programme for the social integration of people with disabilities.
5. **Stockholm University; Socialhögskolan**

5.1. **General comments**

Stockholm University; Socialhögskolan has performed a remarkable job working with the fourteen different projects in six municipalities. All heads of the centres, staff members and volunteers have pointed out how much they have learned from their Swedish teachers and trainers. The representatives of the municipalities have underlined how good cooperation has been with their Swedish colleagues.

The greatest successes of the project, from the participant’s point of view, have been the four study trips to Sweden. When you ask the participants to mention what they consider to be the most remarkable experience of the project, most of them talk about the study trips to Sweden.

The project can be separated into two different stages. One stage extends from the start of the project in 1997 to 2000 when Stockholm University delivered very intensive and extensive work in terms of essential training for those working in social service provision. Stage two extends from 2000 to 2003, where the work was more focussed on participating in project leadership, supervision, coaching and the implementation of a documentation system.

The overall conclusion must be, that Stockholm University; Socialhögskolan has done a very good job in delivering knowledge and training and has established very good partnerships with the projects, the municipalities and the Ministry of Social Security and Labour.

In an evaluation like this it is of course always possible to, with the benefit of hindsight, make suggestions on how some things might have been done differently. In this case:

- It could be a discussion about the balance between the theoretical and hands on experience in terms of the consultants work;
- Second, it could be a question about focus. Focus on the Swedish work and focus on the value of coaching the individuals and “Train the Trainers” activities;
Third, it could be a discussion of the relevant contents of the professional social work courses.

5.2. Findings

The activities of Stockholm University included the following:

- Project leadership
- National conferences
- Study trips to Sweden
- Ten week courses in Lithuania
- Seminars on special topics
- Coaching and Supervision
- Development and implementation of a case management system

5.2.1. Project leadership

Stockholm University has participated in the leadership of the project together with the Ministry of Social Security and Labour, PCU, the Mayors of the municipalities and the head of the centres. During the project period there have been twenty four meetings involving all the leaders.

5.2.2. National conferences

There have been five national conferences. The purpose of these conferences has been to transfer knowledge to everyone involved, to create professional networks and to promote and legalize the new methods of social work.

5.2.3. Study trips to Sweden

Between May 1997 and November 1998 Stockholm University arranged four trips to Sweden each of which lasted for three weeks. Approximately one hundred and ten social workers from Lithuania took part in these study trips. The aim of these study trips was to present an overview of modern professional social work and to inspire and create reflections for new ideas to the Lithuania social workers. The presentation of what modern social work consists of took place in different social institutions and the lectures were given by lecturers from Stockholm University and other experts from the field.

5.2.4. Ten week courses

During 1998 and 1999 Stockholm University together with the Ministry of Social Security and Labour and local authorities arranged four ten week courses in
Lithuania. About one hundred and twenty people participated in these courses. Most of them had participated in the study trips to Sweden and were employed at one of the project centres. The lectures were given by lecturers from Stockholm and Vilnius Universities. The titles for the four ten-week courses were 1) Knowledge of the client 2) Knowledge about your own society 3) Knowledge about your self.

5.2.5. Seminars on special topics

Between 1999 and 2000 Stockholm University, together with the local centres and lecturers, arranged more than twenty seminars on special topics. These seminars were held locally and about twenty five people participated in each seminar.

The themes for the seminars were very varied, and included for example, ‘Crisis when you give birth to a handicapped child, Family work, Education for parents, Educational methodology, Handicap and sexuality, Elderly with limited physical mobility and ability to leave their homes, Treatment of drug abuse, Sexual abuse of children and Work Management and Leadership.

5.2.6. Coaching and Supervision

The aim of this part of Stockholm University’s efforts has been to introduce coaching and supervision as necessary tools in the development of social institutions. Member of the centres’ staff should be able to provide good treatment to clients and be of help to other members of staff in terms of handling the implementation of the documentation system.

During the last one and a half years of the project one Swedish supervisor has been responsible for the supervision of the five centres who work with disable children and grown-ups and two other Swedish supervisors have been responsible for the rest of the centres. The Swedish supervisor responsible for the institutions for disabled people coached and supervised the education of one person from Lithuania.

A two day management training course was held for the Heads and Deputy Heads of the centres. The course consisted of five different training modules and twenty five people participated in the course. The modules of the management-training course included: Leadership profiles, Group processes, Employee Development Talks, Conflict Resolution, Operational Objectives and Municipal Financing. Three experts from the Swedish team participated as lecturers.
5.2.7. Development and implementation of a case management system

The introduction of the case management system constituted a large proportion of Stockholm University’s effort in the project. The purpose of the case management system has been to offer a documentation system that is effective and easy to use, where the case manager and the centres document the necessary information about the client, the forms of treatment they receive and the institution.

One consultant employed by Stockholm University spent on average three months per year on the development and implementation of the case management system. Two other consultants created and developed the case management system application.

The cooperation between the consultants and the centres focused on meeting the needs of the centres, training staff to use the paper version of the system, implementing the electronic version, holding two two-day seminars and providing coaching and supervision.

5.3. Conclusions

The activities that were carried out throughout the duration of the project seem to match the project objectives very well. In chapter four, the evaluators have reported on each of the fourteen projects, focussing on the extent to which the original project objectives have been reached and the extent to which the objectives have been developed. In most of the cases the projects can be qualified as a success, but some still need to develop the professional skills of their staff.

5.3.1. Project leadership

It is possible to say that without doubt the Swedish team leaders participating in the leadership of the project were good project managers, paying careful attention to the activities being conducted under the umbrella of the programme. They have also provided great help to the municipalities in the way that they develop and handle the professional social work being carried out at the centres.

5.3.2. National conferences

The national conferences played a key role in providing the opportunities to deliver knowledge, create professional networks and to promote and legalize the new
forms of social work. But, in addition to this the conferences have also been enormously important in terms of the process of sharing personal reflections, ideas and thoughts. The way that the conferences were organised involved first inputs from professionals in the social sector, and second workshops for the participants. These have been very profitable for many of the participants who acquired a lot of knowledge, motivation and inspiration.

5.3.3. Study trips to Sweden

The most important thing to come out of the study trips to Sweden seems to be the great experience the participants gained from being in the different social institutions. The Lithuanian participants were given a lot of hope and inspiration when they saw the Swedish social workers handle social work in a modern way as well as the commitment to maintaining high standards of social service provision.

Some study tour participants, however, found it a little frustrating to witness the disparity between the level and range of social work and social service provision in Sweden and in Lithuania, but all mention the study tour to Sweden as being one of the greatest experiences throughout the project. Some participants mentioned how necessary they felt it was to have enough time to ask questions and discuss issues with personnel from the institutions they met in Sweden and concluded that it might be better to visit fewer institutions and therefore to have longer at each institution that they visited.

5.3.4. Ten week courses in Lithuania

This was one of the great investments in terms of time and resources in the Social Policy & Community Social Service Development Project. A forty week course was divided in to four ten-week courses. The three main modules for these four courses were 1) Knowledge of the client 2) Knowledge about your own society 3) Knowledge about your self. Other more technical modules were also covered as part of the courses, for example, Child Welfare.

The three core modules mentioned were with out any doubt necessary for the introduction of modern social work in relation to human rights and the dignified treatment of clients. These modules covered questions about values and policy, as well as attitudes to the client, about fighting for weak people’s rights and about respecting the strengths and weaknesses of social workers. In 1998/1999 it was very unusual for the new staff members in Lithuania to take part in this kind of debate and the involvement of the Swedish instructors made this debate possible.
This said, it could be argued that the four ten-week courses were too long as so many other things were needed in terms of training. Delivering theoretical courses aimed at addressing such things as values, policy, strategy, sociology theory etc. should be in kept in balance with the other needs of these newly trained social workers, which first of all was about delivering of “hands on experience”, new methods and the organization of specific forms of social work. Observing the current situation in several of the fourteen projects, there is a clear need for social workers to obtain more educational and professional skills, which justifies this comment concerning the division between the attention paid to the theoretical and the attention given to specific methodologies and “hands on experience”.

5.3.5. Seminars on special topics

The seminars on special topics were important and provided a way to deliver expert knowledge about the different aspects of social work. These seminars were also especially important for combining the theoretical and the practical including the experiences from the fourteen projects.

Running twenty three-day seminars sounds like a lot of time devoted to the projects but in reality it is not an especially high investment in fourteen projects. It is in reality only about four or five days education and sharing of knowledge per project.

5.3.6. Coaching and supervision

For the Swedish teachers and instructors coaching and supervision was one of the important areas to introduce to the Lithuanian social workers. Every project was visited by a Swedish coach and supervisor at least once a month, about forty times a year for all projects. The Swedish consultants discovered that this way of developing the institutions and the staff member’s professional skills was relatively unknown to the participants.

The nature of coaching and supervision is about helping individuals develop their own personal and professional skills and to secure the optimal circumstances for each to perform their work given their individual circumstances. This is far from what actually happened in the project.

Attempts were made to combine coaching and supervision into the introduction and implementation of the documentation system. However, the coaching and supervision focussed more on individuals learning from their instructors or from their colleagues about case management etc., which is very different from learning about coaching and supervision principles and techniques that can be deployed as
professional tools. As a lot of time and effort was spent on implementing the documentation system there were no doubt a lot of related activities that were given the name ‘coaching and supervision’ but these activities focussed on individuals learning about the case management system. Therefore, we conclude that little time was spent on learning about coaching and supervision techniques that could be used as professional tools in the future.

5.3.7. Development and implementation of a case management system

As already mentioned, the development and implementation of the documentation system, was an important part of whole Stockholm University’s effort in the Social Policy & Community Social Service Development Project.

The arguments for prioritising the implementation of the documentation system and the resources made available to do so sound very convincing. It sounds right when Stockholm University underlines how important it is for those involved in the projects to be aware of costs and effectiveness, to be aware of the characteristics of good treatment and to be able to show all involved proper documentation. Furthermore, to use an electronic format seems logical given the current growth in information technology.

The evaluators would however argue that the development and implementation of the documentation system used a large proportion of the project’s resources, especially given that the system is only an indirect part of the treatment and assistance given to clients. The issue raised here by the evaluators is to what extent using the electronic version of the documentation system gave extra value to the individual projects and the SPCSSDP project more generally, in comparison with their use of the paper version of the documentation system. It has not been the documentation system itself that has generated problems in the projects, but rather the hardware and software and a lack of fundamental IT-support and IT-knowledge among the user group. Providing IT-education was not an original objective of the SPCSSDP project.

5.4. Recommendations

As already mentioned, Stockholm University has done a remarkable job in implementing the SPCSSDP project. These comments are made with the benefit of hindsight, which is always a little unfair to the people who have performed such a good job in the project.
From the point of view of this evaluation, we can conclude that Stockholm University has included the right elements, activities and topics in their planning of the project, but maybe they have not attached the right priorities to the allocation of the project resources.

For example, the four ten week courses could have been divided into shorter periods of time, allowing for more resources to be allocated to more practical project work. Furthermore, the seminars on special topics and the introduction of the case management system should not have focused so much on the development and implementation of the electronic version of the documentation system.

There is a clear need for more knowledge, skills and training concerning family therapy. One of the greatest problems that the projects working with vulnerable children and young people have been faced is how to involve parents, especially parents with alcohol and drug problems. More knowledge, skills and training concerning fundraising and the establishment of partnerships together with national and international public and private organizations and NGO’s is also needed. For example, some of the centres need to find resources to help those in rural communities, including the elderly and families with handicapped children mobile, so that they can take advantage of the services that the centres are offering.

6. Lessons Learned

In conclusion, the following key experiences and lessons learned should be emphasised. They should be taken into consideration when making decisions about the continuation or dissemination of the projects and methodologies that have been developed during this programme.

- You can only expect real success if the project is established in cooperation with leaders and staff members who are really enthusiastic and engaged in the project. You cannot order anyone to do a job and expect positive results.
- It is one hundred per cent necessary that the municipality will take responsibility for the project and are ready to accept that the project is an experiment, and this said, which could potentially fail.
- It is very important for the project that some organisations or authorities beyond the community and project, for example Sida or other international organisations, maintain their interest in the project throughout its lifetime.
- It is of vital importance for the establishment and completion of a project like this, that there are real economic benefits for the community in the end.
• It is very stimulating for the establishment and completion of a project like this, for local politicians, authorities and the local communities as a whole, to receive information about the project and that a positive image of the project is promoted, for example via the press and national and international conferences.

• The social, economic, political and geographical conditions that affect each project are different in every case so it is impossible to replicate a project perfectly. But the positive experiences and lessons learned from one project can be used as inspiration for the next. It can also be expected that the positive results and benefits experienced by one project can be experienced in a similar project.

• When projects are established and implemented in cooperation with national or foreign experts, it is very important, that the consultants deliver what is really needed and do not just deliver what they think from a theoretical point of view are the needs of those they are working with.

• The professional success of the social workers and therefore social work depends on the values, attitudes, knowledge and professional skills in leadership that those involved possess. Work in such projects requires professional effort from those implementing the projects, where education, training and coaching and supervision are of the utmost importance.

• The municipalities and the projects must be supported, on a daily basis by high qualified experts, for example, from The Ministry of Social Security and Labour.

Vilnius/Copenhagen October 2003/Laimutè Zalimienè/Frank Bertelsen
Annex 1

Terms of Reference for Local Technical Assistance

Lithuania Social Policy & Community Social Service Development Project
Component 2; Community Social Services Development
Final Evaluation of Pilot Centres

Background

The Ministry of Social Security and Labor (MSSL) together with World Bank and other foreign partners is carrying out Community Social Services Development project (SPCSSDP) effective since 1997. The project supports the Government of Lithuania in providing social security to the population at an affordable cost through institutional development activities to improve (a) the capacity to analyze and monitor social policies at all stages and, (b) development, testing and replication of new community-based social service models.

Institutional placement continues to be main services provided in Lithuanian when problems develop for children, families or the elderly or the disabled, because little community-based social assistance is available. The need for assistance has risen since independence, as individuals and families cope with the strains of transition. Traditional models of service provision have been maintained, and as a result there has been a significant increase in the use of institutional care, particularly in the number of children where placements rose from 797 children in 1992 to 1709 children in 1999. The MSSL and the municipalities recognize the problem and believe a reorientation is necessary, but were hampered by:

a) a lack of knowledge and experience of appropriate alternatives,

b) a rapidly changing policy framework, which has resulted in some confusion regarding which levels of Government and which agencies are responsible for these services,

c) fiscal constraints, and

d) a lack of understanding in society about the needs of elderly, children and disabled.

Responsibility for institutional care is gradually being transferred to local governments, although the MSSL currently sets standards and supervises these institutions. The provision of non-cash social services is the responsibility of the municipalities.

The Project on the Development of Social Policy and Community-Based Social Services was started in 1997 and is entering its final stage and due to be completed by mid June 2003. The 2nd component of the Project has supported the development 14 community-based services pilots in six municipalities to:

i) demonstrate that fewer individuals will be placed in institutions as a result of receiving services from these programs, and that others can return home from institutions;

ii) demonstrate that these community-based services are less expensive than institutional care;

iii) show policy-makers and social service staff in other parts of the country the utility, feasibility and cost-effectiveness of using the new service approaches as alternatives to institutionalisation of vulnerable individuals; and

iv) coordinate the delivery of cash and non-cash benefits to clients by serving as case managers and to link all social assistance offices and non-governmental service providers in the community.
In general, the centers are very clear about their tasks and how and by what methods these task best could be carried out. All pilot centers show good results, some of them have expanded their activities and taken on new and more challenging assignments. However there is a clear need to have a more formal evaluation of the pilots against the original objects to test their effectiveness and to provide the basis for decision on future replication of the various pilots in different municipalities. It would be useful if evaluation would cover assessment of the pilots against efficiency of similar centers established during the last five years for the same groups of population Also to test the impact of the 14 pilots, positive, negative, or neutral on people not captured by the 14 centers.

**Objective**

To assist for foreign experts to provide a final evaluation report for the 14 pilot centres that assesses their impact and effectiveness in relation to the original objectives and that gives the information needed for the Ministry to decide about future replication of the centres.

**Activities**

The final evaluation will be carried out by a team lead by an international team leader and based on a joint work between an international and local consultant. (See Terms of Reference for foreign Consultant) The tasks and responsibilities of the local consultant are therefore the following:

- Take part in the discussion about and assist the foreign consultant in working out the Concept note
- Preparing for data collection, identification of sources, methods for collection etc.
- Data collection (local consultant and data supplier);
- Data analysis, first conclusions;
- Developing a first draft of parts of the report as agreed with the foreign consultant;
- Assist foreign consultant in the work on final report;
- Assist foreign consultant in presentations of drafts and reports throughout the evaluation period
- Liaison between the foreign consultant the MSSL and the PCU.

**Schedules**

It is anticipated that the evaluation and report writing will be undertaken over a six-month period and that the work of the local consultant will commence in month two and therefore be undertaken over a five month period It is essential that the reports are delivered and accepted before the project is completed. The following timetable is envisaged:

<table>
<thead>
<tr>
<th>Month</th>
<th>Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Taking part in discussions about concept note&lt;br&gt;Preparing for data collection, identification of sources, methods for collection etc</td>
</tr>
<tr>
<td>3–4</td>
<td>Data collection (local consultant and data supplier)&lt;br&gt;Data analysis, first conclusions&lt;br&gt;Drafting parts of the report as agreed with the foreign consultant</td>
</tr>
<tr>
<td>5</td>
<td>Assist foreign consultant in work on final report</td>
</tr>
<tr>
<td>6</td>
<td>Assist foreign consultant in presentations of drafts and reports</td>
</tr>
</tbody>
</table>

See Annex Time map for both Technical assistance: foreign and local.
 Outputs

The collection and collation of all agreed data and the presentation of the data in a form agreed with the foreign consultant. Work on drafts of the final report as agreed with the foreign consultant. Reports will be produced in English and Lithuanian.

Qualifications

The consultant should have extensive experience in research, and evaluation, particularly in the area of program assessment. An advanced degree in the social sciences is preferable. The consultant should be fluent in English.

Institutional arrangements

The consultant will report to the foreign consultant. He is responsible for the Pilot final evaluation of the project. Full coordination shall be carried out with the Project Coordination Unit (PCU), which will support the management of activities of all components of the World Bank project. All reports relevant to the consultancy shall be submitted to the PCU, which shall ensure forwarding of the reports to the Government representatives, as well as to the World Bank staff and Sida.

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Annex 2

Terms of Reference for Foreign Technical Assistance

Lithuania Social Policy & Community Social Service Development Project
Component 2: Community Social Services Development
Final Evaluation of Pilot Centres

Background

The Ministry of Social Security and Labor (MSSL) together with World Bank and other foreign partners is carrying out Community Social Services Development project (SPCSSDP) effective since 1997. The project supports the Government of Lithuania in providing social security to the population at an affordable cost through institutional development activities to improve (a) the capacity to analyze and monitor social policies at all stages and, (b) development, testing and replication of new community-based social service models.

Institutional placement continues to be main services provided in Lithuanian when problems develop for children, families or the elderly or the disabled, because little community-based social assistance is available. The need for assistance has risen since independence, as individuals and families cope with the strains of transition. Traditional models of service provision have been maintained, and as a result there has been a significant increase in the use of institutional care, particularly in the number of children where placements rose from 797 children in 1992 to 1709 children in 1999. The MSSL and the municipalities recognize the problem and believe a reorientation is necessary, but were hampered by:

a) a lack of knowledge and experience of appropriate alternatives,

b) a rapidly changing policy framework, which has resulted in some confusion regarding which levels of Government and which agencies are responsible for these services,

c) fiscal constraints, and

d) a lack of understanding in society about the needs of elderly, children and disabled.

Responsibility for institutional care is gradually being transferred to local governments, although the MSSL currently sets standards and supervises these institutions. The provision of non-cash social services is the responsibility of the municipalities.

The Project on the Development of Social Policy and Community-Based Social Services was started in 1997 and is entering its final stage and it is due to be completed by mid June 2003. The 2nd component of the Project has supported the development 14 community-based services pilots in six municipalities to:

i) demonstrate that fewer individuals will be placed in institutions as a result of receiving services from these programs, and that others can return home from institutions;

ii) demonstrate that these community-based services are less expensive than institutional care;

iii) show policy-makers and social service staff in other parts of the country the utility, feasibility and cost-effectiveness of using the new service approaches as alternatives to institutionalisation of vulnerable individuals; and

iv) coordinate the delivery of cash and non-cash benefits to clients by serving as case managers and to link all social assistance offices and non-governmental service providers in the community.
In general, the centers are very clear about their tasks and how and by what methods these task best could be carried out. All pilot centers show good results, some of them have expanded their activities and taken on new and more challenging assignments. However there is a clear need to have a more formal evaluation of the pilots against the original objects to test their effectiveness and to provide the basis for decision on future replication of the various pilots in different municipalities. It would be useful if evaluation would cover assessment of the pilots against efficiency of similar centers established during the last five years for the same groups of population. Also to test the impact of the 14 pilots, positive, negative, or neutral on people not captured by the 14 centers.

A range of data on the centers is currently available, including but not limited to the following:

- All annual and bi-annual monitoring reports for each project;
- All individual case records;
- All of project related documents;
- All financial documents of the centres.

**Objective**

To provide a final evaluation report for the 14 pilot centres that assesses their impact and effectiveness in relation to the original objectives and that provides the information on which the MSSL and municipalities can base decisions about future replication.

**Activities**

This international team leader (ITL) will be responsible for the design, development and delivery of the final evaluation report and will be supported by local consultants financed by the MSSL. The ITL will be responsible for agreeing the terms of reference of the local consultants, play a part in their selection, and be responsible for their management. (See Terms of Reference for local consultant)

The detailed activities for the foreign consultant are therefore the following:

- To review the ToR for local consultant;
- Participate in selection and vetting of local partners (local consultant and Data Supplier);
- Present an evaluation research design;
- Work out the division of tasks and responsibilities between foreign and local partners and a structure for management and supervision of the evaluation;
- Work out a Concept note for the evaluation
- Present and take part in discussions on the Concept note aiming at getting approval from the Ministry; 1st short trip to Vilnius to discuss the concept and arrange for the work with local partners;
- After endorsement of the concept note from the Ministry, 2:nd short trip to Lithuania to supervise the commencement of evaluation;
- Continuously oversee and supervise the data analysis;
- Report drafting;
- 3:rd short trip to Lithuania to discuss and finalize draft report;
- Present report to MSSL and other concerned parties, comments provided;
- Amend and finalise the report based on comments received from the MSSL and others.
Schedules

It is anticipated that the evaluation and report writing will be undertaken over a six-month period. It is essential that the report is delivered, reviewed, and accepted before the project is completed. The following timetable is envisaged:

<table>
<thead>
<tr>
<th>Month</th>
<th>Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Reviewing ToR for local consultant; Participation in selection and vetting of local partners (local consultant and Data Supplier); Research design; Division of tasks and responsibilities between foreign and local partners and a structure for management and supervision of the evaluation; Concept note worked out.</td>
</tr>
<tr>
<td>2</td>
<td>Concept note discussed and accepted by the Ministry, short trip to Vilnius to discuss the concept and arrange for the work with local partners; Surveys agreed between Ministry and consultants;</td>
</tr>
<tr>
<td>3–4</td>
<td>Short trip to Lithuania to supervise the commencement of evaluation; Oversee and supervise the data analysis;</td>
</tr>
<tr>
<td>5</td>
<td>Report drafting</td>
</tr>
<tr>
<td>6</td>
<td>Short trip to Lithuania to discuss and finalize draft report; Report presented for the Ministry and other concerned parties, comments provided; Final draft worked out.</td>
</tr>
</tbody>
</table>

See Annex Time map for both Technical assistance: foreign and local.

Outputs

A comprehensive report on the final evaluation of the pilot centres produced in English and Lithuanian.

Qualifications

The consultant should have extensive experience in conducting and directing social service research, and evaluation, particularly in the area of program assessment. An advanced degree in the social sciences is preferable. The consultant should be fluent in English and have experience working in the international area. Eastern European experience is required.

Institutional arrangements

The consultant will report to the Project Coordination Unit Director Mr. Alfredas Nazarovas, from the Ministry of Social Security and Labour. He is responsible for the coordination, monitoring and evaluation of the project. Full coordination shall be carried out with the Project Coordination Unit (PCU), which will support the management of activities of all components of the World Bank project. All reports relevant to the consultancy shall be submitted to the PCU, which shall ensure forwarding of the reports to the Government representatives, as well as to the World Bank staff and Sida.
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