A STUDY OF LINKAGE DEVELOPMENT BETWEEN A FOCAL AGENCY AND SIX TARGET AGENCIES

BY

CAROL ROBSON

A Thesis

Submitted to the Faculty of Graduate Studies in Partial Fulfillment of the Requirements for the Degree of

MASTER OF SOCIAL WORK

Faculty of Social Work
University of Manitoba
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A STUDY OF LINKAGE DEVELOPMENT BETWEEN A FOCAL AGENCY AND SIX TARGET AGENCIES

ВΥ

CAROL ROBSON

A Thesis submitted to the Faculty of Graduate Studies of the University of Manitoba in partial fulfillment of the requirements for the degree of

MASTER OF SOCIAL WORK

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Abstract

This study describes six target agencies and one focal agency P.O.W.E.R. (Prostitutes and Other Women for Equal Rights) in the early phases of linkage development. Descriptive information was collected from three respondents in each target organization.

The purpose of the study was to discover what factors led an institution to agree to a linkage with a focal organization. There was also an interest in comparing the perceived strength of each linkage developed, with the structural characteristics of each organization. Hypotheses were developed from the literature.

Three respondents from each organization; a line level staff, a middle manager, and an executive officer, provided information on each target organization, and also described their perceptions of the linkage with the focal organization. This information was used to test the developed hypotheses.

It was found that agencies who perceive their interaction as cooperative, also are more likely to perceive the linkage to be effective. Accessibility of service to the target client group also appears to have a positive

relationship with the perception of cooperation. Frequent communication between agencies appears to be related to an increased number of clients seen and the level of satisfaction of service providers varies with the increased participation of clients.

It was found that negotiation is one of the most important elements in successful linkage development. Ideological differences, which lead to different technologies in service provision, can hamper, or prevent, linkage formation; unless either the focal agency or the target agency is willing to compromise. Frequent communication is required to develop trust, find common ground, and reach a consensus on terms of a linkage.

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My sincerest thanks to the board and staff of Mount Carmel Clinic and P.O.W.E.R., who agreed to my participation in this evaluation and who provided valuable information. Thank you, also, to the staff of the six target agencies who were willing to schedule interview times for the purpose of this study.

Finally, a big thank you to my husband Barry, for doing more than his share of parenting and household duties, so that I was able to pursue a career and a graduate degree. Thank you to my daughter Dyane and foster daughter Jackie for helping out at home; to my son Sean for his computer expertise; to my son Kelly, foster son Clint and grandson Jesse, for facilitating the lighter moments that keep everything in perspective.

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INTRODUCTION

The merits of a system of collaboration between social service agencies has been a topic of interest for decades (Rogers and Whetten, 1982). Within the current economic climate with governments operating under fiscal restraints, a focus on coordination is appropriate.

Within the parameters of fiscal restraint, social service agencies are interested in ensuring that the limited service available is effective. Patti (1987) feels that there are three components to designing effective service, which are: 1. ability to generate change for the client system, 2. the competence of implementation of service, and 3. the clients satisfaction with the quality and effect of the service. This represents a real challenge to agencies who are considering on embarking in a new service delivery.

Service providers recognize that a system of specialized service delivery, in separate departments and physical locations, has inherent problems. "Human needs often occur as interconnected problems, and yet services are usually delivered in specialized, partial, and selective patterns (Aram and Stratton, 1974, p.412).

"Service coordination and integration have been persistent issues in discussions of health services delivery. Fragmentation of services has been repeatedly

cited as a major problem" (Fleishman, 1989, p. 157).

In Canada service providers from community agencies have been concerned with the lack of communication between agencies, the overlap of services, and the limited joint treatment. There has been a concern that this lack of coordination of services impacts negatively on clients, as they do not receive 'optimal service'. (Forster, C; Evans, B, and Fisher, R, 1990)

In addition to problems of fragmentation, service providers must also contend with the problem of reduced funding by local and federal governments. This reduced resource base and a concern that service outcomes better meet client need is an impetus for changing the way we have traditionally delivered services. Fleishman suggests that future research should "examine the effects of service coordination and integration on parameters of service delivery such as access to care, quality of care, and cost." (p. 165).

Researchers have offered various explanations for the development of interorganizational networks. Fleischman, Piette, and Mor, (1980) suggest crisis, such as the AIDS epidemic, force health and social services organizations to look at their policies and to "develop means of coordinating with other service providers." (p.31). Boje and Whetton, (1981) state networks are not so much crisis oriented, but rather emergent in nature, "While some

relationships are mandated, most are locally mitiated and arise from the needs of network participants"(p. 379). Fleishman suggests that "one agency often assumes the role of lead agency, with primary responsibility for bringing organizations together" (p.163). Organizational researchers refer to this lead agency as the 'focal' agency . (Evan, 1971)

This thesis will examine one 'focal' agency in the city of Winnipeg that has undertaken to 'demonstrate service delivery which integrates organized formal linkages with a range of government services'. For the purpose of this thesis, a linkage is defined as a regularized direct relationship, with the exchange of resources, between the focal agency and an organization in the immediate environment(Baum, 1991).

This thesis will attempt to tie the historical development of coordination between agencies with the type of studies conducted over the same time frame. There will be a review of relevant literature to extrapolate variables impacting on linkage formulation. Properties of linkages will be defined in order to compare the linkages developed by the focal agency. Hypothesis will be developed to test the variables, as found in the literature, and further developed in this thesis. Finally, each agency will be examined separately, to test each hypothesis and the findings will be discussed.

The focal agency in this thesis, is Prostitutes and Other Women for Equal Rights (P.O.W.E.R.). P.O.W.E.R. is a community-based agency which was first established as a volunteer-based, self- help organization in 1985. It targeted women and girls in the core area who were involved in street prostitution, or were at risk of becoming sex trade workers. These women were also at risk for sexually transmitted diseases, drug and alcohol abuse, violence, and other health and social issues. The original organization was forced to close its doors in March, 1990 when funding ran out.

After ongoing efforts to secure core funding, P.O.W.E.R. approached Mount Carmel Clinic for assistance in obtaining funding through the Manitoba Health Services Development Fund. Mount Carmel Clinic is a community health centres located in the inner city , which had provided services to several of P.O.W.E.R.'s clients. A joint proposal was submitted to the Department of Health, which administers the fund, by Mount Carmel Clinic and P.O.W.E.R. In December, 1991, the Manitoba Health Services Development Fund provided Mount Carmel Clinic with the funding to implement the Integrated Service Delivery Project, out of P.O.W.E.R., for a 34 month demonstration period. Additional funding for the first year of project operation came from the Winnipeg Core Area Initiative and the Manitoba Community Services

Council.

One of Manitoba Health Services Development Fund's conditions attached to the funding was that an evaluation of the project be put into place. Campbell & Heinrich Research Associates (CHRA) was retained in January 1992 to provide a formative and summative evaluation of the project. CHRA, with the support of Mount Carmel Clinic and P.O.W.E.R., agreed to allow this graduate student to be involved in part of the evaluation. My interest was in discovering what factors led an institution to agree to a linkage with a focal agency. I was also interested in factors that might impact on the type of linkage formed. To conduct this study, it would be necessary to develop an instrument which could not only measure variables that might impact on linkage formation, but that could also establish a baseline which would enable CHRA to track the linkages over time. The exploratory and descriptive data derived from this thesis could then serve an evaluative purpose in the future. The first step was to design the questionnaire that would be used to describe the linkage agencies and the focal organization. The questionnaire would provide descriptive information on each of the targeted agencies. It would also focus on identifying perceptions of staff on service provision needs in Winnipeg. A further step was to design a structured interview to be administered after the basic data had

been provided through the questionnaire. This interview would provide information to further describe the linkages, and to measure perceived effectiveness and satisfaction as seen by the service provider.

P.O.W.E.R. project clients were also contacted during a cross sectional survey conducted by CHRA. Information from these interviews was also used to measure the client's perception of the services received from the linkage agencies. Client Contact Forms, provided basic information on all clients P.O.W.E.R. contacts; and Encounter Forms, documenting nature, duration, and professional involved in providing service, were used to assess the extent of involvement in linkage agencies. Encounter forms were also used to collect information on the type of service provided. Client Contact and Encounter Forms were developed and implemented by CHRA. They have agreed to my limited use of the data collected on these forms, which will enable me to comment on the service linkages.

Focal Agency

The goals of P.O.W.E.R. are:

- To develop, implement and assess the effectiveness of interdepartmental linkages/contracts with P.O.W.E.R. to provide services to the target group.
- 2. To reduce the short and long term health risks and other negative consequences associated with prostitution.
- 3. To deter women and girls from turning to prostitution for economic survival.

P.O.W.E.R. is staffed by two coordinators, a Program Coordinator and a Coordinator (Government and Community Liason), a Community Health Nurse/Clinician, and two outreach workers. P.O.W.E.R. also has an advisory board which has formal terms of reference which identify "membership". Membership includes a range of community agencies with knowledge or interest in services for prostitutes, members of the target population, two staff representatives, representatives from Manitoba Health, Mount Carmel Clinic and CHRA.

In the original structure both coordinators reported to Mt. Carmel Clinic. Job functions were divided between the two coordinators, with a shared decision making framework. There has recently been a change in structure

to more clearly delineate lines of authority and responsibility.

The organization is formalized with written job descriptions, yearly evaluations, an operating manual for staff, and a requirement for weekly meeting minutes to be provided to Mt. Carmel Clinic. There is support for staff involvement on other boards and committees in the community. There is an active base of volunteers who are involved in outreach, one on one counselling and referral of clients. All staff are involved in making decisions around program delivery on site. The Community Health Nurse is involved in developing informal health related programs with other health organizations.

Client Group

P.O.W.E.R. provides outreach to clients by car and foot during the day and evening in Winnipeg's core area. These areas include 'low track' (adjacent to the P.O.W.E.R. facility), Jarvis and Sutherland area, and 'high track' (Albert and Bannatyne area). Services are also provided on site at 50 Argyle St., in clients' homes, and over the telephone. These clients are engaged in prostitution, or are considered at risk of becoming involved. Twenty four and one tenth percent (24.1%) of contacts between May and October, 1992, were with children under the age of 18. The largest number of contacts were with clients aged 18

to 22 (43.3%). Twenty one percent (21%) were with clients between 23 and 27 years and less than 10% were with individuals 33 years or older.

Fourty six percent (46%) of the 5112 client group contacts between March 1992 and October 1992 were of Aboriginal descent. Three and nine tenths percent (3.9%) were Blacks, and 48.2% were Caucasian. The remainder were of other racial origin or the information was missing.

Ninety two and six tenths percent (92.6%) of contacts were with girls/women and 91% were engaged prostitution. Seven and three tenths percent (7.3%) of contacts were with men, and of these 63% transvestites/transexuals, who worked the streets, dressed as women.

Injection drug use was a high risk characterizing 4.6% of the population. Two hundred and thirty four (234) of the 238 injection users were prostitutes. Four percent (4%) of all contacts were under the influence of either drugs or alcohol at the time of contact (187 of the 206 were prostitutes). One hundred and ninety four (3.8%) of all contacts were pregnant, and of these 165 were prostitutes. Only 23.2% of the 69 street youth contacted indicated they were involved in prostitution. (Data from contact forms reported in CHRA report of activities : January -December 1992.)

HISTORICAL DEVELOPMENT

Interorganizational coordination to improve service delivery is not a new phenomena. Management literature would indicate that the type of coordination tends to be influenced by the environmental conditions existing at the time. These conditions would include technology, political and social values, and social structure (Miller and Form 1964, and Stinchcomb 1965). Rogers and Mulford (1982) describe four separate management ideologies developing over a period of 130 years which affected service delivery. Their analysis was of human service organizations in the United States. A description of the Canadian experience, over the same time period, will be provided from Canadian sources.

The development of social security in Canada has differed from the development in the United States, partly due to the impact of the British North American (BNA) Act of 1867. Some leaders in Canada, at this time, favoured a unitary state similar to the British model, while others preferred the American model of federation. Objections to centralization resulted in a federal system purported to avoid the errors of the American system with its emphasis on states' rights. The BNA Act made the central government the most powerful, and responsible for major sources of tax collection. The provinces had 'minor

responsibilities' such as health and welfare concerns (Guest, 1985).

The elements Rogers and Mulford considered ,in analyzing the four time periods in the United States, were as follows:

Dominant management ideology - based on the values of the human service administrators. This would include assumptions of the essence of the social order, meansends relationships and motivations.

Major processes believed to achieve order - this refers to modes of achieving coordination between units.

Primary decision making unit - refers to location of power within an organization.

Character of organizational dependency - assesses the autonomy of individual units.

Explanation of failure - refers to the explanations given for the failure of this approach to coordination.

The first time period they analyzed was from 1850 to 1930. The dominant ideology at this time was UTILITARIAN or laissez faire. Management valued efficiency, and felt that rewards should match contributions to the individual agency. Competition was believed to be sufficient to ensure order within the system. There was an individualistic approach to coordination (Laumann and Pappi 1976). Most human services were private and Rogers and Mulford indicate that the power of an organization

depended on the social desirability of the service provided, the amount of resource possessed, legitimacy gained from years of service provision. Competition was believed to eliminate the duplication of services and to help improve efficiency of organizations. Very little coordination took place during this time period. Information exchange was the primary interaction and order within the system was believed to come from competition between agencies. The main power broker of the organization was the administrator and the agency operated rather independently. This system is purported to have failed due to the absence of pure competition and the inability of the system to appropriately allocate resources. Problems emerging within the system were inefficiency and a duplication of services, showing that the market cannot regulate the allocation of resources. The depression hastened the demise of the Utilitarian ideology and the government intervened as a regulator and distributor of resources.

The intervention by government came sooner in Canada but is principally a twentieth century phenomena (Armitage, 1975). Pre 1900 there was a residual concept of social welfare. Aid was of a gratuitous nature and families were expected to look after their own. There was limited municipal responsibility for the poor and indigent, and only after family resources had been

exhausted. This aid was also only for local residents who could prove their residency (Armitage, 1975). Eichler (1983,P.306) states that period this early "characterized by very limited local responsibility for the poor and indigent." The general attitude was that few people should need assistance, and that assistance would only contribute to the person's tendency to be lazy. Need was somehow defined as an inherent weakness in the individual. Influences of the protestant theology, which correlated success with goodness, and poverty with sin, provided support for individualistic values (Guest, 1985). Due to limited provision of social services at this time coordination was not an issue.

During the period 1900 to 1930 the first provincial and federal responses to need were initiated. Social reform was a beginning concern and leaders such as Sir Herbert Ames stated that personal inadequacy was not a sufficient explanation for poverty. His research helped demonstrate that the problem of poverty was "very largely rooted in economic and social arrangements" (Guest, p. 29.). Ames work was part of a larger urban reform movement which "signalled the growing strength of collectivist thought in Canada and the ebbing of the laissez-faire tide (Guest, p.31). Some significant developments during this time period were the first Workers' Compensation (1915) in Ontario and at the end of World War I the pensions

for war widows. Manitoba introduced the first provision for mothers' allowance in 1916. This provided assistance for respectable women (references required), with dependents(Armitage, 1975). There was increased federal government involvement from 1920 to 1930. Influencing the government were the veterans returning from World War I and the increasing social unrest, such as the Winnipeg General Strike. Other acts affecting veterans at this time were the Returned Soldiers Insurance (1920), which allowed veterans to purchase retirement annuities; and the War Veterans Allowance (1930) which paid an allowance to veterans, widows or orphans who were unable to earn an income.

The Old Age Pensions Act (1927) was the first federal-provincial cost-shared program paying an allowance to the elderly on the basis of a means test, residence status, and being a British subject (Armitage, 1975 and Guest, 1985).

The second model described by Rogers and Mulford was the ALTRUISM model. During the period 1930-1958 in the U.S., a social ethic developed where there was a concern for the collective well-being of society's members. Government began to take responsibility for this collective well-being, as it was recognized that free-enterprise was not adequately meeting the need. "The New Deal era----major change in philosophy and practice of

American capitalism." (Rogers and Mulford, 1982, p.37). Managers began to recognize the need for cooperation between services (Perrow 1972). During this period the concern for individualism operated alongside a new emphasis on social cooperation. (Scott and Mitchell 1972, Presthus, 1978). The agency became the decision making and interdependence with other units established. Organizations were seen as cooperative systems that were interested in both individual and collective goals. (Warren 1967, and Lehman 1975). Both private and public organizations increased in numbers during the twenties and thirties, increasing the need for coordination. "The emergence of public welfare agencies 1930s was accompanied by the belief that responsibility for coordination should be assigned to the public sector" (Rogers and Mulford, p. 38). The first attention, by government, to the interagency system came during this time period , and was recognized as beginning to contest the agency's right to total control in decision making. The federal government began to exert control through funding practices and a coordinating and regulating role. It was found that cooperation was not a sufficient remedy for the fragmentation of services. Due to the different goals of organizations, some conflict was inevitable, and interdependencies did not always result service. in better Government funded

voluntary agencies and public ones, and due to concerns of protecting turf, efforts at coordination were not very successful. Part of the problem was the ad hoc nature of coordination, with no underlying strategy for implementation. Value conflicts between agencies, the failure of coordination by strictly voluntary methods, and the increasing complexity of the social service network at that time, led to a new emphasis on coordination.

A comparable period in Canada is from 1930 to 1944. Several major influences precipitated the increased involvement of the federal government in the provision of social welfare. This period was dominated by the Great Depression. Unemployment was devastating and drought destroyed most farming income. Even the business community had to admit that market forces were not sufficient to regulate capital and there was increased agreement that the answer was to turn to the state (Ursel, 1992). People turned to municipalities for assistance, and since the municipalities' main source of income was property tax, they were soon unable to meet the demand. The provinces had to assume responsibility and they too, lacked sufficient income to meet the needs of society at this time. As a result of the Great Depression and World War II , it was recognized that local municipal governments could not adequately meet the

needs of society. The federal government enacted short term relief measures such as federal funds for work projects for the unemployed, including the establishment of labour camps (Armitage, 1975).

The Employment and Social Insurance Act was introduced by the federal Conservative Government in 1938. The Supreme Court declared the legislation unconstitutional as this was intrusion by the federal government into an area that was the responsibility of the provincial government. The outbreak of war in 1939 created a new reason for unemployment insurance, as it was seen as a component of war management (Ursel, 1992). The BNA Act was revised in 1940 by the British parliament to allow the federal government to have jurisdiction in the field of unemployment insurance (Guest, 1985).

Several reports completed during this time period had a significant impact on the development of social security. Leonard Marsh's review of Canada's social security system, released in 1943, noted many weaknesses which made it difficult for people to qualify for assistance. The British Beveridge Report of 1942, which was widely circulated in Canada, identified 'Want, Disease, Ignorance, Squalor and Idleness' as standing in the way of progress. The Rowell-Sirois Report, which looked at the division of powers between the provincial and federal governments; various provincial commissions;

and extensive research at McGill University, supervised by Leonard Marsh, were influential in the Canadian social security appraisal presented to the House of Commons in 1943. It was felt that the federal government should assume responsibility for the unemployed to better achieve equity across the provinces. Old Age Insurance was also seen as a federal responsibility. It was recommended that provincial responsibilities could be met by federal grants to the provinces based on fiscal need(Guest, 1985).

In July 1943, the House of Commons endorsed the Heagerty Report which called for a national health insurance plan for Canada. The assumptions of a limited role for the state in social welfare had ended. The new ideology apparent at this time was the welfare state (Ursel, 1992). The National Health and Welfare Act, the National Housing Act and the Family Allowances Act were all introduced in 1944. This period coincided with program developments in the area of social security in the United States under President Roosevelt's "New Deal" era (Guest, 1985).

The period from 1945 to 1960 is recognized as the first steps toward a Federal Welfare State in Canada. In 1945 the first universal Family Allowance programme was introduced, and in 1952 the Old Age Security Act was widened to cover all citizens age seventy and over. In

Blind Persons' Act and in 1954 the Disabled Persons' Act were introduced, empowering the federal government to cost share allowances paid to the blind and the disabled. Djao (1983) called the period between 1945 and 1962 the era of joint federalism as the federal and provincial governments established 56 programs under a cost-shared formula. The Canadian ideology had moved from the residual concept of social welfare to an institutional one. The federal and provincial governments appeared to have а vested interest in service coordination and linkages.

The period 1950 to 1970 was characterized as ADMINISTRATIVE BUREAUCRACY by Rogers and Mulford. There was a continued growth of social service organizations and the government increased its' involvement in the delivery of these services. During this time voluntary service sector took a back seat to the public sector. Voluntary coordination of services was no longer seen as viable. Management techniques in the United States were influenced by business and the military. Cost effectiveness and program concerns gave rise to proposals for program and policy coordination (Kahn ,1973). Centralized administration was characterized by a centralization of power, and a reliance on rules and regulations. It was during the 1960s that evaluation became an 'often controversial' element in decision

making around social services in the US. There was a concern for accountability in the use of public money. This evaluation concern escalated into the 1970's with an increased concern over limited dollars for social programs. (Brawley,E and Martinez-Brawley,E, 1988) In Canada, the legislative obligations of the state to deliver services, along with a generally weak, fragmented, voluntary sector, provided the impetus for state delivery.

During the war years and post war years the public demanded adequate social security. This resulted in a greater state involvement, and also a shift from regulative to supportive interventions (Ursel, 1992).

During the period 1960 to 1980 in both Canada and the there was an increased level participation. This period is defined as the PUBLIC CHOICE MODEL and the need for citizen participation was recognized as a means to overcome the repressions of a bureaucratic system. Laumann and Pappi (1976) talk about "social choice" and the need for consumers to influence the type of service provided. The voucher system was introduced in the United States, where consumers could shop for the service which best met their need. This gave the consumer some control and also introduced indirect competition between service providers. In Canada, citizen participation resulted in the appearance of consumer

organizations, welfare rights groups, and tenant associations to speak for the people affected by social welfare (Guest, 1985).

From the 1960's to the 1980's in Canada the system of centralized federalism which began during World War II to disintegrate. The provinces, who responsible for an increasing proportion of social services expenditures, with limited ability to recover pressured the federal government for decentralization. The federal government, by virtue of the BNA Act, had constitutional power to collect money through taxation. In 1966 the Canada Assistance Plan replaced many programmes. Up until this time the provinces had been responsible for social services. The provinces became responsible for administration , with the federal government cost-sharing the programmes.

From 1980 to 1984 in Canada was a period of review of social policy. In 1983 Bill C 3, the Canada Health Act reasserted the principles of medicare and required the provinces to stop extra billing and user fees if they were to receive full payment of federal money for health care (Guest, 1985).

In the 1990's in Canada the welfare state is beginning to crumble. Universal Family Allowance has ended and the federal government is offloading the cost of many programs to the provinces. This has resulted in the

reduction of services in several areas of child welfare, health care, and services to victims of family violence in Manitoba. Programs are no longer seen as a universal right and there is again discussion of a user pay system of medical care. The first steps have been taken with the introduction of user pay home care, rather than the previous government funded plan.

This decrease in government spending on social services has led to an increase in concern for accountability and the coordination of services to ensure equitable distribution without duplication. There has been increasing pressure for program collaboration since the early 1980's (Hasenfeld, 1983). Agencies are finding their funds reduced, often necessitating the tightening of eligibility requirements and the consolidation of programs. This leads to finding other means of ensuring clients' access to service(Turem, J and Born, C, 1983).

THE STUDY OF ORGANIZATIONS

Along with increased government involvement in social service delivery in the 1950's, came increased concern for accountability and cost effectiveness. Early studies were of the case study or field study design and focused on the organization as the unit of analysis. (Gouldner, 1954; Lipset, Trow, and Coleman, 1956; Blau, 1963; Aiken and Hage, 1968; Mohr, 1969; Evan, 1971) This would fit with Roger's and Mulford's analysis of the ideology operating at that point in time. The agency was seen as the primary decision making unit and there were still remnants of the individualist ideology operating.

These earlier studies also tended to look at individuals in the organization, rather than the organization, especially as sources of influence and power. Both the individualist ideology and the fact that many organizations were operating in a bureaucratic structure, with power concentrated at the top of the organization, would make this a logical analysis at that time(Perrucii and Pilisuk, 1970; Freeman, Fararo, Bloomberg, Jr, and Sunshine, 1963).

Along with increased citizen participation and influence on social service organizations in the 1960's, came a recognition that the environment should also be studied. Sociologists, in an effort to apply an open-

systems perspective to the theory of organizations (Katz and Kahn, 1966; Thompson, 1967; Baty, G.B., Evan, W.M. and Rothermel, T.W., 1971) began to look at an organization's environment. Evan, (1972)concluded that organizations are the most important aspect of environment of a focal organization. Dill (1958) and Perrow (1970) also looked at organizations interacting with a focal organization as the environment to study. Later studies looked at interorganizational transactions between the total network of organizations, rather than at a focal organization. (Aldrich, 1980; Galaskiewicz and Marsden, 1978; Hougland and Sutton, Jr. 1978; Van de Ven and Walker, 1979; Boje and Whetton, 1981).

Organizations were seen as goal-directed, with semiopen boundaries. There was an interest in controlling
their boundaries, to maintain autonomy, but there was
also a recognition that resources from the external
system were needed for the organization to fulfill its
goals. Uncertainties within the environment increased the
organizations need to collaborate with other systems in
its environment. Organizations would share resources,
where outputs of a resource from one organization would
become inputs to another.

The open social system perspective recognized that an organization had to recruit resources such as human , financial and material in order to pursue its goals

(Baty, Evan, and Rothermer, (1971). Evan (1972) states that social scientists:

have studied what behaviourists refer to as the 'black box', that is, the internal structures and processes of an organization. This strategy is justified in view of the complexity and variability of formal organizations, but it is a highly restricted approach to the analysis of organizational phenomena which consist of many external as well as internal interactions. (p. 6)

Evan's particular systems model of interorganizational relations took as the unit of analysis the organization or class of organization and examined the interactions with other organizations in its environment or its 'organization set'. His point of reference was the 'focal organization'. "As in the case of role-set analysis, the focal organization interacts with a complement of organizations in its environment, i.e., its 'organization-set' (p.79) This was the beginning of studying the inter-organizational relationship.

Warren, Rose, and Bergunder (1974) felt that the interorganizational field level was studied because of the
'presumed need' for coordination among agencies. Zald
(1969) however, felt that along with coordination came
both costs and benefits.

Finally, there are studies in the 70's, that focus on more than one level of analysis. There is consideration given to four levels:

- 1. micro level-interpersonal linkages between personnel
- 2. macro level-interorganizational dyads
- 3. network characteristics-density, mutuality
- 4. context of network-political, economic, demographics.

 (Van de Ven, et al 1975, Litwas & Rochman, 1970, Whetten & Aldrich, 1979).

Studies into the 80's and 90' have looked at how new, emerging organizations can be facilitated by the existence of several similar organizations in their organizational field (Wiewel and Hunter, 1985), and how linkages can have a moderating effect on the risk of failure (Baum and Oliver, 1991).

Researchers have focused on why organizations interact, on the antecedents to coordination, and on the benefits and costs of coordination. Dennis Beatrice, (1991) suggests possible reasons for coordination:

- 1.To serve clients better.
- 2. To provide a more integrated, mix of services.
- 3. For more diverse input to program design.
- 4. To build consensus on your program.
- 5.To create 'psychological support' for a program.
- 6.To help gather resources.
- 7.To gain access to other clients.
- 8. To show broad support for your program to Government.
- 9. To avoid reinventing the wheel.
- 10. For help identifying and solving problems.

He also suggests possible limitations:

- 1. Another agency may not be equipped.
- 2. Coordination does not make up for design problems.
- 3. May require cutting across levels of Government.
- 4. Agency goals may be complex and complicate linkage. Further barriers:
- 1. Agency procedures may inhibit.
- 2.Conflicting priorities.
- 3."Zero Sum Game" mentality.(If you win-I Lose)
- 4.A concern for dollars versus clients.
- 5. Difference on how policies should be implemented.
- 6.Different intake requirements, etc.
- 7. Different bureaucratic cultures (autonomy of staff, etc)
- 8.Action of parties outside the program.

There are clear benefits and also potential problems when considering the development of linkages. However, from a historical perspective, it appears that coordination of services has been used, in an effort to improve service delivery, for a number of years.

PROPERTIES OF LINKAGES

There are a variety of elements that can be exchanged between organizations. Information, money, moral support, clients, and staff are resources often considered (Mulford, 1984; Galaskiewicz and Marsden, 1978; Aiken et al, 1975; Van de Ven, Walker, and Liston, 1979; Rogers and Whetton, 1982; and Fleishman, 1990).

These exchanges are described as having a variety of properties:

- 1. Strength of the linkages
 - -frequency of contact between agencies
 - -type of communication (written, telephone,
 in person, meetings)
 - -intensity (quantity and type of resource; i.e. funds, information, services, support, clients.) (Fleishman, 1990; Aldrich, 1977; Marrett, 1971; Schulman, 1976)
- 2. Degree of Reciprocity (the extent of symmetry in the relationship).
 - -resource exchange in one direction (unilateral)
 - -resource exchange in two directions (bilateral)
 - -multiple resources exchanged (multiplex)

- -terms of relationship imposed or agreed upon
- -perceived effectiveness (commitments carried out, equality, productive)
- -perceived impact (effect on the internal operations of each agency) (Fleishman, 1990; Cook, 1977; Galaskiewicz and Marsden, 1978; Emerson, 1962; Aldrich, 1975; Marrett, 1971; Laumann and Marsden, 1982)

3. Degree of standardization

-extent to which rules, policies and procedures govern the agreement and contacts between agencies. (Aldrich, 1977; Marrett, 1971; Levine and White, 1961)

4. Formalization

-formally agreed upon in writing (Aiken and Hage, 1968; Marrett, 1971)

5. Cooperation

-perception of each agencies' staff on the help-fulness of the other agency (Hall et al. 1977)

6. Benefit

-perception by agency personnel, that their agency has gained from the relationship (Hall et al. 1977)

ANTECEDENTS TO COORDINATION

If coordination is the aim, what factors influence an organization to interact? The literature would indicate that there are both contextual and perceptual factors that influence decisions. Perceptual factors include the ideology, values and attitudes of agency personnel. (Rogers and Whetton, 1982; Aiken, DiTomaso, Hage, and Zeitz, 1975; Galaskiewicz, 1979; and Warren, Rose, and Bergunder, 1974; Hall, Clark, Giordano, Johnson, and Roekel, 1977) Contextual factors would include internal structural phenomena of an agency such as complexity, centralization, specialization, formalization, size and technology; and environmental factors such as the economy, community thought structures and available resources. (Rogers and Whetton, 1982; Mulford, 1984; Aiken and Hage, 1968; Hoffman, Stearns and Shrader, 1990; and Hougland, Jr., and Sutton, Jr., 1978). Many authors concluded that organizations chose to interact in order to survive. Some type of resource scarcity was thought to be antecedent coordination.(Cook, 1977; Mulford, 1984; Marsden, 1982; Fleishman, 1989; Aiken and Hage, 1968; Van de Ven and Walker, 1984; Levine and White, 1961; Van de Ven and Ferry, 1980; Litwak and Hylton, 1962; Molnar, 1978; Pfeffer and Salancik, 1978; Thompson, 1967; Van de

Ven, 1976; Adamek and Lavin, 1975). Paulson (1976) found that resource difference was more important, that is, the organizations must require different resources for them to interact. Houghand and Sutton(1978) after studying 100 organizations concluded that organizations that have resources are also likely to participate with other organizations. Adamek and Lavin (1975) concluded that organizations with the most resources more frequently make exchanges with other organizations.

A second antecedent often quoted in the literature is domain consensus. An organization's domain has been defined as "set activities, goals, and clientele", (Wiewel and Hunter, 1985,p.485)or as disease condition, population served, and services rendered. Organization A would have domain consensus with organization B, if A believed that Organization B was pursuing appropriate goals, was delivering service to an appropriate client group, and was delivering a service that would meet their specified goals. (Levine and White, 1961, p. 597). Research indicates that the greater the degree of domain consensus, the greater the possibility of organizational relations (Levine and White, 1961; Warren, Rose, and Bergunder, 1974; Braito, Paulson, and Klonglan, 1972; Litwak and Hylton, 1962; Van de Ven, 1976; Warren, 1967; Aldrich, 1971; Aldrich, 1979; Benson, 1975; Molnar and Rogers, 1979; Thompson, 1967; Paulson, 1976; Marrett,

1971; Gillespie and Perry, 1975). It has also been noted "negotiation and bargaining are essential achieving domain consensus, especially for organizations with diffuse functions" (Galaskiewicz and Marsden, 1978, p. 103). To achieve this involves increased communication to develop trust amongst the actors (Coleman, 1971).

Mulford and Zober (1981) studied 17 core organizations concerned with services for delinquent and predelinquent youth. He was interested in the interaction between these core organizations, which provided either services or funding for services. They interviewed the chief administrator, or the person interacting the most with the core organizations , to obtain data on the 136 dyads that interacted. Dependent variables were resource exchange and conflict. Five dimensions of exchange were measured: Information, Resources, Joint Activities, Written Agreements, and Board Members. Conflict was measured by two variables: Compatibility of Operating Philosophy and Operating Conflict. There were ten independent variables: Resource Scarcity, Domain Consensus, Lack of Alternative Sources of Resources, Goal Similarity, Mutual Dependence, Asymmetric Dependence, Frequency of Interaction, Difference in Professionalism, Difference in Degree of Social Status, and Differences in Formalization.

They concluded that domain consensus is correlated with

information exchange, joint activities, and formal agreements, but not with resource exchange, exchanged board members or conflict.

Schmidt and Kochan (1977) and Hall, Clark, Giordano, Johnson, and Roekel (1977) argue that interorganizational relationships do not depend on domain consensus, but state that the level of consensus affects the quality of the relationship.

Reid (1964) concluded that organizations with similar goals were most likely to make exchanges as they then had a stake in each others goal attainment. Paulson (1976) found that both perceived cooperation and perceived conflict positively were related to goal similarity.Molnar and Rogers (1979) found that similarity was associated with conflict when controlled for other variables. Mulford (1984) found that qoal similarity was significantly correlated with compatible philosophy and exchange of information.

The <u>professional ideology and values</u> of staff is also believed to have an effect on interaction between agencies. Galaskiewicz (1979) believes that agencies with similar ideologies and values are more likely to support each other. Wright (1977) feels that highly specialized organizations with different training and professional socialization can inhibit efforts to coordinate. Aiken, Dewar, Di Tomaso, Hage, and Zeitz(1975)feel that

different professions may have different perspectives on the problem affecting the client which might negatively impact on cooperation. Warren, Rose and Bergunder (1974) found that innovation in agencies varied directly with the professional diversity of the staff. Levine and White (1963) felt lack of cooperation between agencies might be due to different degrees of professionalism. A common theme appears to be that a difference in professionalism may hinder exchanges and make conflict more likely. (Haas and Drabek, 1973; and Kreesberg, 1973). A commitment to common values, on the other hand, is thought to enhance resource flows between agencies. (Laumann and Marsden, 1982; Fleishman, 1990; Hasenfeld, 1980; Rogers and Whetten, 1982)

There is disagreement as to the influence of structural characteristics of the organization on efforts to coordinate. Most later studies tend not to focus on these characteristics. Aiken and Hage (1968) found that with greater complexity, measured by diversity in occupations, degree of decentralization, came programs. They concluded that there was no relationship between formalization and the number of joint programs. Hougland and Sutton (1978) found that large, complex, not for profit organizations with many volunteers tended to often more participate in interorganizational relationships. Hoffman, Stearns, and Shrader (1990) found that formalization influences the clients received network but not the clients sent network. They suggest that the presence of formal written rules not only assist caseworkers in the organization in deciding how to deal with clients, but also assist referring agencies in deciding which clients are appropriate to refer.

Communication may also be a factor in the development of linkages. Galaskiewicz and Marsden (1978) feel that information exchange is an important factor in the 'generation of trust' between agencies. This trust is seen as essential in developing the basis for other exchanges. Van de Ven and Walker (1984) found that communication impacted on the ability of agencies to agree on the treatment of referred clients. Organizational analysts appear not to always put much importance on either internal communication or the communication between agencies. Some authors do not even consider it, while others feel it is extremely important. Katz and Kahn (1978) state: "Communications-the exchange of information and the transmission of meaning-is the essence of social а system organization'(p.428). Aiken and Hage (1968) found that "organizations with many joint programs have more active internal communication channels"(p.284)

It has also been suggested that the administrators must perceive the <u>rewards as outweighing the costs</u> in any

linkage with another organization(Schmidt and Kochan, 1977; and Davidson, 1976) before they will consider exchanges.

METHODOLOGY

Setting

P.O.W.E.R., and six social service agencies with which P.O.W.E.R. first initiated negotiations with in its first year of the three year demonstration project, were the focus of this study. Some of the organizations have a province wide responsibility (Alcohol Foundation of Manitoba, Legal Aid Manitoba); others are mainly focussed on providing service in the City of Winnipeg (Salvation Army, Children's Home of Winnipeg, and Winnipeg Child and Family Services); while one is exclusive to the City of Winnipeg, (Social Services Department).

Research Purpose

A. The purpose of this study is to describe the six linkage organizations, using the structural characteristics found in the literature; and to then describe the developmental phase of linkage formation and the resulting strength of the linkage. The description of the organization, and the perceived strength of the linkage, to be based on information provided by three respondents from each organization; a line level staff, a middle manager, and an executive officer. The focus will be on comparing the perceived strength of each linkage developed, with the structural characteristics of

the organization.

B. A second purpose will be to test hypotheses which were based on the literature reviewed.

Hypotheses:

- The greater the similarity of goals between two agencies, the greater the perceived cooperative interaction.
- 2. The greater the difference in the resource required by each agency, the greater the perceived cooperative interaction.
- 3. The greater the perceived domain consensus between two agencies, the greater the perceived cooperative interaction.
- 4. The greater the perceived cooperative interaction between the two agencies, the greater the perceived effectiveness of linkages as stated by the agencies service providers.
- 5. The greater the perceived cooperative interaction between two agencies, the more accessible the service.
- 6. The stronger the linkage between two agencies, the greater the perceived effectiveness as stated by the service providers.
- 7. The more frequent the communication between the two

- agencies, the larger the number of clients referred and seen.
- 8. The more efficient the internal communication of the organization, the stronger the linkage.
- 9. The level of satisfaction of the service provider varies directly with increased participation of clients.
- 10. The level of satisfaction of P.O.W.E.R. staff varies directly with the participation of clients in the services of the linkage agencies.
- 11. The strength of the linkage varies directly with the increased complexity of the target organization.
- 12. The strength of the linkage varies directly with the increased size of the target organization.
- 13. The number of clients referred and seen by the target organization varies directly with the degree of formalization of the organization.

Level of Analysis

This study concentrates analysis mainly on the micro and macro levels of analysis. There is a primary interest in learning about the strengths of the linkages, developed between agencies, by listening to the service providers describe their experiences. Knowledge construction at the micro level is of a subjective nature. Through the voice of those who have experienced

the linkages, and the interpretation of the interviewer, each linkage will be described at an interpersonal level. As Code (1991) attests, knowledge is both subjective and objective. She recognizes that subjectivity plays a role in the 'construction of knowledge', as all knowledge is interwoven with the 'subject-knowers'.

At the macro level, attention is on the organizations, and the interorganizational dyads or formal linkages. Attention is paid to the structure of the linkage, the rules guiding interactions, and the regularizing functions of the dyad.

There is passing mention of additional network characteristics that linked more than two organizations, but the focus of the study is not on characteristics of the total network between the seven agencies. The political climate as it impacts on economics plays a limited role in the study, as each organization is asked to focus on its resource base, and to determine whether its goals are attainable with this base.

Philosophical Orientation

The approach to this research project has been guided by many characteristics of the case design. Individuals in the target organizations were asked to provide both factual data, and subjective anecdotal accounts of their agency and their interaction with P.O.W.E.R. Descriptions

of the agencies, and of the linkages, relied completely on these accounts. Inferences were drawn, on failures to form linkages, from several of these personal accounts. Client information was also collected, both quantitatively from Client Contact and Encounter forms, in personal interviews with willing clients. (Kazdin, 1981; Cross, 1984) The "inevitable entwinement of facts and values and of the investigator with the object of investigation, "(Greene, 1987, p. 325) must be recognized. Much of the research is of a qualitative, descriptive nature consistent with an interest in allowing the participants to provide the meaning to each setting and to explain the linkages as they perceive them (Lincoln and Guba, 1985). As Greene suggests, there was an effort to encourage "meaningful participation of significant groups....and on the open expression legitimation of the multiple value claims held by members." This would appear to be a particularly relevant approach, if the 'perception' of the individual is as important an antecedent to coordination as the literature indicates. Evaluation of social programmes often relies on approaches concerned with interpreting information, describing events, and providing meaning, rather than measuring and predicting. (Brawley and Martinez-Brawley, 1988). Intertwined with the subjective perceptions of the participants, are also the subjective judgments of the

interviewer, as she decides what facts to record and report. (Hudson, 1975). The reader must trust that the interviewer valued each respondent equally, and was interested in hearing her/his story as it related to the linkage development. My interest was not on evaluating the linkages, or lack of same, but rather describing them, as a baseline for further study and evaluation over time.

attention to people and not just data, is This consistent with a feminist approach (Wallston, 1981). Because of this recognition that respondents important as individuals, there is a need to use more than one method. Standardized, demographic information is appropriately collected on questionnaires, while more human, personal accounts of interpersonal experience is more appropriately collected by interview. The interviewer can develop rapport, and allow the respondent to lead the process in areas of high interest to the respondent. Data obtained on the questionnaire can be clarified during the interview, but can also be used to show that the interviewer is genuinely interested in the data collected. Reinharz (1992) relays many accounts of feminists who use multiple methods, both quantitative and qualitative, in their research.

The use of informants for gathering information may have some inherent risks. Are personal feelings and

opinions a reliable means of assessing an organizational relationship, and are these representative of the entire organization? To somewhat alleviate these concerns, three informants from each target organization were asked to participate. These informants were chosen from three levels organization, i.e. (Senior Administrator, Middle Manager, and Service Provider). This approach has been used widely i n the study o f organizations (Williams, Lawrence, Hoffman, and Mann, 1959; Simpson and Gulley, 1962; Cartwright and Schwartz, 1973 and Williams, 1973). These informants were asked a standardized set of questions and could be expected to have access to similar amounts of information in each of their respective organizations. Information is thus assumed to be both standardized and representative. However, there was an overriding need to also ask open-ended questions and to let the respondent, at times ,lead the interview. This allowed for an expression of personal experience and a perception of the linkage strength, by each respondent. This also allowed for a consideration of the variable nature of values and beliefs.

Survey researchers using informants have quantified data to obtain a numerical outcome from qualitative reports(Simpson and Gulley, 1962; Campbell, 1955; and Williams, 1973). In this study the quantitative and

approach was blended, to facilitate consideration of the impact of domain consensus on linkage formation. Qualitative information on perceptions of domain consensus was collected by interview in this project, and was then quantified to ordinal categories. Responses were weighted from 1 to 5, depending on the extent of agreement or disagreement with P.O.W.E.R.'s goals and service objectives. Both the mean and standard deviation were used to group the respondents categories of low, medium, or high domain consensus with P.O.W.E.R.

Systematic, quantitative data was collected from the Client Contact forms and summary reports derived from the Encounter forms. The Client Contact form provided a profile of each client contacted by P.O.W.E.R. staff, either on the street or in the house. This included demographic data, risk profile, services requested and agencies referred to. The Encounter form provided a record of services provided, by whom, and duration of service.

Data Collection

Questionnaires with stamped, addressed envelopes were mailed out to the three designated respondents at each of the six targeted agencies in December, 1992 (Appendices I & II). A modified questionnaire was also given to the

Coordinator Government and Community Liaison at P.O.W.E.R. (Appendix III). Of the 18 questionnaires, 17 were returned. Three attempts were made to collect the 18th, but were unsuccessful. In February, 1993 phone calls were initiated with the respondents to thank them for completing the questionnaire, and to book a time for personal interview. Interviews were started February, 1993, using a structured format with mainly open ended questions (Appendix IV). The first three interviews were conducted in person, and took from 1 1\2 to 3 hours to complete. The face to face contact enhanced the ability of the interviewer to develop trust, but also tended to lengthen the interview process as rapport was developed. Due to the number of interviews to complete, and the difficulty in scheduling lengthy interviews with busy service providers, the subsequent interviews were conducted by telephone. With increased familiarity and comfort with the questions, and the telephone as medium, subsequent interviews were from 1 to 1 1\2 hours in length. There may be a concern that this introduced some bias, with a switch from in person to telephone interview. There did not appear to be any hesitancy in responding openly to questions, and also in freely giving personal, anecdotal accounts over the telephone. The respondents had been notified by letter of the impending study, had all responded to the questionnaire, and had

been contacted personally to set up the interview. Efforts were made to ensure each respondent that confidentiality would be respected. It is my belief that the telephone did not hamper the freedom of the respondent to express her/his views.

Operationalization of Variables

Service Provider Satisfaction was tested with a variety of questions, both on the mail out questionnaire, and also by interview direct questioning. Question 13 on the mail out (Appendix I) allowed for the perceptions of the respondents on the impact of the linkage on the agency, while question 14 tested personal impact. respondent felt that the linkage had added to workload, but that her/his understanding of the client group had not improved, nor had the ability to respond, satisfaction would not be expected. Questions 16 & 17 also test respondents impression of benefit from the relationship in increased knowledge of the client group and ability to respond more appropriately to this group. During the interview, question 17 (Appendix III directly asks the respondent to describe the impact of the linkage on the internal operations of their agency, looking at such factors as satisfaction of staff with the arrangement, and effect on resources of time, money, and

staff. Question 18 asks if the respondent is satisfied with the service agreement as it now stands.

Perceived Effectiveness was also tested in questions 13 & 14 of the mail out questionnaire. If the respondent circled that the ability of the agency to respond to this specific client group was enhanced, an impression of effectiveness was projected. Question 18 allows the respondent to circle 'has enabled us to respond more effectively' if they agree with this statement. Question 44 has a 5 point Likert scale, from strongly disagree to strongly agree, for measuring the respondents perception of the effectiveness of the linkage with P.O.W.E.R. in improving service to the target group. Question 19 on the interview asks the respondent to describe the impact of the service agreement on their agency. They are also asked if more of the target group are accessing their agency than prior to the linkage. Question 20 asks specifically if the respondent feels there has been an improvement in service provision to P.O.W.E.R. clients and/or other clients as a secondary benefit.

Wiewel and Hunter, (1985) define an agency's domain as "their set activities, goals and clientele" (p.483). Fleishman, (1990) uses Levine and White's (1961) definition of disease covered, population served and services rendered. Van de Ven and Walker, (1984) describe agencies with domain similarity as ones with the same

services, clients, and personnel skills. For this study organizations were assessed to the extent they agreed on P.O.W.E.R.'s three goals (refer to page six).

They were also assessed on the extent to which they felt the client group was an appropriate target for service. The final test was the extent of agreement with the activities of P.O.W.E.R, the 'what to do' in operationalizing their goals. There was an interest in determining if the respondents from the target agencies felt that P.O.W.E.R. was delivering service which would appropriately meet P.O.W.E.R.'s stated goals.

To assess whether the respondent agreed with the importance of interdepartmental linkages, goal #1 respondents were asked to respond on the 5 point Likert scale to their extent of agreement with the necessity of an organization such as P.O.W.E.R. (#45 questionnaire). They were asked if they thought the service agreement was an appropriate mechanism for providing services to prostitutes, (interview question #28).

To assess their agreement with goal #2(to reduce health risks), the respondents were asked about their own perception of the necessity for their agency to be concerned with the short and long term health risks associated with prostitution, and with preventative health measures, (Likert scale, Questions #31 & #38 Questionnaire). They were also asked, similarly, to

respond with the extent of their concern for involvement in the well-being of this client group, and in their agreement of the necessity for education in the areas of risk in intravenous drug use and in the effects of alcohol abuse. In the interview, individual respondents were invited to discuss their own role and their agency's role in providing services to prostitutes. They were also asked to discuss their own, and agency's responsibility in this area. If health risk was a concern, it strengthened their agreement with P.O.W.E.R.'s goal #2.

The extent of agreement with being involved in reducing the necessity of women and girls to turn to prostitution, ensuring people have adequate housing, and in ensuring the safety of children and youth, (goal #3) was tested in questions #32, #34, and #40. The opportunity to express their personal feelings on roles and responsibility in providing services to prostitutes gave another measure of their extent of agreement with goal 3.

The final assessment of agreement with P.O.W.E.R.'s goals came when they a) stated their agencies three primary goals on the questionnaire and b) were asked in the interview question # 40 "how do P.O.W.E.R.'s goals fit with the goals of your agency?

The strength of their agreement with the client group that P.O.W.E.R. served was tested in a number of ways.

First on the questionnaire, #4, they were asked if prostitutes constituted part of their client base. On the Likert scale questions they were asked to respond to #24, extent of regular access of prostitutes to their organization, #25, interest in increasing those numbers, #27, their views on the accessibility of services to prostitutes in Winnipeg, #28, their feeling of the need for their organization to be involved in providing support to prostitutes, #29, their perception of the need for their agency to be fiscally involved in ensuring service to this group, and #30, their perception of need for information on street life and prostitution for the staff of their agency. Interview questions #34 and #35 ask if the respondent feels he/she requires access to this client population and also if he/she wants ongoing access.

To test each agency's level of agreement with P.O.W.E.R.'s means of reaching their goals, in terms of the objectives they have set, and the activities they are pursuing in reaching these objectives, the following questions were asked. #25 on the interview asked service providers if they had a clear understanding of the policies and procedures followed at P.O.W.E.R., and if they felt they appropriately fit with P.O.W.E.R.'s goals. This, along with responses regarding the extent to which their agency's goals fit with P.O.W.E.R's goals elicited

responses on agreement with activities.

Perceived cooperative interaction was tested on the questionnaire in question # 16 where they could circle 4 responses ranging from positive and helpful uncooperative. Question numbers # 42 & # 43 used the 5 point Likert scale to measure perception of cooperation prior to the linkage as compared to since the linkage was established. On the interview several questions elicited responses on the level of cooperation. Question # 22 asked if they received adequate information, both general and client specific, from P.O.W.E.R staff. Although this also pertains to communication, it also elicited several responses as to perception of cooperation. Question # 23 asked the respondents if P.O.W.E.R. staff gave them sufficient opportunities for involvement in organization. Question # 26 asked if they received sufficient support from P.O.W.E.R. staff.

Goal similarity was measured in two ways. The respondents were asked to state the 3 primary goals of their agency in order of priority (#2). These goals were then compared with P.O.W.E.R.'s stated goals. The researcher then compared her perception of goal similarity with the respondents perception as elicited on question # 40 of the interview which asked, "How do P.O.W.E.R.'s goals fit with the goals of your agency?"

Resource scarcity was considered to be a factor if the

respondents in an agency perceived that there were insufficient resources to meet their stated goals. The dollar value of resources that the agency had at its disposal was not considered. The type of resource that was considered insufficient was noted, as there was a desire to find out if agencies interacted required different resources. Question questionnaire asked the respondent if the resource base of funds, staff, services, and space was sufficient to meet agency goals. Several questions in the interview addressed resource concerns. They were asked if their resource base had been stable in the past 5 years (#10). They were asked if they felt they could adequately meet their stated goals with the present resource base(#11). They were also asked how the linkage with P.O.W.E.R was affecting the resource base (#12). To determine what resources they felt their agency lacked they were asked what resource base they would focus on to improve service to clients(#15). Answers to all of these questions, from each of the 3 agency respondents, was used to compile a composite picture of agency perception of resource availability.

<u>Professional ideology and values</u> of staff were elicited during the interviews. Question #2 asked what professional groups were involved in providing each type of service. Responses to questions on goals of the

organization, factors influencing agency goals such as philosophical beliefs (#35), and questions related to the linkage with P.O.W.E.R. (#16, #17, #18, #19, #20, #28)combined with responses on individual and agency role and responsibility produced an abundance of information on philosophical beliefs and professional ideology.

Structural Characteristics of the Agency and Internal Communication were measured from answers to a variety of questions on the interview. To determine the complexity of the organization, horizontal differentiation, vertical differentiation, and spatial dispersion were considered. Horizontal differentiation was measured by considering

- 1. The number of occupational specialties
- The professional activity measured by the number of professional groups
- Professional training measured by the requirement for special training to be employed in the agency
 (Hage and Aiken, 1967; Hall, Haas and Johnson, 1967; Dewar and Hage, 1978; Beyer and Trice, 1979; Blau and McKinley, 9179; Friedson, 1973; and Hall, 1968)

The number of different occupations was ascertained on the basis of responses to question # 7 of the Administrators Questionnaire (Appendix) and the professional activity in the organization was determined by responses to questions # 2 of the interview and #8 of the questionnaire.

<u>Vertical differentiation</u> was measured by counting the number of supervisory levels. Of importance is the number of job positions between the chief executive and the employee.(Hall, Haas and Johnson, 1967; Meyer, 1968; and Pugh, Hickson, Hionings, and Turner, 1968)

Question # 3 of the interview requests this information.

<u>Spatial dispersion</u> is measured by the dispersal of activities and personnel in field offices. The number of offices increases the spatial dispersion. (Raphael, 1967; Hall, Haas, and Johnson, 1967)

Responses to question # 3 of the interview provides this information.

<u>Complexity</u> is considered to be a combination of the three components: horizontal differentiation; vertical, or hierarchical, differentiation; and spatial dispersion (Hall, 1982).

<u>Formalization</u> is measured by the extent of rules, procedures, instructions and requirement for written communication in the organization. (Pugh, Hickson, Hinings, and Turner, 1965)

Responses to questions #3b, #5 and #6 of the interview provides this information.

<u>Centralization</u> is measured by assessing the level and

variety of participation in decision making in the organization. The greater the participation the less the centralization. If the major source of decisions is delegated to the subordinate level the organization is considered to be decentralized. (Pugh, et al, 1965)

Responses to questions #3 and # 37 of the interview provide this information.

Internal Communication of the Organization was measured by counting the number of regularly scheduled meetings held per month in the unit interacting with P.O.W.E.R. plus the number of meetings at the Senior and Middle Management level. The perception of all levels of staff was also considered important in considering the effectiveness of the communication.

Responses to questions # 4 and #5 of the interview provide information on internal communication.

STRENGTH OF LINKAGES

The strength of the linkage between two organizations is thought to be determined by three factors:

- 1. The frequency of contact between the organizations.
- 2. The type of communication, (in person, telephone, meetings, letters).
- 3. The intensity of the relationship, (what is exchanged between the organizations-staff, clients,

funds, information, space, service,; and is the relationship informal or is there a service contract)
(Fleishman, 1990; Mulford, 1984; Galaskiewicz, 1979)

The <u>frequency of contact</u> was determined by examining the answers to questions #11 & #12 of the service provider questionnaire and #16 of the administrator questionnaire. Question #16 of the interview provided additional information.

The type of communication was provided in the answer to question #16 of the interview.

The <u>intensity of the relationship</u> was determined by analyzing answers to questions #10 of service provider questionnaire and #15 of administrator questionnaire plus question #16 of the interview.

DESCRIPTIVE FINDINGS

Each target agency will be described using the structural characteristics found in the literature. Staffs' perception of the linkage development phase with P.O.W.E.R. will be provided, as well as perceptions on the effectiveness of the relationship. Information provided by staff from both the target agencies and the focal agency, P.O.W.E.R., will be used in the analysis.

Alcoholism Foundation of Manitoba

Consistent with the design of this study, information on A.F.M. was provided by three staff, the service provider who attended the P.O.W.E.R. site, a middle manager, and a senior administrator. A.F.M. is a semi-autonomous government funded agency with its own board, providing substance abuse treatment and educational services to the citizens of Manitoba. Respondents were asked to state the primary goals of their agency, in the order of priority. The three respondents agreed that their first priority was to provide treatment for chemical addiction and misuse chemicals. Providing preventative educational services to the public was listed next and then, providing both family programming and training to other professionals and lay persons was mentioned as a third goal.

A.F.M. is of average complexity (looking at horizontal and vertical differentiation, and spatial dispersion) compared to the other organizations in the study, with 94 full time and 25 part time staff serving the Winnipeg and Southern Manitoba Region. There are also more than 40 volunteers who assist with services to a base of 843 active clients(January, 1993). Ιt is professionalised organization, that is horizontally differentiated, with 5 of the 7 occupations within the organization having a professional affiliation. The 7 occupations listed were: Nurse, Social Worker, Clinical Psychologist, Physician, Addiction Counsellor, Family Counsellor, and Residential Care Worker. There is also an emphasis placed on a common treatment philosophy for all staff, as each staff is required to take the 2 year Applied Addiction Counsellor course offered at the University of Manitoba. The organization is specialized both by professional requirement and training, and also by the division of labour. It is a relatively flat organization, with a low vertical differentiation, as there are only 2 supervisory levels between the staff and the Executive Director. The organization, however is spatially dispersed, with Manitoba divided into regions, each with a Regional Administrator; Northern, with an office in Thompson; Western, with an office in Brandon; and Winnipeg and Southern Manitoba combined. The

service is coordinated centrally from Winnipeg. Winnipeg region has sub units with specialized service provided in each unit. Women and Family Services is delivered out of the 588 River office; Preventative Education and Training and the Impaired Driving Program out of 1031 Portage office; and the Mens Treatment and Primary Care and the Youth Program out of the 1041 Portage office.

Procedures are formalized with written policy and procedures, operating manuals for staff, and a requirement for written job descriptions, written yearly job evaluations, and the circulation of meeting minutes. File recording is also required on all clients.

A.F.M. is a decentralized organization with many decisions delegated to the line level in the organization. Line staff can accept clients, refer clients and can agree on joint programs with other agencies. There is no protocol preventing a line staff from contacting another agency's director if there was a service need. Line staff are involved as part of a team in developing new programs, and have some input into new policy decisions.

Internal Communication within the organization is typical of other organizations with which P.O.W.E.R. established linkages ,with approximately 11.5 meetings per month in the Women's Centre and at Middle and Senior Management levels. (Within the 7 agency's the least

number of meetings per month was 6, while the highest number was 17.6.) Senior Management at A.F.M. meets every 2 months due to the distance required for travel for the Regional Administrators. Middle Management meets every 2 weeks, and the Supervisors of the various programs meet weekly. The Women's program has a monthly business unit meeting and weekly case planning meetings, usually attended by the Clinical Psychologist. A.F.M. also has a quarterly newsletter that keeps each region informed of the activities in other regions. Working committees are used to involve representatives from the various regions. (Adult Treatment Committee, Adolescent Treatment Committee, Prevention Committee and Staff Development Committee) These committees meet 4 times a year.

It is not actively encouraged for A.F.M. staff to be involved on other boards or committees in the community, however, if a formal request goes to the board and it is seen as appropriate, a staff with suitable expertise will be sent. All staff mentioned that there is always a concern for any conflict of interest in any of these interactions, and that their primary concern would be better service to the community.

A.F.M.'s resource base has been stable over the past 5 years. One staff felt the base is adequate for meeting the goals of the agency while 2 staff felt that funds are inadequate. There was some agreement that an increase in

funds to hire staff to provide service in two areas where it is lacking(youth and elderly) would be optimal.

The <u>linkage</u> between P.O.W.E.R. and A.F.M. initially involved a formal contract from July 1, 1992 to December 31, 1992. This contract took repeated negotiations, as A.F.M. felt they could not provide a worker unless the service was paid for by P.O.W.E.R. A.F.M. offered other alternatives, such as training P.O.W.E.R. staff instead of providing a worker. There was pressure applied to A.F.M. by the Department of Health as A.F.M. also receives funding from Health. It seen as inappropriate to pay A.F.M. for service, when both organizations received funding from the same source. A.F.M. staff attended the P.O.W.E.R. site weekly to provide information and counselling on drug and alcohol use, and to do chemical dependency assessments on site. She also referred to treatment programs. P.O.W.E.R. staff provided information and education to staff at A.F.M. on the target group clients. The linkage consisted of shared clients, information sharing, shared personnel, shared space, service to A.F.M., service from A.F.M., funds to A.F.M. and a service contract. This contract , however, was not renewed in 1993. At the present time there is informal contact, which is irregular, and usually by telephone. The intensity of resources exchanged is weak, with P.O.W.E.R. making a few referrals to A.F.M. and

A.F.M. providing some training to two P.O.W.E.R. staff. In terms of reciprocity it is a bilateral relationship with each agency receiving one resource. This would not be defined as a linkage for the purpose of this study, as the relationship is not regularized.

Several reasons were provided by A.F.M. staff for the difficulties which arose during the formal contract. A.F.M. felt that the relationship was imposed, due to the pressure applied by the Department of Health to provide services to P.O.W.E.R. There was general agreement by both agencies that the initial contract was ineffective. Two A.F.M. staff felt that they were no more informed about prostitutes than they had been prior to entering into a service contract with P.O.W.E.R. All staff felt that the number of target population referrals to A.F.M. had not increased, and that prostitutes had always had access to A.F.M. service. There was also a feeling, by A.F.M. staff, that the relationship had not been symmetrical, as A.F.M. was obliged to provide a staff to P.O.W.E.R., and they felt they were not receiving anything in return. There was a perception by A.F.M. staff that the A.F.M.service provider was underutilized at P.O.W.E.R., as few clients were accessing her services, and she had a waiting list of clients at A.F.M. The original agreement was formalized, with agreement on hours of service, and type of service. P.O.W.E.R. staff

had expected some flexibility in type of service, expecting that some outreach in the community would be part of the arrangement. Outreach was started, but discontinued, as A.F.M. felt that it was unsafe, and not part of their usual mandate. The level of cooperation, as perceived by the majority of staff from both agencies, was stated as 'inconsistent, depending on the individual'. Staff from both agencies are more satisfied with the present informal contact, rather than the previous formal linkage.

Winnipeg Child and Family Services

Individuals, representing three levels of the W.C.F.S. organization provided information for this analysis. W.C.F.S. has been in existence approximately two years. It is a government controlled agency which resulted from the centralization of 6 Child and Family Services Agencies, and the dissolution of their community-based Boards of Directors. Prior to the move to centralization they were private, government funded, but community board controlled organizations. The new organization has a set of guiding principles ,agreed upon by a newly appointed government board, but at the present time there are no written goals and objectives. The guiding principles speak to a dedication to the highest quality service which is both efficient and fiscally responsible. They

ascribe to reaching the need of diverse cultures, with a commitment to work to keep families together. They also state they are committed to community involvement, working together with other agencies, and in providing opportunities for staff to acquire new skills. The present staff reiterated the same three goals, some defined by statutes and the Act, and others possibly a carryover from the old agencies:

- 1.'Protection of children from abuse and neglect' or'
 ensure the safety and well-being of children.'
- 2.'Concerned with the best interests of children and families' or 'provide intervention and services to families with a goal of reuniting families or preventing family breakdown".
- 3.'Responsible for the care of children in our system' or 'ensuring appropriate alternate care and adequate treatment for children who need it'.
- W.C.F.S. is the most complex organization in the study, with a total of 360 full and part time staff(a breakdown was not available), 560 volunteers and a client base of 26,147. Service is coordinated centrally by an Executive Core, with both the Executive Director and the board appointed by the government. W.C.F.S. is horizontally differentiated with the following 9 occupations listed: Receiving Home staff, Family Support Workers, Homemakers, Adoption Workers, Intake Workers,

Crisis Intervention Workers, High Risk Workers, Independent Living Workers, and a Volunteer Coordinator. Educational background of staff varies from a grade 12, to Community College Child Care Certificate, B.A., to B.S.W. and M.S.W. Only the Social Workers have a professional association, however all staff except the homemakers and receiving home staff are required to have related professional training in the social services field. The organization is specialized by a division of labour, and professional training. Vertical differentiation shows 3 supervisory levels between the chief executive officer and the line staff. The organization is spatially dispersed with Winnipeg divided into 4 areas, each area having from 4 to 6 field offices a different location. The individual offices are further divided into specialized teams. The Executive Core is located separate from the area offices at 200-185 Carleton.

The Northwest unit, which interacts with P.O.W.E.R., has approximately 90 staff. This unit consists of the Main St. Office, where the Area Director and the Children's Resource Team is located, and 4 other field offices, on Bannerman, Salter, McPhillips, and Keewatin.

The organization has a low level of formalization at the present time and units are operating by following the Act and remnants of policy from the old agencies. Written job descriptions for all staff are projected to be completed in 3 months. There is also no staff manual with operating procedures. This is not surprising, considering that goals of the organization have not been finalized. There is, however, legislation which guides practice within the organization. Written file recording appears to be the main formal requirement for written communication.

This is a highly centralized organization with policy being developed at the Executive Core and Appointed Board level. Service decisions are only delegated to the unit level with the line level staff having little autonomy. Unit Supervisors are involved in accepting and referring clients, and in decisions around joint programs. Communication to the Director of another agency would be initiated by a Director of W.C.F.S.

Communication, measured by the number of meetings per month, is higher than average compared to the other organizations in this study. The Executive Core meets weekly, as do Senior Management and Area Directors. In each area, the Area Director meets weekly with the Supervisors. The Supervisors then meet weekly to give staff feedback ,at the unit level, from the Senior Managers. There is a general meeting for all staff every 3 months for an average of 16.25 meetings per month. Even though it would appear that communication is good, staff

felt that it was less effective than under the old structure. There is some use of committees to involve line level staff. The Service Delivery Committee has line level staff members which gives them an opportunity to speak to the Executive Core on policy and service issues. Other committees are the Work Place Health and Safety, Benefits/Negotiations, and Labour Relations Committee.

Involvement at a community level on boards and committees is not actively encouraged by W.C.F.S., even though their guiding principles would appear to support this. Most involvement at the present time would be by Supervisory level staff or higher, and appears to be on an individual's own initiative.

There was general agreement that W.C.F.S.'s resource base is insufficient to meet service goals. Most resources are expended on protection, while preventative and educational goals are secondary. Most serious cuts have come in the past year with a cut in per diem funding and salary cuts. All staff agreed that there was a need for money to hire more staff to provide more services. The client numbers have increased drastically, while dollars have decreased. They feel resources are inadequate for goal attainment.

Winnipeg Child and Family Services signed a formal linkage (contract) with P.O.W.E.R. in March 1992. They agreed to provide a social worker on site weekly (8-12)

hrs.). The service consisted of consultation for P.O.W.E.R. staff on child protection, advocacy, parenting, and C.F.S. resources. There was also a direct service to clients under age 18 years of age, when requested, and direct service on parenting issues to P.O.W.E.R. clients.

P.O.W.E.R. staff also provided educational sessions to C.F.S. staff on the target client group. The linkage that was developed consisted of shared clients, information sharing, funds to C.F.S., service contract, shared personnel, shared space, service to C.F.S., and service from C.F.S. For the first 5 months of the service contract, July 1, 1992 to December 31, 1992 P.O.W.E.R. paid for the C.F.S. worker's time. When the contract was renegotiated in January 1993, C.F.S. offered to provide this service without cost as they saw it as their responsibility to provide service to these clients. This is a strong linkage, with personal contact at P.O.W.E.R. weekly. There is also regular contact by phone on issues that arise on non service days. Service is also provided on weekends, on an on call basis. There are a number of resources exchanged and both agencies feel that the relationship is reciprocal, and of mutual benefit. C.F.S. representatives felt that they are reaching a client base that they had been unsuccessful in reaching before. They also feel that their staff are able to develop a more

trusting relationship with 'at risk clients'. A secondary benefit mentioned is the link with Salvation Army that has been established. C.F.S. respondents feel that they are accessing service in the community that had previously not been available to them. This is a strong formal agreement, which is fairly flexible as to hours on and off site. Service need appears to dictate the relationship. Perception by staff from both agencies is that cooperative interaction is excellent. Both agencies feel that they benefit from the relationship.

Children's Home of Winnipeq

CHOW is a private, not for profit organization , which receives its primary funding from the Department of Family Services. The Department of Education provides some funding as does the Federal Government through Canada Employment. It is one of the oldest institutions in Western Canada, starting off as an orphanage over 100 years ago. It has evolved over time to try and meet the needs of the community. CHOW offers 11 programs, which are: Family Therapy, Training for Child Welfare Workers, Parent Support Group, 3 Vocational Training Programs (Resources Adolescent for Parents, Training Employment Resources for Females, Training Resources for

Youth),3 Residential Care and Treatment Facilities, Project Opikihiwawin, Services for the Multiple Handicapped, Independent Living Program, Open Treatment Centres.

The department that interacts with P.O.W.E.R. is T.E.R.F. and their first three goals are as follows:

- 1. To help women make a transition from the streets.
- 2. To help women with parenting skills
- 3. To help women find employment which meets their financial needs.

CHOW is of average complexity, with over 100 employees offering a range of services. The T.E.R.F. program has 6 full time employees and shares 3 employees with another department. There are from 15-25 clients in the program time. The organization is horizontally differentiated by occupational speciality with occupations listed as follows; instructors, experience coordinators, case managers, program managers, proctors, proctor coordinator, family therapist, clinical director, group home personnel, treatment workers, parent support workers, professional parents, and one on one workers. Of these, 4 have a professional organization; psychologist, social worker, psychiatric nurse, education. For many of the positions professional training is required, and a variety of staff have the following degrees/qualifications; B.S.W., M.S.W., M.Ed.,

R.P.N,or professional Psychologists. A few staff have a grade 12 and related experience in the field. It is a relatively flat organization with 2 supervisory levels between the chief executive and the line staff.

Procedures are formalized with written job descriptions, written operating procedures for staff, written minutes of all meetings circulated, and written yearly evaluations of staff. File recording is also required on all clients.

There is some hierarchical decision making but there is staff involvement on committees from the board level (Orientation/Review , Finance, Personnel,) to working level committees (Work Place Health and Safety, Social, Special Events, and Critical Incident ad hoc ie. Aids) Decision making, as to accepting or referring clients, is made at the team level with both line level staff and immediate supervisor involved.

Internal communication is high, measured by the number of meetings per month. Senior Managers meet weekly as do the Senior and Middle Managers. Each program has weekly meetings and case managers meet weekly for clinical consultation. Administrative planning occurs monthly and professional development meetings occur every 6 weeks for a total of 17.6 meetings per month. All staff interviewed felt that the level of communication was good.

Staff are encouraged to be involved on community boards

and committees. The three staff interviewed sat on a total of 5 community boards and/or committees.

There has been a decrease in the CHOW resource base in the past 5 years. Federal dollars were cut 3 years ago, with the worst cuts in program dollars in the past fiscal year. Funds are insufficient to meet the community demands, which resulted in a deficit that the CHOW is currently repaying to the Province. Approximately 7 staff have been laid off over the past 5 years and others have been relocated within the organization. Staff feel that they adequately meet goals in most programs due to the staff commitment, but that services to the multihandicapped and T.E.R.F. is underfunded. If funds were available there was a variety of ideas for service expansion ranging from bridging to the Aboriginal community, and improving link with P.O.W.E.R., to increasing staff and more training for paraprofessionals. It is felt there is also a need for services when a client reaches age 18 and treatment for violent and sexual offenders.

CHOW informally linked with P.O.W.E.R. in the summer of 1992. A staff from their T.E.R.F. program attended the P.O.W.E.R. site 1\2 day per week. This case manager provided information to target clients on the T.E.R.F. program, and did screening and preliminary testing for the program. She was withdrawn by CHOW from the

P.O.W.E.R. site in the fall of 1992 to facilitate the T.E.R.F. program. This initial informal linkage consisted of shared clients, information sharing, shared personnel, shared space, service to CHOW and service from CHOW. There are ongoing negotiations with a view to developing linkage. Presently the organizations share joint clients and share limited information. Contact between agencies is infrequent, with a few referrals to T.E.R.F., a few formal meetings to negotiate a linkage, and infrequent exchange of written program information. Staff from both agencies feel that the relationship is ineffective at the present time. The continued negotiations confirm the expressed commitment to improve this relationship.

City of Winnipeg Social Service

W.S.S. provides financial assistance to people in need within the City of Winnipeg. They are also involved in a variety of other services which include; rehabilitative services(job groups, counselling, and work with families), an evaluation function which provides the City of Winnipeg with information for funding decisions, outreach to people at risk such as the elderly and dysfunctional, emergency relief (people evacuated to the city during forest fires), Community Services Project (hire clients on assistance to do maintenance for the

city), and Employment outreach (searching out employers for clients out of work). The three primary goals mentioned by all staff were:

- 1. Provide financial assistance
- 2. Employment outreach and job readiness training
- 3. Counselling, support, crisis intervention

W.S.S. is a large municipal government organization with 160 full time staff and 16,000 clients. They are of low complexity as compared to the other organizations.. It has little horizontal differentiation with only four occupations mentioned; business administrator, social worker, pharmacist and eligibility worker. Of these, the social worker and pharmacist have professional affiliations. A few eligibility workers have a B.A., however social work is the degree preferred. Staff are encouraged to enrol in courses if they do not have this degree. Vertically the organization has 2 levels of supervisors between the Director and the line level staff.

The organization is spatially dispersed, and their catchment area is divided into 5 regions and sub offices. Some service is centralized with the downtown office responsible for the Employment Section, Special Services, Rentals and Accounting. Sub offices each have intake, income maintenance and family responsibilities. Programs are centrally driven, however sub offices have autonomy

to develop their own initiatives. Authority is delegated to the Supervisory level of staff, with line level staff making decisions on acceptance and referral of clients according to the procedures manual.

The organization is formalized with all staff having a written job description, and there is a requirement that staff will receive a yearly written evaluation. (Not always attained.) There is a written procedures manual, and an expectation that staff are making file documentation.

Internal communication is informal and meetings tend to be ad hoc, rather than regularly scheduled. Communication rated by the number of meetings per month is low, with an average of 8.5 . Main Street office which interacts with P.O.W.E.R. has a staff meeting every Monday. The Program Managers meet with Supervisors informally approximately 1-2 times a week, with notification being a phone call the day before. Focus appears to be on informality with a staff Communication Day happening in each section approximately every 2 months where staff can raise concerns with their Supervisors. Departments make use of committees for assessments and decision making such as the Mortgage committee, and the Self Employed committee. Task forces, that are less structured , are also used to involve line level staff in increasing efficiencies. For example, such a task force studied and recommended

implementation of direct bank deposits. Even with this involvement, respondents felt that the organization might be perceived by line level staff as 'top down'.

The resource base was stable over the past 5 years, but is at most volatile at present time with the Province of Manitoba no longer accepting responsibility for Student Allowances. In spite of this, two staff felt goals could be reached because of good staff and continued efficiencies. One staff felt resources were insufficient and that more social workers and more training was needed. It was agreed that interaction with other services would be beneficial.

The City of Winnipeg Social Services is formally linked to P.O.W.E.R. with a signed service agreement, to provide 1\2 day a week service at the P.O.W.E.R. site. This agreement has been in effect since March 1992, with no cost to P.O.W.E.R. The W.S.S. social worker connects with P.O.W.E.R clients, provides social assistance to eligible clients, assists them with budgeting issues, and refers to training and treatment programs. She has approximately 25 clients on her caseload at P.O.W.E.R. Some were on Social Assistance previously and have switched to her caseload, and some new clients contacted at are P.O.W.E.R. This is a strong linkage with daily contact, either by phone between agencies, or by P.O.W.E.R. clients dropping in to the Main St. office to see the

social worker. Formal personal contact between the W.S.S. social worker and P.O.W.E.R. staff occurs weekly at the P.O.W.E.R. site. The linkage consists of shared clients, information sharing, shared personnel, shared space, service to P.O.W.E.R., and service from P.O.W.E.R. to W.S.S. The linkage at the present time is strong.

Both agencies feel the relationship is balanced, with benefit to both. W.S.S. feels that this linkage has provided them with outreach into the community. One respondent stated that the linkage provided W.S.S. with a "mirror on our own bureaucracy". They feel that they have a better understanding of this client group, and can respond more effectively to their needs. They also feel that they have been able to develop trust, which was previously lacking with this group of women, and that they are now perceived in a more positive way by this client group. The agreement is in writing, with hours of service specified. This arrangement is flexible, however, and time on site may be adjusted due to service provided at other locations.

Legal Aid Manitoba

- L.A. is a government agency providing legal services to the citizens of Manitoba. Their three primary goals are:
- 1. To deliver formal legal service to indigent people
- 2. To deliver informal duty counsel & legal advice to all

3. To provide community services - public interest legal initiative, education, involvement on community boards The organization is highly professionalised with only two occupations; lawyers and paralegals. There is thus little diversity in occupation, and only one professional group. The horizontal differentiation is very low. Vertical differentiation is high with 3 levels of supervisors between the Executive Director and the practising lawyers.

Legal Aid has 100 full time employees, 2 part time, and 27,000 clients. Offices are spatially dispersed with 3 offices in Winnipeg and 4 rural offices in Brandon, Dauphin, The Pas and Thompson. Winnipeg offices are specialized with the Main St. Office delivering all family and civil services to Winnipeg clients. Criminal and Youth Services are out of the Broadway office. The Administration is located separately at 402-294 Portage Ave. where all budget, personnel, and policy issues are handled. Certificates, approving applications for legal aid, are issued from here, as well as all payments to private lawyers providing service for Legal Aid. Each rural office also issues certificates. Each office has a Supervising Attorney responsible for services in that office. They report to the Deputy Director. The organization is of average complexity compared to the organizations in this study.

The agency is highly formalized and centralized. Staff have written job descriptions, follow a procedures manual, and have no authority to accept clients. Lawyers at the line level accept applications and send them to the Administrative Office for the Supervisors approval. Service is then delivered according to policy. Approval of joint programs is at the Deputy Director and Board level. Contact with another agency's Director would be initiated by the Administrative Office.

Senior Management meets 4 times a month. Senior Attorneys meet every 2 months, with each office giving an update and raising any concerns. Due to the location of rural offices it is felt that it is not practical to meet more often. The Deputy Director attends the Community Law Office meetings twice a year. Individual offices meet monthly. There have been no annual staff meetings due to budget restraints. Task forces are used for planning purposes on an ad hoc basis. A regular Labour Management Committee meets every 2 months and additionally when needed, for planning and resolution of issues. Two union members and one or two staff from management constitute this committee. Communication measured by the number of meetings would be low at 5.5 per month. The general feeling by respondents was that communication at the Main St. office was informal and open, but that communication between offices was poor.

There was internal disagreement as to resource need within L.A. The resource base has been stable over the past 5 years and one staff felt that they could meet goals with this base. Two staff felt that both funds and staff were insufficient to meet the need and 1 staff also felt services were lacking. If more money was available, services to remote communities and more education was mentioned as an area of expansion. If there was more funding it was felt that the criteria for representation should be broadened, as at the present time people who may be unable to afford their own lawyer were considered ineligible for legal aid.

There was also a strong <u>linkage</u> developed between Legal Aid and P.O.W.E.R. The initial formal agreement reached July 1, 1992 specified 4 hours service per week. This linkage hinges somewhat on the funds received by L.A. for the service contract. One respondent questioned the appropriateness of 'reaching out' to one specific client group. There was a feeling that there was a need for in remote communities, which precedence, if L.A. received more money to expand service. Contact between L.A. and P.O.W.E.R. occurs daily by phone. Personal contact is weekly, with a lawyer on site at P.O.W.E.R. now spending approximately 1 1\2 hours per week. The terms of the agreement were renegotiated , as both Legal Aid and P.O.W.E.R. felt they could better

meet the need of the clients if the lawyer spent time in court representing P.O.W.E.R. clients. Total service to P.O.W.E.R. clients averages approximately 10 hours per week, considering time in court, and time at the Legal Aid office. Resources exchanged include; shared clients, shared information, shared personnel, shared space, service in both directions, and funds to Legal Aid. P.O.W.E.R. provides education and information on the target population, to Legal Aid lawyers. organizations are satisfied with the linkage, and feel that there are mutual benefits. L.A. feel they have an increased understanding of the client group and can respond more effectively.

The L.A. respondents feel that the client groups access to Legal Aid has improved. There is also a feeling that there has been an increase in trust between the client group and legal services. There has been no negative impact on Legal Aid as there is a payment for service and any backlog in other cases, that the office can not handle, are referred to private law offices.

Salvation Army

Three levels of staff were also interviewed at S. A. to get an understanding of their organization, and their perceptions of the linkage with P.O.W.E.R. S.A. is a

private, not for profit, organization located within the City of Winnipeg. Most services are to people from the city, however services to people in transit are not uncommon, as well as referrals from rural areas. The overall goals of the organization were stated as: "Ministry to the total person; Spiritual, Physical, Mental, Emotional, & Social through the delivery of basic human needs, & specialized regenerative and rehabilitative programs to individuals regardless of race, color, creed, sex, or age."

S.A. is a large organization with 159 full time staff, 63 part time staff approximately 30 volunteers and 375 clients. They offer a wide range of services such as: Home for Unwed Mothers, Correctional Services, Crisis Stabilization Unit for Mental Health clients, Mental Health Group Home, Anchorage Alcohol and Drug Treatment program, Hostel for Men, Hostel for Women, Literacy Program, Community Ventures Day Program for the Mentally Disadvantaged, Thrift Stores, Sheltered Employment Option for Mentally Disadvantaged, and the Public Relations Department and Red Shield Appeal.

Women's Services which runs the hostel is the unit interacting with P.O.W.E.R. Women's Services provides beds for Mental Health Clients, Battered Women, transients, and P.O.W.E.R. clients. They also run a 12 bed Chemical Dependency Program. Their stated goals are:

- 1. To provide residential services to those in need.
- 2. To provide other social needs.
- 3. To meet spiritual needs.

S.A. is complex organization very 21 occupations, excluding all supervisory and office staff. There is little professional training required in the organization other than the addiction counsellors, a few social workers and nurses. Only 3 occupations have a professional affiliation, Psychiatric Nurses, Social Workers and the Clergy. There is vertical differentiation of 3 supervisory levels between the Executive Director and the line staff. S.A. is spatially dispersed with 11 specialized separate units, some located in the same building, others in locations. The Crisis Stabilization Unit has separate funding and separate staff, while other services are all connected by reporting to the same Program Director. Each service has a coordinator, however all service is centrally coordinated. Centralization is high with major decision making at senior levels of management. Joint programs would be approved by the Executive Director. Residential care workers could accept and refer a client if it was prescribed as to procedure in the operating manual.

Formalization is high with a staff manual with very specific operating procedures. The Supervisor is

responsible for ensuring rules are followed. Each staff has a written job description, and yearly evaluations are recommended, though not always carried out.

Internal Communication is low , measured by the number of meetings per month, which on an average is only 6. The Executive Committee, (consisting of the Executive Director and his wife, all Salvation Army officers and their wives, the Program Director, and the Administrative Director) meet every 2 weeks. They deal with policy and procedure changes, and any new program submissions, which would go to divisional headquarters for review and approval. There is a Finance/Administration meeting monthly with all officers, all coordinators, Program Director, Administrative Director and Executive Director chairing. The Program Manager meets with the Coordinators each month, and each unit has a meeting each month. There is on case conferencing meeting monthly in Women' Services where restrictions on residents are discussed, and decisions made about penalty's for disruptive behaviour. The committee structure is not used for involving staff in S.A.

It would appear that lower levels of staff are not encouraged to be involved on boards and committees in the community. However, at the Coordinator level and higher, there is community involvement. S.A. actively participates on the Interagency Committee, Mental Health

Committees, and Employee Assistance. It is stressed that involvement must be on appropriate boards and committees that have a philosophy fitting with that of S.A.

Salvation Army's resource base is at its most unstable period in the past 5 years. This year saw a serious cut in the per diem rate for beds and the City grant for after hours emergency service was cut. The resource base inadequate for meeting objectives in Services. There is no Social Worker, no Activity Worker, and no Child Care Worker in this program. In other areas maintenance, but no new services will be the rule. It was expressed that "Maintenance means losing ground". If funding was available one staff felt priorities would be more staff to expand services, hiring a volunteer coordinator to make better use of volunteers and to link with other volunteer organizations, and linking with other organizations. Another staff felt numbers of staff was okay, but training for dealing with increased mental health patients would be a priority along with an improved facility with a gymnasium and a classroom with computers .

There has been an informal <u>linkage</u> developed between P.O.W.E.R. and Salvation Army. In the initial stages of the linkage S.A. agreed to provide hostel beds to P.O.W.E.R. clients, and they were willing to make concessions for these clients as to curfew times, and by

providing a separate room. S.A. staff indicated that having two sets of rules in the hostel caused confusion for both S.A. staff and other residents in the hostel This practise has been discontinued. This linkage is currently weak with limited referrals to Women's Services for hostel beds. Information is exchanged, usually on a weekly basis, by phone. Any beds provided for juveniles, are paid at per diem rates by P.O.W.E.R. Per diem rates, for adult women using the hostel, are usually paid by W.S.S. P.O.W.E.R. has provided some educational information on the client group to S.A. staff. A P.O.W.E.R. staff also sits on the Inter Agency committee chaired by Salvation Army. S.A. feel that they have made some connections with the community, because of this informal link with P.O.W.E.R. (ie. A worker from W.C.F.S. is on call weekends for any juvenile girls using the hostel beds.) Neither S.A. nor P.O.W.E.R. are satisfied with the relationship. There is some feeling of increased knowledge of the client group, and increased exposure to the community, by S.A. staff. There is also a feeling that they can not meet P.O.W.E.R.'s expectations, and that these expectations are somewhat unrealistic. There was also a feeling that P.O.W.E.R. staff had not adequately educated the S.A. staff on problems they might anticipate with this client population. There has been problems with communication between the two organizations

leading to perceptions of only fair cooperation. There appears to still be the will to continue attempts to improve the linkage.

Summary of Descriptive Findings

To summarize, there is no apparent relationship between the internal structural phenomena of the six target agencies, and the tendency toward a formal linkage. Two tables follow which illustrate the linkage and non linkage agencies and their respective structural descriptions.

Table # 1

Linkage Agencies

Complexity	L.A. Ave.	C.F.S. High	W.S.S.	S.A.* High
Size (#full time staff)	102	360	160	159
Extent	High	Low	Ave.	High
Extent Centralized	High	High	Ave.	High
Internal Communication	Low	High	Low	Low

^{*} Salvation Army's linkage is informal and weak, whereas the other three are formal and strong.

Table # 2

No linkage

	A.F.M.	CHOW
Complexity	Ave.	Ave.
Size	94	100
(#full time staff)		
Extent	Ave.	Ave.
Formalized		
Extent	Low	Ave.
Centralized		
Internal	Ave.	High
Communication	11.0.	111911

Hypothesis Testing

 The greater the similarity of goals - the greater the perceived cooperative interaction

The program, T.E.R.F., a service provided by CHOW has goals which are the most similar to P.O.W.E.R.'s stated goals. Both P.O.W.E.R. staff and CHOW staff agree on the similarity, and both agencies staff also agree that cooperative interaction is low. S.A. has stated goals that are different from P.O.W.E.R.'s and staff from both agency's agree that they are different. Cooperative interaction was stated as low by both sets of staff. The other four agencies have stated goals which, P.O.W.E.R. and target agency staff feel, are complementary. There is, however, differing amounts of perceived cooperation between these target agencies and P.O.W.E.R. L.A., W.C.F.S., and W.S.S. all express high cooperative interaction, as do P.O.W.E.R. staff. In the case of A.F.M. the perceived cooperation was low at the time of formal linkage, while staff from both agencies state that the cooperative interaction has improved since the formal linkage ended. In conclusion it would appear that similar goals do not necessarily increase the

2. The greater the difference in the resource requiredthe greater the perceived cooperative interaction.

The literature suggests that if agencies require different resources, they are more likely to interact cooperatively ,than if they require the same resource. There is the supposition that they would be in a competitive position if they are seeking to acquire the same resource, and would not be likely to interact cooperatively. The resource that P.O.W.E.R. needs is service from other agencies. They are attempting to get the target agencies to place a staff at P.O.W.E.R., to provide services onsite. One would then assume that organizations needing resources other than staff or services would be more likely to interact with P.O.W.E.R. Legal Aid disagreed internally as to resource need. Two staff felt funds and staff were inadequate for goal attainment, while one felt resources were adequate. This would suggest that L.A. would be unlikely to interact cooperatively, as they would be in competition for the same scarce resource, 'staff'. W.C.F.S. staff all agreed that both the numbers of staff and services were

inadequate for goal attainment. They, too, would then be unlikely to interact cooperatively if this hypothesis holds true. W.S.S. felt that resources were adequate for goal attainment and they could then be seen as likely to interact cooperatively as they are not in a competitive position with P.O.W.E.R. Childrens Home, who are still negotiating with P.O.W.E.R., felt that resources were adequate to attain goals in most program areas. The programs that were felt to be underfunded, were T.E.R.F. and services to the multihandicapped. Since P.O.W.E.R. was seeking to provide services to the same client group as the T.E.R.F. program, one might expect CHOW to interact cooperatively to better meet this groups need. A.F.M. also disagreed internally as to need. One staff felt resources were adequate for goal attainment, while two staff felt resources were lacking to provide services in some areas of Manitoba. Both staff and services were mentioned as being insufficient. One might then expect some feeling of competitiveness. Salvation Army, with a weak link, and low cooperation, feel that all resources, except physical space , are lacking. Women's Services was mentioned as the most underfunded area of S.A. They could also be seen as competitive for the same resource as P.O.W.E.R. Difference in resource required did not appear to increase the perception of cooperation, as both Legal Aid and Winnipeg Child and Family Services formed

a strong linkage with a high perception of cooperation.

Both these agencies were requiring the same resource as P.O.W.E.R. Winnipeg Social Services also formed a strong linkage with a high perception of cooperation.

Stability of resource base, also appears to be unrelated to linkage formation. The three agencies, who felt that their resource base had been relatively stable over the past 5 years, responded differently. A.F.M. discontinued a formal linkage, Legal Aid formed a strong cooperative link, and W.S.S. also formed a strong stable link.

3. The greater the perceived domain consensus - the greater the perceived cooperative interaction.

There are five variables within the concept of domain consensus. To determine the extent of consensus, each variable was assessed separately, and then the overall agreement was assessed as low, medium, or high. The findings are a subjective assessment, which takes into consideration the perceptions of individuals in an organization. These individuals are verbally describing their interpretation of their respective agency's agreement with the suitability of P.O.W.E.R.'s 3 goals, the agreement with the client group identified, and the agreement with the services P.O.W.E.R. provides to this

client group. Further complicating the concept of domain consensus, is the fact that the researcher further interprets these assessments. Each variable is assessed on a 5 point Likert scale showing the extent of disagreement or agreement with the 5 variables. The #1 represents strong disagreement, #2 disagreement, #3 undecided, #4 agreement, and #5 strong agreement. Answers to questions on the questionnaires, and the interview, are used to form a composite scale for each agency. Each agency will first be considered separately.

A.F.M. was assessed a composite score of 3 representing strength of agreement with P.O.W.E.R.'s goal #1. A.F.M. did not show a strong interest in linking with other agencies. Involvement on other agency boards was not encouraged, and the A.F.M. board first had to assess for conflict of interest concerns prior to appointing someone with suitable skills to sit on a community board. When asked if the service agreement was an appropriate mechanism for providing service to prostitutes, one person felt it was not necessary, one had 'no comment', and one felt it was very appropriate. It was also observed by one staff that A.F.M. 'did not do outreach'. A.F.M. staff did not agree on whether there was a need to increase the number of prostitutes accessing their services. One staff felt it was not necessary, while two agreed that they could increase their numbers. Overall

the researcher was left with the impression that A.F.M. was neutral, or undecided as to the benefits of linking with other agencies. A.F.M. was assessed a composite score of 5, depicting strong approval of P.O.W.E.R.'s goal #2. A.F.M. was concerned with reducing the short and long term health risks associated with street life and prostitution. They were also interested in preventative health measures. All staff showed a strong agreement with these principles. A.F.M. was also assessed a composite score of 5, depicting strong agreement with goal #3, deterring women and girls from turning to prostitution. A.F.M. staff were uniformally in agreement prostitution was an unhealthy lifestyle, and that this was a worthy goal. Variable #4 was given a composite score of 2. All A.F.M. staff felt that services to prostitutes had always been available in Winnipeg. They also stated that prostitutes had routinely accessed A.F.M. for services. There was general disagreement with the need for special services with this client group. A.F.M. was assessed a composite score of 1 showing strong disagreement with P.O.W.E.R.'s operalization of goals into service provision. There was a perception that the goals were appropriate, but there was "a conflict in ideas" as expressed by one staff, or as another stated, there is conflict around how 'best service' is defined". A.F.M. staff perceived P.O.W.E.R. staff to be

overprotective of the client group, and not attuned to the necessity of the client "getting off the street", prior to treatment for substance abuse. One staff expressed the view that there is a high correlation between "using and working the street". A.F.M. staff all agreed that it was not appropriate to be in treatment and continue in prostitution. Part of their program involves making decisions about important lifestyle changes. The total score for A.F.M. on domain consensus is 16 out of a possible 25.

Legal Aid was assessed a composite score of 4 , depicting agreement with goal #1 of P.O.W.E.R. Two respondents strongly agreed that the service agreement was an appropriate mechanism for service delivery. One staff felt that it was appropriate if the government had money to fund this type of arrangement, but felt that this particular client group might not be high on L.A.'s priority list if L.A. was funding. All staff felt that linkages with other agencies was appropriate, but time constraints prevented L.A. from as much outreach as they might otherwise do. L.A. expressed no interest in goal #2, as health concerns associated with prostitution was of no particular interest. They did not, however, feel it was an inappropriate goal for P.O.W.E.R., and were thus scored as 3. L.A.'s agreement with goal #3 was also

scored a 3, as there was no particular feeling expressed either way, as far as deterring girls and women from prostitution. L.A. generally felt that legal services had not been inaccessible to prostitutes in Winnipeg. One respondent wondered if it was appropriate to target one particular client group for special treatment. It was also felt that there were other client groups that were more in need of this type of service, such as in remote communities. Composite score assigned was a 2. As far as services provided at the P.O.W.E.R. site, there was complete agreement. A.F.M. felt that having a lawyer at the P.O.W.E.R. had increased their ability to develop trust and provide enhanced service. They saw P.O.W.E.R. operating appropriately in the area of service provision. A.F.M was thus scored a 5 for this variable, giving a total score of 17,out of a possible 25, for domain consensus.

Salvation Army expressed some interest in linkages, with one staff suggesting that linkages would help prevent duplication of services. There was a concern that linkages with other agencies were appropriate, fitting the philosophy of S.A. One staff stated that S.A. was involved on other boards in the community, however, other staff felt that community involvement was not encouraged. The researcher was left with the impression that this was not a priority with S.A. and assessed a score of 2 for

Goal #1. Two staff were in agreement with the goal of reducing the health risks associated with prostitution, while they were undecided about preventative health. Staff were in agreement that prostitution had inherent health risks and thus the composite score assessed on goal #2 was a 4. S.A. was in strong agreement with goal #3. They feel that prostitution is an unhealthy lifestyle choice, and are in strong agreement with deterring women and girls from this lifestyle. S.A. was assessed a composite score of 5 on this variable. S.A. was not interested in targeting this particular population. They felt that services should be available to them, but not as a special group. They were assessed a 2 for this variable. There was a difference in philosophy as far as providing service to the target client group. One S.A. staff stated," we are narrow in the service we deliver, P.O.W.E.R. is very broad." There was disagreement at the policy development stage, when S.A. and P.O.W.E.R. started negotiating a linkage. S.A. wanted to assist clients in making 'better' choices and P.O.W.E.R. insisted 'other' choices was more appropriate. P.O.W.E.R. felt S.A. was making value judgements, while S.A. felt they were not faulting the individual, but rather being clear as to how they felt about the lifestyle choice. S.A. they could not satisfy P.O.W.E.R., P.O.W.E.R. wanted the target clients treated differently

than other clients using Women's Services. They wanted curfew times waived, and that rules around appropriate dress and no alcohol/drug use should not apply to these clients. S.A. felt rules should apply consistently to all clients. S.A. also was interested in providing short term, emergency safe housing; and if long term housing was needed, S.A. was willing to provide it if the client was re-evaluating her lifestyle. They were not interested in being just a housing option. Because there appeared to be such a discrepancy in views of 'what to do', this variable was scored a 1, for a total score of 14 out of a possible 25.

All staff interviewed, at Winnipeg Child and Family Services , strongly agreed with the concept of service agreements to link agencies. Their guiding principles æksporess a commitment to link with other organizations. If it were not for the lack of demonstrated involvement, shown by staff from W.C.F.S. on other agency boards and committees, they would have been assessed a 5. newness of the agency may contribute to the failure to operationalize this principle, however at the present time it was felt that a rating of 4 would be appropriate. There was general agreement, amongst personnel interviewed that goal 2 was appropriate. preventative health measures, and a concern with reducing the short and long term health risks associated with

prostitution was viewed as important. The agency was given a 4 on this variable. Staff strongly agreed with importance of deterring women and girls from prostitution and thus a rating of 5 was assigned. W.C.F.S. felt strongly that services had been unavailable to this client group in Winnipeq. They felt that prostitutes had not accessed W.C.F.S. due to a lack of trust, and they felt that P.O.W.E.R. was a necessary precursor to improving accessibility to this client They also stated that W.C.F.S. had a legal responsibility to respond to the needs of juvenile girls who were 'on the street', and recognized that they had been unsuccessful reaching this population. A score of 5 was given to this variable. Initially there was some apprehension around the link with P.O.W.E.R. Some W.C.F.S workers had a perception of prostitutes as 'druggies, hanging around with pimps, and as terrible parents'. There were also the legal concerns around the duty to 'protect' youth from unsafe situations. Along with this concern, was the realization that W.C.F.S. had not been very successful, under conventional practise, in reaching Ιt girls. was suggested by representative that child welfare workers be encouraged to consider developing 'self-help' alternatives for special populations, as an effective and cost saving alternative, to traditional services. Agreement on 'what

to do 'was assessed a 4, for a total composite score of 22 out of a possible 25.

Winnipeg Social Services were strongly in favour of developing links with other agencies. Staff were actively encouraged to be involved on community committees and boards. A score of 5 was assigned to measure agreement with goal #1. Staff were also in strong agreement with the need for both preventative health measures and reducing the health risks associated with prostitution. A score of 5 was assigned to this variable. There was strong agreement with goal #3 also, it was felt that there was a need for deterring women and girls from prostitution. There was strong agreement that the target population was appropriate because service had previously been inaccessible to this group. It was agreed that an ortganization such as P.O.W.E.R. was necessary to reach them. A score of 5 was again assigned on this variable. There was a need for negotiation to reach agreement on what 'service' should look like. There was a need to look at eligibility for service. Clients under 18 were not eligible for social assistance, and clients who were earning income from prostitution might not be eligible if normal standards prevailed. It was agreed that clients under 18 would be seen for counselling, but would be referred to W.C.F.S. if other resources were needed. The eligibility requirements for social assistance were

adjusted, so that the first \$130.00 income per week was not claimed. There was a recognition that this was not always disposable income for the women, and there might be a need for social assistance even if she was receiving money from prostitution. Agreement with variable #5, in the 'what to do' category, was assessed a 4, giving a total score of 24 out of 25.

There was strong agreement with the concept of linkages between service agencies, when Children's Home staff were interviewed. The organization also has a commitment to involve their staff on other community boards and committees, with staff from all levels being involved. They were assessed a 5 on the first variable. They also had a strong commitment to work towards reducing the long and short term health risks associated with prostitution, and thus felt that P.O.W.E.R.'s third goal was very appropriate. A score of 5 was again assigned. Deterring women and girls from turning to prostitution was a high priority with T.E.R.F., a CHOW program, and thus they also agreed with P.O.W.E.R's goal #3. The population served was also seen as in need of service. T.E.R.F. also worked with this group, but did not have the resources to do outreach , which facilitates access to this group of clients. CHOW staff were therefore, very supportive of P.O.W.E.R.'s goal to reach out to this population. A score of 5 was assigned again. The last

variable was the only area of difficulty when discussing domain consensus with CHOW staff. CHOW staff felt that deterring women and girls from prostitution was an explicit goal, but that there was an implicit one, which staff operated by. One CHOW staff felt that there was a values problem, another expressed it as a philosophical difference. T.E.R.F. have a clear, stated goal to "help kids leave the street". They believe in being open with the client in communicating that they feel the street is not a healthy lifestyle. They believe in sharing information with collaterals, as they have a philosophy of 'no secrets'. They state that they make it clear to the 'kids' that information will be shared with other professionals, and that they believe this is in the best interest of the 'kids'. CHOW feel that P.O.W.E.R. is overprotective of clients, they are territorial around shared clients, and do not share information. CHOW feels P.O.W.E.R. staff do not challenge the clients enough, and to the point that it almost appears as supporting and colluding with an unhealthy lifestyle. CHOW agree with the goals of P.O.W.E.R. and with their client population, but feel that the real problem lies in the interpretation of what is best for the client. There is a real conflict in this area. For the 5th variable the researcher assigned a 1, for a total score of 21 out of a possible 25. In conclusion, it did not appear that a perception

of domain consensus was a reliable predictor of cooperation.

- 4. The greater the perceived cooperative interaction the greater the perceived effectiveness by service providers.
- A.F.M. felt that the cooperative interaction was generally, low. There was some inconsistency depending on the individual, as reported by staff. There was a hesitancy to share information, and some feeling of distrust of A.F.M. services. A.F.M. staff agreed that the formal linkage had not been effective. P.O.W.E.R. staff also agreed that the link had not been effective during its formal stage.
- W.C.F.S. felt that the cooperative interaction was high. There were details of interaction that had to be negotiated, such as reporting required by law, regarding juveniles. Interaction was cooperative, details worked out to both parties satisfaction, and overall consensus by both agencies that the relationship is effective. Effectiveness is not measured in terms of the large numbers of juveniles now accessing W.C.F.S., but in a better relationship between these juveniles and the Child Welfare system. This linkage has raised the trust level

of this client population; has enabled W.C.F.S. to provide service, where there was none before; the staff are more informed; and can respond more appropriately.

Salvation Army staff feel that cooperative interaction has improved because of the linkage, yet perceptions of failure to communicate important information, perceptions of unrealistic expectations on the part of P.O.W.E.R. staff, have resulted in a rating of low cooperation. S.A. staff also felt they were not invited to be involved in the P.O.W.E.R. organization. This low cooperation is matched with a perception of limited effectiveness. Salvation Army staff feel a little better informed about the target population, but this is countered by their feeling that they can not meet P.O.W.E.R. expectations under their program. They also feel that it has not improved the numbers of women accessing Women's Services. One staff felt a measure of effectiveness would be women who chose to use their service as an alternative to the street, and this has not been the case. P.O.W.E.R. staff felt that relationship was cooperative at the beginning, but is less cooperative at the present time. There was a feeling that S.A. was willing to be liberal with clients and make concessions, and then tightened up. There is a perception that clients are not comfortable there as the atmosphere is somewhat 'judgemental'. P.O.W.E.R. service providers also would

agree with low cooperation and low effectiveness of this linkage.

Winnipeg Social Services staff at all levels perceive the relationship as very cooperative, with P.O.W.E.R. staff supportive of W.S.S. staff. The relationship is also viewed as effective, with not necessarily a large number of new clients, but a much more positive relationship based on trust and openness. W.S.S. believes that their workers are more informed of this target population, and that response is more appropriate. W.S.S. also feel that they are viewed more positively by this group of women than they were previously. P.O.W.E.R. staff view cooperation as excellent, and effectiveness as excellent.

Legal Aid staff perceived the cooperative interaction with P.O.W.E.R. staff as very good. They viewed exchange of information to be excellent and support is there for the lawyer on site. Effectiveness is also viewed as very good. L.A. feel that they have been able to establish a trusting relationship with this client group, they are more informed of their situation, and thus their ability to respond effectively has improved. They also feel that the clients have better access to legal services, are better informed of the legal system, and are not as fearful as someone attends court with them. One L.A. lawyer felt that there was an increased likelihood of

them appearing in court now because of the above factors, which would result in reduced court time and costs. P.O.W.E.R. staff viewed cooperative interaction as good, with relationship very effective.

Cooperative interaction between Childrens Home and P.O.W.E.R. could best be described as fair. CHOW feel that the agencies are not supporting each other, and that efforts to negotiate ways of working together have been ineffective to date. There is an issue around confidentiality and the sharing of client information. CHOW feel that P.O.W.E.R. staff are not information freely, as collaterals in a professional relationship should. There is agreement that relationship has not been effective, as there has been no increase in referrals. P.O.W.E.R. staff also rate cooperation and effectiveness as fair. In this study a perception of cooperation appears to correspond to a perception of effectiveness.

Table # 3

Agency	Cooperation	Perceived Effectiveness
A.F.M.	low	low
L.A.	high	high
W.C.F.S.	high	high
W.S.S.	high	high
S.A.	low	low
CHOW	fair	low

5. The greater the perceived cooperative interaction - the more accessible the service to the target group.

A.F.M., Salvation Army, and Children's Home were perceived as low in cooperative interaction. There were 5 contacts with A.F.M. in the files reviewed. Two clients had had previous contact with A.F.M., 2 were new clients, and 1 file did not indicate if the contact was new. S.A. were not asked to complete the contact forms, since all

S.A. service is provided off site, however staff from both agencies perceive the numbers to be low.

Legal Aid, W.S.S., and W.C.F.S. are viewed as having good cooperative interaction by staff from both P.O.W.E.R. and the other respective agencies. The number of contacts in the viewed files was noticeably higher in these agencies. Legal Aid had 69 contacts with 6 clients. W.C.F.S. had 39 contacts with 7 clients. Only 3 clients had previous involvement with W.C.F.S. There were 294 contacts with 13 clients seeing the W.S.S. social worker. Three of these clients had previous contact with W.S.S. It would appear that there is an increase in access to service provided by those linkage agencies who have a perception of cooperative interaction with P.O.W.E.R.

Table # 4

Agency	<u>Cooperation</u>	# of Contacts
A.F.M.	low	5*
L.A.	high	69
W.C.F.S.	high	39
W.S.S.	high	294
S.A.	low	low
CHOW	low	no linkage**

^{*} The 5 contacts were recorded during the time of linkage

with A.F.M. There is no linkage at this time between P.O.W.E.R. and A.F.M.

** There have been limited referrals to CHOW, however there is presently no CHOW staff at P.O.W.E.R. and thus no contacts were recorded on files at P.O.W.E.R.

6. The stronger the linkage - the greater the perceived effectiveness as stated by the service provider.

The strength of the linkage was described previously under findings, as was the perceived effectiveness as stated by both the target agencies and by P.O.W.E.R. The following table will help to connect these findings:

Table # 5

Agency	Linkage Strength	Perceived
		Effectiveness
A.F.M.	no linkage *	low
L.A.	strong	high
W.C.F.S.	strong	high
W.S.S.	strong	high
S.A.	weak	low
C.H.O.W.	no linkage **	low

^{*} There is presently no formal linkage, and staff from both agencies felt the short term linkage that was

established was not very effective.

** There is presently no formal linkage, and staff were not satisfied with the short term linkage that ended. There would appear to be a relationship between the strength of the linkage and the perception of effectiveness.

7. The more frequent the communication between agencies- larger the number of clients referred and seen.

The communication between A.F.M. and P.O.W.E.R. is low. Client information is not exchanged freely, and only occasionally is other information exchanged. There is no formal, regular personal communication between agencies at this time. The number of referrals, as stated previously, is also low. (5 contacts in files reviewed)

Communication between Legal Aid and P.O.W.E.R. is high. A lawyer from L.A. spends 1 1\2 hours a week at the P.O.W.E.R. site. There is regular daily contact by phone, and P.O.W.E.R. clients access the L.A. office regularly. The number of contacts was 69 in viewed files.

Communication between W.C.F.S. was average (medium), with regular weekly contact of 1\2 day at the P.O.W.E.R. site. The worker is also on call for weekend

emergencies. The contacts were also in the mid range with 39.

Communication between W.S.S. and P.O.W.E.R. is high with daily informal drop in access by P.O.W.E.R. clients at the W.S.S. office. Phone calls are daily between agencies and the social worker attends the P.O.W.E.R. site weekly for 1\2 day. The number of contacts is the highest with this agency, being 294.

The communication between Salvation Army and P.O.W.E.R. is low. There is contact by phone weekly and a P.O.W.E.R. staff sits on the Interagency committee at S.A. The number of referrals is low as expressed by staff from both agencies.

Childrens Home and P.O.W.E.R. staff communicate irregularly. There is limited program information exchanged, and client specific information is not exchanged freely. There is some communication at scheduled meetings with a view to improve relationships.

Table # 6

Agency	Communication with	# Contacts
	P.O.W.E.R.	
A.F.M.	low	5
L.A.	high	69
W.C.F.S.	medium	39
W.S.S.	high	294
S.A.	low	low

The frequency of communication between the linkage agencies and P.O.W.E.R. appears to be related to the number of contacts with clients by the staff from the respective target agencies.

8. The more efficient the internal communication of an organization - the stronger the linkage formed.

Internal communication was previously indicated under the description of the organizations, and the strength of the linkages has also been provided. A table will be used to indicate the relationship.

Table # 7

Agency	<u>Internal</u>	<u>Linkage</u>
	Communication	<u>Strength</u>
A.F.M.	average	no linkage
L.A.	low	strong
W.C.F.S.	high	strong
W.S.S.	low	strong
S.A.	low	weak
CHOW	high	no linkage
There appeared to	be no relationship bet	tween internal
communication and	the strength of the li	inkage formed.

9. The level of satisfaction of the service provider varies directly with increased participation of the clients.

Table # 8

Agency	Service Provider	<u>Participation</u>
	Satisfaction	of Clients
A.F.M.	low	low
L.A.	medium	medium
W.C.F.S.	high	medium
W.S.S.	high	high
S.A.	low	low
CHOW	low	low

There appears to be a correlation between the level of satisfaction of the service providers and client participation in their respective services.

10. The level of satisfaction of P.O.W.E.R. staff varies directly with the participation of clients in other service agreement organizations.

Table # 9

Agency	P.O.W.E.R.	<u>Participation</u>
	<u>Satisfaction</u>	of Clients
A.F.M.	low	low
L.A.	high	medium
W.C.F.S.	high	medium
W.S.S.	high	high
S.A.	low	low
CHOW	low	low

11. The more complex the target organization the stronger the linkage formed

Table # 10

Agency	Complexity	Linkage Strength
A.F.M.	average	no linkage
W.C.F.S.	high	strong linkage
CHOW	average	no linkage
L.A.	average	strong linkage
S.A.	high	weak informal
W.S.S.	low	strong linkage
There appears to	be no relationship	between the
complexity of the	target organizati	on, and the strength
of the linkage formed.		

12. The larger the target organization - the stronger the linkage formed.

Table # 11

Agency	<u>Size</u>	Strength of Linkage
	(# full time staff)
A.F.M.	94	no linkage
W.C.F.S.	360	strong linkage
CHOW	100	no linkage
L.A.	102	strong linkage
S.A.	159	weak informal
W.S.S.	160	strong linkage

It would appear that the size of an organization, measured by the number of full time staff, is not correlated with the strength of the linkage as defined by collateral service providers.

13. The more formalized the procedures of the target organization - the larger the # of clients seen.

Table # 12

Agency	Extent of	# of Contacts
	<u>Formalization</u>	with target group
A.F.M.	average	5
W.C.F.S.	low	39
CHOW	average	no linkage
L.A.	high	69
S.A.	high	low *
W.S.S.	average	294

*Salvation Army numbers are unavailable as service was provided off site, and contact forms were not filled out.

Contrary to Hoffman et al (1990), increased formalization did not appear to influence client contact.

DISCUSSION

Of the 13 hypothesis presented in this thesis, 6 were supported. Agencies who perceive their interaction as being cooperative, show a higher likelihood of perceiving the linkage to be an effective one. Winnipeg Child and Family Services, Winnipeg Social Services, and Legal Aid all agreed that the interaction was very cooperative, and these three agencies also felt that the linkage was effective. Alcoholism Foundation of Manitoba, Salvation Army, and Children's Home experienced difficulty in developing a cooperative linkage; with discontinuing the linkage, CHOW discontinuing an informal linkage, and S.A. continuing in a weak informal linkage. All three agencies also felt that their respective linkage was not an effective one.

Accessibility of service also appeared to have a positive relationship with the perception of cooperation. A.F.M. perceived the relationship as low in cooperation. There were only 5 contacts with A.F.M. on the sample of files reviewed. These contacts were made while the linkage was in effect. Of the 51 women interviewed on the cross-sectional, 21 were worried that they might have a problem with alcohol, and 28 worried about their drug usage. Twenty eight (28) of the women

had thought of seeking help, and 23 stated that P.O.W.E.R. staff had talked to them about the use of drugs and alcohol. Eight (8) reported that they had received assistance and yet only 1 stated that the referral was to A.F.M.

The high number of women expressing a concern for their drug and/or alcohol usage, indicates a need for the linkage with an appropriate treatment service. The lack of referrals to A.F.M. would not be explained by too few clients with an expressed concern. Other possibilities will be explored later.

There was a low perception of cooperation with Salvation Army, and there were also few clients accessing their service. Thirty (30) of the 51 clients interviewed, expressed a desire to get off the street. Twelve(12) stated they had already made the transition, and only 9 had no interest in leaving. Salvation Army felt that of the few clients they saw, none appeared to be interested in leaving the street, and were merely using the hostel as a housing option. There was an expressed desire to leave the street by a number of clients, however these clients did not appear to be using S.A. services. There was, however, a connection made with a few new clients because of this linkage. Staff from both P.O.W.E.R. and S.A. indicated that most referrals to S.A. occurred during the period of time that S.A. was waiving some of

the house rules for P.O.W.E.R. clients. Referrals have decreased in the recent months.

Childrens Home also scored low on cooperation, and referrals to their T.E.R.F. program by P.O.W.E.R. staff was also low. In the files reviewed, there were four referrals to T.E.R.F. indicated. Of the women interviewed on the cross sectional, 30 expressed a desire to get off the street, which would suggest that the T.E.R.F. program might be suitable for them. Interesting to note from interviews on the cross sectional that the women are very familiar with this program, and 20 stated that they had previously used services from C.H.

Legal Aid scored high on cooperative interaction and had numerous contacts with the client group. Many contacts, however were with the same client. Of files reviewed, 69 contacts were with 6 clients. The lawyer was involved in representing 2 clients who had been victims in a domestic assault. Two (2) clients were represented in a child custody case and the other 2 were receiving support over a pending court case. Ten(10) women, interviewed on the cross-sectional, indicated that they had seen the lawyer at P.O.W.E.R. Previous use of Legal Aid was low, with only 8 of the 51 women on the cross-sectional, indicating such usage, even though 30 stated that they had been victims of violence that was reported to the police, and 40 had other contact with the police.

Winnipeq Child and Family Services, with high cooperation, had 7 women indicate that they had contact with the service provider from C.F.S. All 7 stated they had contacted her at P.O.W.E.R. There were 39 contacts with these women. In 3 cases, the women had children apprehended and the social worker was advocating on their behalf to have these children returned. In 1 case support was provided to a woman whose child had been apprehended. One(1) client had reported a potentially abusive situation to the worker, and another had children previously placed for adoption through C.F.S. Six(6) of these women found the social worker very helpful, and 1 was neutral on expression of helpfulness. Two(2)stated they would not have contacted C.F.S. if the worker had not been at P.O.W.E.R.

Winnipeg Social Services also had a cooperative relationship and saw a number of clients. Eighteen (18) of the 51 women on the cross-sectional stated that they had talked to the welfare worker at P.O.W.E.R. Three(3) stated that they had subsequently received assistance and for 2 it was their first application. Some of the other women were previously receiving assistance, with a total of 36 indicating that they had used Social Services at some point in time. In the past 6 months, 26 indicated they had received some social assistance, and 6 indicated it was there main source of income. The W.S.S. worker

currently has approximately 25 women on her caseload. Considering that 30 indicated they would like to get off the street, access to welfare has not been sufficient to assist them to do this. Thirty six(36) still indicate prostitution is their main source of income.

Service providers , working in an agency which developed a strong linkage with P.O.W.E.R., perceived the linkage to be more effective, than did service providers in agencies with a weak linkage. This is not surprising in that these agencies also saw more clients. There is some support in the literature, that interorganizational linkages do , in fact, impact on an organizations effectiveness (Warren, 1974 and Mulford, 1984). The size of this study would not support these findings, but does support the perception of staff as to effectiveness being linked to the development of strong linkages. There is also a possibility that service providers feel that interdepartmental linkages are the appropriate way to provide service, and that this study is measuring this perception, rather than the correlation with the strength of the linkage with P.O.W.E.R. This study asked if the respondent felt a service agreement was the appropriate means of providing service to prostitutes, however, it would have been helpful to have asked about their perception of the effectiveness linkages, generally.

Frequent communication between agencies appears to be related to increased numbers of clients seen. The reason for this relationship is less clear. If more clients are seen, the agencies are likely to increase their communication. The increase in communication may not increase the number of clients seen, it may be some other factor which impacts on numbers, and the increased communication could be, instead, a result of agencies having joint clients.

The level of satisfaction of service providers varied with the increased participation of clients. Agencies would presumably enter into relationships with a view to increasing their interaction with a specific client group. Accordingly, when this does not happen, as in the case of A.F.M., Salvation Army, and Children's Home; one would expect a decreased level of satisfaction with the linkage, as was the case.

The level of satisfaction of P.O.W.E.R. staff also varied directly with the participation of clients in the other agency's service. Staff felt the most satisfied with Social Services, which had the highest number of contacts. There was also satisfaction with Legal Aid and Child and Family Services. There are likely many other reasons for satisfaction, including the development of personal relationships between service providers and P.O.W.E.R. staff (Beatrice, 1991). Several respondents

indicated that they felt, if the 'actors' changed in some of these agencies, the linkage would break down.

Initially there appeared to be no relationship between perceived domain consensus and perceived cooperation. Children's Home, providing the program T.E.R.F. to the same population, and with very similar goals, had failed to negotiate a linkage. What became obvious, when examining the agencies which had low cooperation, was the common failure to satisfactorily negotiate 'what to do'. There appeared to be a relationship between this one element of domain consensus. When looking only at consensus on service provision, A.F.M., S.A. and CHOW all had scored 1 out of a possible 5, representing strong disagreement with P.O.W.E.R.'s service aims. These agencies also perceived the relationship as low on cooperation, as did the P.O.W.E.R. staff.

All three of these agencies had a strong belief that prostitution was an unhealthy lifestyle, and that efforts should be expended on offering alternatives, and in supporting efforts to change. Some service providers in this group felt that P.O.W.E.R. staff were supporting prostitution as a lifestyle, and were not challenging the women to look at alternatives. Some felt that an explicit goal of P.O.W.E.R. was to deter from prostitution, but that staff held different ,opposing, implicit goals. This would fit with Mohr's (1973) predictions, that it is

sometimes more appropriate to look at the goals of individuals in the organization, than to look at the goals of the organization. Funding requirements often dictate explicit goals to an organization, but service goals may be interpreted quite differently by the service provider, and these goals would not be put in writing. One such goal of P.O.W.E.R. would be "to support prostitutes, to be prostitutes, if they want to be." P.O.W.E.R. staff feel that confrontation on lifestyle does not fit with the supportive role they choose to use. They feel confrontation would give the impression of being judgemental, and would deter women from the site.

A.F.M. staff feel that there is a 'correlation between using drugs and/or alcohol and working the streets'. Their goal would be abstinence and leaving the streets, while P.O.W.E.R. staff feel that while abstinence may be the goal in some cases, in others reducing usage would suffice. P.O.W.E.R. staff feel that A.F.M. operate under the medical model, which might be appropriate for some clients, but not all. They felt A.F.M. assessed clients, and then made a decision on treatment, without involving the client. A.F.M. felt that a chemical dependency worker is better equipped to recommend an appropriate service. In their experience they have found that clients in crisis, do not always make appropriate choices. They may want to 'leave town' to get away, when staying in town

and establishing roots, and a self-help network may be more appropriate. A.F.M., CHOW and S.A. stated that P.O.W.E.R. wanted them to treat their clients as a special group, with special rules. S.A. felt they could not compromise their program to be a branch of P.O.W.E.R. They wanted to define their area, and where it overlapped with P.O.W.E.R's , they would provide service. Their interest was working with clients who were re-evaluating their lifestyles. They felt it was unfair to have two sets of rules. This caused problems for both staff and clients. There could be two women, both sponsored by W.S.S., at the hostel. One was forced to declare income, one did not. One had a curfew, the other did not. A.F.M. expressed similar concerns around P.O.W.E.R. clients in their River House treatment programs. They felt that these clients needed to be treated the same as all other clients in the program. They were used to working with women who worked the street to support a habit. P.O.W.E.R. clients were no different, they had problems common to other chemically dependent women. CHOW had a policy of 'no secrets' with all clients in the TERF program. These women were working towards getting off the street, and CHOW felt openness was important. This caused difficulty for TERF staff who volunteered at P.O.W.E.R. as outreach workers. If they saw a TERF client on the street, they wanted to deal with this back at the TERF

program, ie.(speak to the participant who was working the street, while in program). P.O.W.E.R.'s policy was that volunteers keep all such information confidential, as they felt it would destroy trust. TERF believed that supporting women to leave the street, required openness, and confrontation on inappropriate behaviour.

Problems around the interpretation and application of confidentiality posed problems for both A.F.M. staff and CHOW staff. They felt that client specific information was not shared, as would be the norm in their other relationships with collaterals. P.O.W.E.R. staff feel that sharing client information would jeopardize their relationship with the client. This lack of sharing was interpreted as lack of trust by some service providers. Mulford (1984) states that some researchers have found that lack of cooperation may be a result of different degrees of professionalism.

An expectation of case conferencing clients, as may be the case in an agency, can lead to the expectation of a similar sharing in a new relationship. If these differences are not negotiated, early in the linkage, they may lead to feelings of distrust.

Differences mentioned could fall under the heading of "institutionalized thought structures" as suggested by Warren et al (1974). These are described as generally accepted rationales for behaviour in an agency. Laumann,

Galaskiewicz and Marsden (1978) refer to values held by organizational actors, which define their accepted activities and strategies. Other writers refer to the ideological position of workers, which they feel not only legitimize ways of working, but also influence the choice of extraorganizational strategies (Chandler, 1977 and Strauss, 1982). A commitment to common values as a basis for linkages has been suggested by both Ouchi (1980) and Laumann and Marsden (1982). Theorists as early as Parsons (1963) felt that actors would only relinquish control over resources if they felt there was a commitment to common goals based on similar values. It has also been suggested that behaviours resulting from ideologies, will be qualified by the intensity of the belief, and possibly other contingent conditions (Mohr, 1969).

Benson (1975) states that with human services the line between ideology and technology is blurred, and that the type of service consists of a transmission of values. If agencies are proposing incompatible strategies to a common problem, linkages are particularly complicated. The definition of the problem, may also be an issue. Whether one chooses to state the problem as prostitution, drug or alcohol addiction, economic deprivation, or one of several other problems; the technology required could be quite different. To successfully form a linkage under such value differences requires careful negotiation

(Benson, 1975, Strauss, 1982). Hasenfeld (1980) feels that change agents, interested in acquiring resources from other organizations, need to abandon certain of their objectives, and must accommodate the values of the other agencies.

It would appear that the limited success of linkage development between P.O.W.E.R. and the three agencies, A.F.M., CHOW and S.A. , could be due to a difference in value base that has not been resolved negotiation. There was similar early difficulty between P.O.W.E.R. and W.S.S. and W.C.F.S. The difference appears to be the willingness for the target agencies, W.S.S. and W.C.F.S., to compromise some of their policies and practices. Normally , to receive social assistance, a person would have to declare any income. P.O.W.E.R.'s concern was that prostitutes did not have control over the money they received from prostitution. However, if they were forced to claim this money they might be ineligible for social assistance. W.S.S. recognized that denying services, due to income, would make them continue to be economically dependent on prostitution. They agreed to wave a significant portion of this income, so that women would meet the eligibility requirements.

W.C.F.S. had a similar dilemma. Women under the age of 18, who were engaging in prostitution, would be considered 'at risk' under the law. They were being

sexually exploited by pimps and their dates. W.C.F.S. decided to be flexible around reporting requirements for this they had not been successful as apprehending this group and keeping them 'safe' alternative placements. The connection with P.O.W.E.R., and the girls willingness to use services at P.O.W.E.R., appeared to be a more viable alternative to reaching this population. There was the hope that alternatives to the street might be accepted by these girls, if they were allowed to, first, develop a trusting relationship with P.O.W.E.R. staff. The requirement for reporting this group of minors was waved, with the stipulation that P.O.W.E.R. staff use the W.C.F.S. social worker as a resource to decide which cases were 'at risk' to the degree that reporting would be required.

CONCLUSIONS

One of the most important elements in successful linkage development, is negotiation of ideological differences. Ideological differences, which lead to different technologies in service provision, can hamper, or prevent, linkage formation; unless either the focal agency or the target agency is willing to compromise. As Beatrice (1991) indicates, "a confluence of interests is

the best starting point for coordination (p.56)." All of the agencies had an interest in providing service to this target population, however, the type of service required negotiation, and agreement, before a successful linkage was formed.

Frequent communication was required to develop consensus, reach common ground, and work out details of the service agreement. This personal communication helped develop personal relationships, and developed trust between actors, which paved the way for successful negotiation. Beatrice also feels that it is easier to develop coordination on positive relationships, rather than simply on 'organizational self-interest'. Galaskiewicz and Marsden feel that information exchange is the basis of trust development among actors, and that this trust is necessary for the establishment linkages, and the exchange of other resources.

Most importantly, if focal agencies are to develop linkages with agencies that have a different value base, there must be room for compromise.

This study was limited, in that the sample size was too small to reach any conclusive results, and can be considered only exploratory in nature. Its purpose was to develop a description of the linkages in their early stages of development, that can be used as a baseline for further evaluation of the linkage development, and their

effectiveness by C.H.R.A.

Further research needs to more carefully study the influence of ideology, on linkage development. Questionnaires and interviews need to focus on this aspect of linkage development. The negotiation, also may need to be more closely studied, as it would appear that personal characteristics of the negotiators also may impact on successful linkage development.

It would also be helpful to ask each respondent their views on the benefits of linkages, in general. If service providers and administrators feel that linkages are inappropriate, the efforts of a focal agency in negotiating an agreement may be wasted.

Other aspects, that were mentioned, but that the study was not designed to evaluate, were the influence of history, ie(past relationships of negotiators, either personal or professional), and the influence of the original P.O.W.E.R. (staff, board members,) on the operations of the current P.O.W.E.R. The constraints of operating under the influence of Manitoba Health, and the goals that are seen as appropriate for funding, versus the previous self-help model could be the focus of another study.134

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AGENCY AND DEPARTMENT QUESTIONNAIRE

The purpose of this questionnaire is to gather information about your agency/department, its relationship with P.O.W.E.R., and the beliefs it holds regarding service for prostitutes and other high risk groups. Your responses will be used to describe and evaluate the linkages formed between P.O.W.E.R. and other community agencies and government departments.

The evaluation of P.O.W.E.R. is being conducted by Campbell & Heinrich Research Associates. If you have any questions about this form or the evaluation generally, please contact Linda Campbell at

Section A

This section will provide the evaluation team with basic information about your agency or department. Please answer all of questions and feel free to include any other information that you think would be relevant in the "Additional Comments" section at the end of the questionnaire.

1.	How many employees does your organization have? Full time
	Part time
2.	How many unpaid volunteers does your organization have?
3.	How many active clients does your agency/department currently have on its caseload?
4.	Which of the following best describe your organization?
	Private for profit () Private not for profit () Government ()
5.	What are the primary goals of your agency or department in order of priority.
	1
	2
	3

6.	In your opinion, are any of the following resource bases sufficient to meet the above goals of your agency or department?
	VES it is sufficient.
	YES, it is sufficient NO, it is not sufficient funds
	funds () () staff () () services () () space ()
	services ()
	SETVICES ()
	space ()
7.	Excluding administrative staff, how many different occupations comprise your current
	staff complement? (eg. Psychologist, Social Worker, Case Aid)
	Please list each separate occupation
8.	Of these occupations, how many have a professional organization?
9.	Do prostitutes constitute a portion of your current client base?
	YES () NO ()
10.	How would this information come to your attention? (eg. discussion with staff, collected through an information system)
11.	Is it possible to have prostitutes, and women/girls at risk of becoming prostitutes, on your agency's/department's caseload and not know it?
	YES () NO ()
12.	In what percentage of cases do you think this might happen?

13.	If you are not currently serving prostitutes and became aware of prostitutes on your caseload, or if the number of prostitutes accessing your services increased, how would this effect the service you provide? (Circle as many as apply)
	a) it would have no effect b) we would develop specialized services for these clients c) we would suggest different referrals for these clients d) we would provide specialized training to our staff e) we would refer clients to P.O.W.E.R. f) other (please specify)
Section	on B
111 (116	The following section is included to describe the nature of your current relationship with W.E.R As with the previous section, if you wish to add information that is not covered e following questions, please use the "Additional Comments" section at the end of the ionnaire.
14.	Do you currently have a working relationship with P.O.W.E.R.?
	YES () NO ()
15.	What is the nature of your involvement with P.O.W.E.R.? (Check as many as apply)
	shared clients joint programs information sharing shared technology funds to P.O.W.E.R. service contract with P.O.W.E.R. shared clients () shared personnel () shared space () service to P.O.W.E.R. () service from P.O.W.E.R. () funds from P.O.W.E.R. ()
16.	At the present time, how often does your agency or department interact with P.O.W.E.R.?
	Monthly () Bi-weekly () Weekly () Daily ()

17.	If you have a working relationship with P.O.W.E.R., how has it affected your agency or department? (Circle as many as apply)
	 a) it has added to our work load b) it has reduced our work load c) it has provided us with a better understanding of the clients that P.O.W.E.R. serves d) it has enhanced our ability to respond to this specific client group e) other (please specify)
18.	Who do you primarily interact with at P.O.W.E.R.?
19.	How would you rate your working relationship with P.O.W.E.R.? (Circle as many as apply)
	 a) positive and helpful b) inconsistent, depending on the individual c) less than helpful d) uncooperative
20.	Would you say that your connection with P.O.W.E.R. has improved your knowledge and understanding of concerns facing prostitutes and women/girls at risk of engaging in prostitution?
	YES () NO ()
21.	How has this connection effected the way you or your staff relate to clients who are prostitutes or at risk of engaging in prostitution? (Circle as many as apply)
	 a) has not effected the way we relate b) has enabled us to understand their situation c) has enabled us to respond more effectively to their needs d) has assisted us in developing a trusting relationship with this client group e) other (please specify)
22.	Does your organization have any involvement with Mount Carmel Clinic?
	YES () NO ()

23.	What is th apply)	What is the nature of your involvement with Mount Carmel Clinic? (Circle as many as apply)				
		ams n sharing		() () () () el ()	service from	onnel () e () Mount Carmel () n Mount Carmel () Mount Carmel ()
24.	If you relate	te to Mount	Carmel Clin	nic, how v	ould you rate this	relationship?
	a) positiveb) inconsistc) less thand) uncoopee) do not re	rative	ing on the i	ndividual		
Section	on C					
of you	Please answ	er the follow	P.O.W.E.R. ving auestion	a's target properties by circlifement with strongly disagree	opulation. ng the number which the statements. I disagree	the role of your agency the indicates the strength Each number represents
			5	strongly	_	
25.	Our organization clients.	ation is acti	vely involve	ed in impr	oving the accessibility	lity of our services to
	1	2	3	4	5	
26.	Prostitutes re	egularly acce	ess services	at our org	anization.	
	1	2	3	4	5	
27.	Our organiza services.	ntion is inter	rested in inc	creasing th	e number of prost	itutes who access our
	1	2	3	4	5	

28.	The service relationship	providers in with clients w	our o	rganizatio Prostitutes	on have no or are wo	o difficulty developing a trusting men at risk of becoming prostitutes.
	1	2	3	4	5	
29.	Services to paccessible in	prostitutes, are the City of V	nd wom Winnipe	en at risk g.	of become	ning prostitutes, have always been
	1	2	3	4	5	
30.	Our organiza women at ris	tion should be to the contract	e invol g prosti	ved in pro	oviding su	apport services for prostitutes, and
	1	2	3	4	5	
31.	Our organizat	ion should all prostitutes, re	locate fi eceive a	scal resou dequate so	rces to enservices.	sure prostitutes, and women at risk
	1	2	3	4	5	
32.	Our organizat and prostitution	ion should en on.	sure ou	r staff are	provided	with information about street life
	1	. 2	3	4	5	
33.	Our organizati associated with	on should be h prostitution	concerr and str	ned with reet life.	educing th	e short and long term health risks
	1	2	3	4	5	
34.	Our organizati to turn to stree	on should be et prostitution	concern for eco	ned with ronomic su	educing to	he necessity for women and girls
	1	2	3	4	5	
35.	Our organization girls at risk.	on should be o	concern	ed about the	he well-be	ing of prostitutes and women and
	1	2	3	4	5	
36.	Our organization	on should be	concern	ed about	ensuring p	people have adequate housing.
	1	2	3	4	5	_

37.	Our organized drug use.	zation has a r	esponsibi	lity to ed	lucate the pu	blic on the risks of intravenous
	1	2	3	4	5	
38.	Our organiz abuse.	ation has a r	esponsibi	lity to ed	lucate the pul	olic on the effects of substance
	1	2	3	4	5	
39.	Our organiz abused.	ation has a re	esponsibil	ity to en	sure that an i	ndividual's legal rights are not
	1	2	3	4	5	
40.	Our organiza	ation should b	e actively	y involve	d in preventa	tive health measures.
	1	2	3	4	5	
41.	Our organization of violence.	ation should b	e conceri	ned with	educating the	e public on the harmful effects
	1	2	3	4	5	
42.	Our organiza	tion has the i	esponsibi	lity to en	sure the safe	ty of children and youth.
	1	2	3	4	5	
43.	Our organiza	tion has the r	esponsibi	lity to su	pport prostitu	ites as parents.
	1	2	3	4	5	
44.	Our organizato the establis	tion experiences	ced a high	h level o	f cooperation	with P.O.W.E.R. staff prior
	1	2	3	4	5	
45.	Our organizat	tion has expe l linkage has	rienced a been esta	high lev blished.	rel of co-oper	ration with P.O.W.E.R. staff
	1	2	3	4	5	

					ģ.			
46.	The linkage with clients.	P.O.W.	E.R. has	been ef	fective in i	mproving servi	ice to target	group
	1	2	3	4	5			
47.	An organization risk receive adeq	such as F uate servi	P.O.W.E	.R. is ne	cessary to	ensure prostitu	ites and wom	en at
	1	2	3	4	5			
48	An organization s receive adequate	such as M services.	ount Car	mel Clin	ic is necess	sary to ensure i	nner city resi	dents
	1	2	3	4	5			
ADDI	ΓΙΟΝΑL COMME	ENTS:						
Name o	of Agency/Departm	nent:						
Individu	ıal Completing Qu	estionnair	·e:	1000-100-100-100-100-100-100-100-100-10		-		
Position	Within Organizat	ion:						

AGENCY AND DEPARTMENT QUESTIONNAIRE

The purpose of this questionnaire is to gather information about your agency/department, its relationship with P.O.W.E.R., and the beliefs it holds regarding service for prostitutes and other high risk groups. Your responses will be used to describe and evaluate the linkages formed between P.O.W.E.R. and other community agencies and government departments.

The evaluation of P.O.W.E.R. is being conducted by Campbell & Heinrich Research Associates. If you have any questions about this form or the evaluation generally, please contact Linda Campbell at 942-0332.

Section A

This section will provide the evaluation team with basic information about your agency or department. Please answer all of the questions and feel free to include any other information that you think would be relevant in the "Additional Comments" section at the end of the questionnaire.

1.	Which of the following best describe your organization?	
	Private for profit () Private not for profit () Government ()	
2.	What are the primary goals of your agency or department in order of priority. 1	
	2	
	3	
3.	In your opinion, are any of the following resource bases sufficient to meet the above goals of your agency or department? YES, it is sufficient NO, it is not sufficient funds () staff ()	æ
	stan () () services () () space () ()	

4.	Do prostitutes constitute a portion of your current client base?
	YES () NO ()
5.	How would this information come to your attention? (eg. discussion with staff, collected through an information system)
6.	Is it possible to have prostitutes, and women/girls at risk of becoming prostitutes, on your agency's/department's caseload and not know it?
	YES () NO ()
7.	In what percentage of cases do you think this might happen?
8.	If you are not currently serving prostitutes and became aware of prostitutes on your caseload, or if the number of prostitutes accessing your services increased, how would this affect the service you provide? (Circle as many as apply)
	a) it would have no effect b) we would develop specialized services for these clients c) we would suggest different referrals for these clients d) we would provide specialized training to our staff e) we would refer clients to P.O.W.E.R. f) other (please specify)
Section	n B
in the	The following section is included to describe the nature of your current relationship with V.E.R As with the previous section, if you wish to add information that is not covered following questions, please use the "Additional Comments" section at the end of the onnaire.
9.	Do you currently have a working relationship with P.O.W.E.R.?
	YES () NO ()

10.	What is the nature of your involvement with P.O.W.E.R.? (Check as many as apply)
	shared clients () shared personnel () joint programs () shared space () information sharing () service to P.O.W.E.R. () shared technology () service from P.O.W.E.R. () funds to P.O.W.E.R. () funds from P.O.W.E.R. () service contract with P.O.W.E.R. ()
11.	At the present time, how often does your agency or department interact with P.O.W.E.R.?
	Monthly () Bi-weekly () Weekly () Daily ()
12.	How often do you personally interact with P.O.W.E.R.?
	Monthly () Bi-weekly () Weekly () Daily ()
13.	If you have a working relationship with P.O.W.E.R., how has it affected your agency or department? (Circle as many as apply)
	 a) it has added to our work load b) it has reduced our work load c) it has provided us with a better understanding of the clients that P.O.W.E.R. serves d) it has enhanced our ability to respond to this specific client group e) other (please specify)
14.	If you have a working relationship with P.O.W.E.R., how has it affected you personally? (Circle as many as apply)
	 a) it has added to my work load b) it has reduced my work load c) it has provided me with a better understanding of the clients that P.O.W.E.R. serves d) it has enhanced my ability to respond to this specific client group e) other (please specify)
5.	Who do you primarily interact with at P.O.W.E.R.?

16.	How would you rate your working relationship with P.O.W.E.R.? (Circle as many as apply)						
	 a) positive and helpful b) inconsistent, depending on the individual c) less than helpful d) uncooperative 						
17.	Would you say that your connection with P.O.W.E.R. has improved your knowledge and understanding of concerns facing prostitutes and women/girls at risk of engaging in prostitution?						
	YES () NO ()						
18.	How has this connection affected the way you or staff in your agency/department relate to clients who are prostitutes or at risk of engaging in prostitution? (Circle as many as apply)						
	 a) has not affected the way we relate b) has enabled us to understand their situation c) has enabled us to respond more effectively to their needs d) has assisted us in developing a trusting relationship with this client group e) other (please specify) 						
19.	Does your organization have any involvement with Mount Carmel Clinic?						
	YES () NO ()						
20.	Do you have any professional involvement with Mount Carmel Clinic?						
21.	What is the nature of your involvement with Mount Carmel Clinic? (Circle as many as apply)						
	shared clients () shared personnel () joint programs () shared space () information sharing () service to Mount Carmel () shared technology () service from Mount Carmel () funds to Mount Carmel () service contract with Mount Carmel ()						

					^	
22.	. If you relat	e to Moun	t Carmel	Clinic, ho	w would you	rate this relationship?
	a) positive ab) inconsistc) less thand) uncoopere) do not re	and helpfu ent, depend helpful ative	l			
Sec	tion C					
of y	Please answe	er the follow	vino anes	tions by oi	roling the	ctive on the role of your agency. mber which indicates the strengthements. Each number represents
				2 disagramed 2 undec	cided	
23.	Our organiza clients.	tion is acti	ively invo	olved in im	proving the	accessibility of our services to
	1	2	3	4	5	
24.	Prostitutes re	gularly acc	ess servi	ces at our o	organization.	
	1	2	3	4	5	
25.	Our organizat services.	ion is inte	rested in	increasing	the number	of prostitutes who access our
	1	2	3	4	5	•
26.	The service relationship wi	providers in ith clients w	n our or vho are pr	ganization ostitutes or	have no di r are women	fficulty developing a trusting at risk of becoming prostitutes.
	1	2	3		5	
27.	Services to preaccessible in the	ostitutes, a	nd wome Winnipeg	n at risk o	of becoming	prostitutes, have always been
	1	2	3	4	5	

28.	Our orgawomen	anization shat risk of be	nould be ecoming	involved prostitut	l in provides.	ding support services for prostitutes, and
		1	2	3	4	5
29.	Our orga	anization sho ning prostit	ould alloutes, rec	cate fisca eive ade	al resource quate servi	es to ensure prostitutes, and women at risk ices.
		1	2	3	4	5
30.	Our orga	anization sho titution.	ould ens	ure our s	taff are pr	ovided with information about street life
		1	2	3	4	5
31.	Our orga	nization sho d with pros	ould be o	concerned and stree	l with redu t life.	ucing the short and long term health risks
		1	2	3	4	5
32.	Our orga to turn to	nization she street pros	ould be stitution	concerned for econd	d with red omic survi	lucing the necessity for women and girls ival.
		1 .	2	3	4	5
33.	Our organgirls at ri	nization sho	ould be c	oncerned	about the	well-being of prostitutes and women and
		1	2	3	4	5
34.	Our orga	nization sho	ould be	concerned	i about en	suring people have adequate housing.
		1	2	3	4	5
35.	Our organdrug use.	nization has	s a respo	onsibility	to educate	e the public on the risks of intravenous
		1	2	3	4	5
36.	Our organabuse.	nization has	a respo	onsibility	to educate	e the public on the effects of substance
		1	2	3	4	5

37.	Our organization abused.	has a re	esponsib	ility to e	nsure that a	n individual's legal rights are not
	1	2	3	4	5	
38.	Our organization	should b	e active	ly involv	ed in preve	ntative health measures.
	1	2	3	4	5	
39.	Our organization of violence.	should b	e conce	rned with	educating	the public on the harmful effects
	1	2	3	4	5	
40.	Our organization	has the re	esponsib	oility to e	nsure the sa	afety of children and youth.
	1	2	3	4	5	
41.	Our organization	has the re	esponsib	ility to s	upport pros	titutes as parents.
	1	2	3	4	5	
12.	Our organization of the establishment	experience at of a fo	ed a hig rmal lin	gh level o kage.	of cooperati	on with P.O.W.E.R. staff prior
	1	2	3	4	5	
3.	Our organization is since a formal link	nas exper age has l	ienced a	a high lea	vel of co-o	peration with P.O.W.E.R. staff
	1	2	3	4	5	
4.	The linkage with I clients.	P.O.W.E.	.R. has	been effe	ective in im	proving service to target group
	1	2	3	4	5	

45.	An organization such risk receive adequate	n as P.O	O.W.E.R es.	. is neces	sary to	ensure pros	titutes and	women at
	1	2	3	4	5			
46.	An organization such receive adequate serv	as Mou	ınt Carm	el Clinic i	s necess	ary to ensur	e inner city	residents
	1	2	3	4	5			
ADDI	TIONAL COMMENT	S:						
	•							
Agency	//Department Name:							
Individ	ual Completing Questi	onnaire	•					
Position	n Within Organization:	:						

AGENCY AND DEPARTMENT QUESTIONNAIRE

The purpose of this questionnaire is to gather information about P.O.W.E.R.and its relationship with A.F.M., and your impression of the beliefs A.F.M. holds regarding service for prostitutes and other high risk groups. Your responses will be used to describe and evaluate the linkages formed between P.O.W.E.R. and A.F.M.

Section A

This section will provide the evaluation team with basic information about P.O.W.E.R. Please answer all of the questions and feel free to include any other information that you think would be relevant in the "Additional Comments" section at the end of the questionnaire.

How n	nany emp	loyees doe	s your or	ganizatio	have?	Full	time	
					Part ti	me		
H o w	many	unpaid	volun	teers	does	your	organizati	on hav
How m	any activ	e clients o	loes your	agency/d	epartmen	t curre	ntly have on	its caseloa
Which	of the fo	llowing be	est describ	e your o	rganizatio	on?		
Private	for prof	it ()	Private	not for p	rofit ()	C	Government ()
What a	re the pri	mary goal	s of your	agency o	r departi	ment in	order of prior	rity.
I								
								_
2								
								-
3								
								-

6.	In your opinion, are any of the following resource bases sufficient to meet the above goals of your agency or department?
	YES, it is sufficient NO, it is not sufficient
	funds () ()
	staff ()
	services ()
	space ()
7.	Excluding administrative staff, how many different occupations comprise your current staff complement? (eg. Psychologist, Social Worker, Case Aid)
	Please list each separate occupation
	·
8.	Of these occupations, how many have a professional organization?
	(eg. Nurse - Manitoba Association of Registered Nurses)
	•
Section	on B
The f	ollowing section is included to dead to
prior	following section is included to describe the nature of your relationship with A.F.M. just
descri	to their termination of contract with you. Please answer the questions with a view to
if you	thing the relationship while the contract was still in effect. As with the previous section, wish to add information that is not covered in the following questions, please use the
"Addi	tional Comments" section at the end of the questionnaire.
	at the one of the questionnaire.
9.	What was the control of the control o
9.	What was the nature of your involvement with A.F.M.? (Check as many as applied)
	shared clients () shared personnel ()
	joint programs () shared space ()
	joint programs () shared space () information sharing () service to A.F.M ()
	shared technology () service from A.F.M. ()
	funds to A.F.M. () funds from A.F.M. ()
	service contract with A.F.M.()
10.	How often did A.F.M. interact with P.O.W.E.R.?
	Monthly () Bi-weekly () Weekly () Daily ()

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11.	Who did you prima	arily interact with	at A.F.M.?
12.		te your working r	elationship with A.F.M.?
	a) positive and helpb) inconsistent, depc) less than helpfuld) uncooperative	pful pending on the inc	lividual
13.	Would you say that understanding of si engaging in prostitu	ubstance abuse iss	with A.F.M. has improved your knowledge and ues facing prostitutes and women/girls at risk of
	YES () NO	()	
14	How has this conne substance abusers?	ction affected the (Circle as many a	e way you or your staff relate to clients who are is apply)
	a) has not affected b) has enabled us to c) has enabled us to d) has assisted us in e)other (please speci	understand their respond more eff developing a trus	situation ectively to their needs ting relationship with this client group
Section	<u>C</u> *		
strength	Please answer the f	t population. ollowing question	s by circling the number which indicates the disagreement with the statements. Each number
represe	nts the following:	1 strongly 2 disagree 3 undecide 4 agree 5 strongly	d
15.	A.F.M. is actively inv	volved in improvin	ng the accessibility of their services to clients.
16.	Prostitutes regularly	access services at	A.F.M
	1 2	3 4	5
17.	A.F.M. is interested in	n increasing the n	umber of prostitutes who access their services.
		-	i de

					j	
18		providers who are p	in A.F.M rostitutes	have r	no difficulty women at ri	developing a trusting relationship sk of becoming prostitutes.
	1	2	3	4	5	
19.	Services to accessible in	prostitutes, the City o	and won of Winnip	nen at i	risk of becor	ning prostitutes, have always been
	1	2	3	4	5	
20.	A.F.M. shoul risk of beco	d be involv	ed in pro tutes.	viding	support serv	rices for prostitutes, and women at
	1	2	3	1	5	
21.	A.F.M. are inve	olved in pr g prostiture	oviding s	upport	services for	prostitutes, and women at risk
	1	2	3	4	5	
22.	A.F.M. should becoming p	allocate fisorostitutes,	cal resour receive a	ces to dequate	ensure prosti services.	tutes, and women at risk of
	1	2	3 4		5	
		F				
23.	A.F.M. should exprostitution.	nsure their	staff are	provide	ed with info	ormation about street life and
	1	2	3 4		5	
24	A.F.M.organizati risks associa	on should ted with p	be concer rostitution	ned wi n and s	th reducing street life.	the short and long term health
	1	2	3 4		5	
25.	A.F.M. should street prostitu	be concern tion for ec	ed with s	reducinį urvival.	g the necessi	ty for women and girls to turn to
	1	2	3	4	5	
26.	A.F.M. should risk.	be concern	ed about	the wel	ll-being of p	rostitutes and women and girls at
	1	2	3	4	5	
27.	A.F.M. should	be concern	ed about	ensurin	ig people ha	ve adequate housing

				•
28	A.F.M. has a	responsibility	to educate	the public on the risks of intravenous drug use.
	1	2 3	4	5
29.	A.F.M. has a	responsibility	to educate	the public on the effects of substance abuse.
	1	2 3	4	5
30.	A.F.M. has a	responsibility	to ensure	that an individual's legal rights are not abused.
	1	2 3	4	5
31.	A.F.M. should	be actively i	nvolved in	preventative health measures.
	1	2 3	4	5
32.	A.F.M.should	be concerned	with educat	ing the public on the harmful effects of violence.
	1	2 3	4	5
33	A.F.M. has the	e responsibility	to ensure	the safety of children and youth.
	1	2 3	4	5
34.	A.F.M. has the	responsibility	to suppor	t prostitutes as parents.
	1	2 3	4	5
35.	Our organization	on experience of a formal li	d a high le inkage.	vel of cooperation with A.F.M. staff prior to the
	1	2 3	4	5
36.	Our organizationa formal linka	on has experi ge has been e	enced a hig stablished.	gh level of co-operation with A.F.M. staff since
	1	2 2	4	5

37.	The linkage w	ith A.F.	.M. has	been ef	fective in	improving service to target group clients
	1	2	3	4	5	
38	An organization risk receive ad	n sucl	h as A servic	A.F.M. i es in the	s necessary e area of s	y to ensure prostitutes and women a ubstance abuse.
	1	2	3	4	5	
39	An organization receive adequal	such te servi	as Moi ices.	ınt Carm	nel Clinic is	s necessary to ensure inner city residents
	1	2	3	4	5	
ADDIT	ΓΙΟΝΑL COMM	ENTS:				
Name o	of Agency/Depar					
	ual Completing		onnaire	:		
Position	Within Organiz	zation:				

INTERVIEW GUIDE

Introduction

This interview serves as a follow-up to the written questionnaire that you have already completed. Its purpose is to gather additional information about your organization or department and its relationship with P.O.W.E.R.. Information collected from the questionnaire and during this interview will be used to describe and evaluate the linkages between P.O.W.E.R. and other agencies and government departments.

Due to the small number of individuals who will be participating in the interview process, it is difficult to ensure you complete confidentiality. However, I can assure you that your name will not be attached to specific comments within the report, although it will be listed in the Appendix along with the names of other agency and department representatives.

Services, Staff and Structure

Human service organizations often provide more than one type of specialized service to their clients. For example a clinic might provide medical, dental, nursing and social work services. Specific services may also be provided by individuals with different professional qualifications. As an example, nursing services may be offered by R.N.'s and R.P.N's. Similarly, certain professional groups may fill more than one role within an organization.

- 1. What range of services does your agency provide?
- 2. Which professional groups are involved in providing each type of service.
- 3. a) How is your agency structured to accommodate more than one type of service delivery? For example, do you have separate work units that operate autonomously, or are services coordinated centrally?
 - b) What is the lowest level of staff that can independently, without approval of a supervisor, accept a client, refer a client, agree on a joint program, contact another agency's director?
 - c) Is there a written job description for each position in the agency?
 - d) Is there a staff manual ie, operating procedures?
- 4. Some agencies make use of a committee structure to plan or co-ordinate activities across work units. (e.g. Social Committees, Work Place Health and Safety.

Does your agency make use of a committee structure?

If so, for what purposes, and how frequently do they meet?

5. Human Service Organizations design their internal communication system to respond to contingencies presented by the environment, size of the organization and available technology. There may be a variety of formal and informal communication channels such as meetings, memos, newsletters, etc.

Does your agency/department hold meetings such as management meetings, case planning, and staff meetings and if so, for what purposes?

Who attends these meetings and with what frequency are they scheduled?

- 6. What kinds of information might be transmitted within the agency by way of written communication?
- 7. Do staff from your agency participate on other agency boards or committees in the community as part of their workload?

If so, what would be the extent of involvement considering numbers of staff and number of meetings per month?

Task Environment

The external environment tends to define the opportunities available to an organization in fulfilling its service mission. For example, many of the choices that are made within an organization depend on potential and actual resources available. These resources may include money, clients, staff and expertise, authority and legitimation. Resources may also be provided from various sources. For example, fiscal resources may be provided by Federal, Provincial, or local governments, or by private insurance.

- 8. What are the primary sources of your agency's fiscal resources.
- 9. What are the secondary sources of fiscal resources?
- 10. Has your fiscal resource base been relatively stable in the past five years?

 If not, has there been an increase or decrease in your resource base (specify which resource base)?
- 11. Do you feel your agency can adequately meet its stated goals with the present resource base?
- 12. How has your linkage with P.O.W.E.R. affected this resource base?

Referrals and Resource Exchange

13. Human service organizations may be provided with clients by referral from other organizations or by client accessing service directly. Approximately what percentage of your clients would be referred by another agency?

What agencies provide complementary services to your agency's clients?

What agencies do you provide services to?

- 15. To increase your agency's potential for improving services to clients, which resource base would you focus on: staff, services, space, or resources from other service organizations?
 - a) If staff, would you focus on the number of staff, quality of staff either in recruitment and/or staff development?
 - b) If services, would you focus on improving existing services, or developing new initiatives?
 - c) If space, would you remodel/expand existing facilities or would you decentralize?
 - d) If resources from other organizations, which organizations would you want to receive additional resources from?
- 16. Service arrangements between agencies may involve a variety of exchanges. For example clients, personnel, space, funds, and/or information may be exchanged. Service may be provided by one agency to another agency's clients, or joint programs may be developed. Often these linkages involve bilateral exchanges.
 - a) How would you describe the nature of the linkage between your agency and P.O.W.E.R.? i) at the beginning of the linkage
 - ii) now? Is there a change in roles, and how did this evolve? b) In your view, what precipitated the linkage with P.O.W.E.R.?
 - c) Is there more than one type of resource exchanged? (specify who provides what type of resource to whom; break down hours of direct/indirect service, if applicable) In a typicle week in the past month, what # of hours of service did you provide on site? off site?
- d) What type of communication, how often and with whom?

 What impact has your linkage with P.O.W.E.R. had on the internal operations of your agency, looking at such factors as satisfaction of staff with the arrangement, and effect on your resources of time, money, and staff.

Quality and Benefit of the Service Agreement

- 18. Are you satisfied with the service agreement as it now stands?
- 19. What has been the impact of the service agreement on your agency?

 Are more prostitutes and women/girls at risk of engaging in prostitution accessing your agency or organization now than was previously the case?

Are your staff more informed about this target population than was previously the case?

- 20. Do you feel there has been an improvement in service provision to P.O.W.E.R. clients and/or other clients (secondary benefit) because of this linkage?
- 21. Do P.O.W.E.R. staff fulfil their commitments to your agency?

- 22. Do you feel you receive adequate information from P.O.W.E.R.? (distinguish between general information and client specific information)
- 23. Do you feel P.O.W.E.R staff provide you with sufficient opportunities for involvement in their organization?
- 24. SERVICE PROVIDERS ONLY: Is the space provided by P.O.W.E.R. sufficient to meet your needs?
- 25. SERVICE PROVIDERS ONLY: Do you have a clear understanding of the policies and procedures that are followed at P.O.W.E.R?
- 26. SERVICE PROVIDERS ONLY: Do you receive sufficient support from P.O.W.E.R. staff?
- 27. Would you recommend any changes to your current service agreement with P.O.W.E.R.?
- 28. Do you think the service agreement is an appropriate mechanism for providing service to prostitutes? Would you recommend any alternatives to the service agreement?

Roles and Responsibility for Services to Prostitutes

- 29. What do you feel your role is at the present time in providing services to prostitutes?
- 30. What do you feel your agency's responsibility is in this area?
- 31. What do you feel your role should be with respect to providing services to prostitutes?
- 32. What do you feel your agency's responsibility should be in this area?
- 33. Do you feel you require ongoing access to this client population?
- 34. Do you feel you want ongoing access to this client population? Goals and Objective Setting
- 35. Human Service Organizations are often challenged to alter goals by diverse community groups and/or government, and by other environmental factors such as funding.

Have your agency goals been relatively stable over the past five years or have there been changes due to environmental factors?

Can you describe these changes?

What factors influenced the changes (specify if funding, philosophical beliefs, political agendas, etc).

- 36. Do you anticipate any changes to the goals of your agency/government department in the near future?
- 37. Does your agency undertake internal objective setting exercises with staff. If so, what process is used to involve staff?

- 38. Do you feel that your agency's goals are primarily internally motivated, or are they primarily externally controlled?
- 39. Has P.O.W.E.R. provided you with information on the goals of their organization?
- 40. How do P.O.W.E.R.'s goals fit with the goals of your agency?

General Issues

41. Are there any points with respect to your agency's/department's linkage with P.O.W.E.R. that have not been raised, that you think should be addressed.

AGENCY AND DEPARTMENT QUESTIONNAIRE

The purpose of this questionnaire is to gather information about P.O.W.E.R.and its relationship with A.F.M., and your impression of the beliefs A.F.M. holds regarding service for prostitutes and other high risk groups. Your responses will be used to describe and evaluate the linkages formed between P.O.W.E.R. and A.F.M.

Section A

This section will provide the evaluation team with basic information about P.O.W.E.R. Please answer all of the questions and feel free to include any other information that you think would be relevant in the "Additional Comments" section at the end of the questionnaire.

1.	How many employees does your organization have? Full time
	Part time
2.	How many unpaid volunteers does your organization have
3.	How many active clients does your agency/department currently have on its caseload?
4.	Which of the following best describe your organization? Private for profit () Private not for profit () Government ()
5.	What are the primary goals of your agency or department in order of priority.
	2
	3

6.	In your opinion, are any of the following resource bases sufficient to meet the above goals of your agency or department?
	YES, it is sufficient NO, it is not sufficient
	funds () ()
	staff ()
	services (`)
	space () ()
7.	Excluding administrative staff, how many different occupations comprise your current staff complement? (eg. Psychologist, Social Worker, Case Aid)
	Please list each separate occupation
8.	Of these occupations, how many have a professional organization?
	(eg. Nurse - Manitoba Association of Registered Nurses)
	(-B. 1. a. so Manifold Massociation of Registered Nuises)
	•
Section	 n B
TT1 f.	
describ if you	ollowing section is included to describe the nature of your relationship with A.F.M. just to their termination of contract with you. Please answer the questions with a view to bing the relationship while the contract was still in effect. As with the previous section, wish to add information that is not covered in the following questions, please use the ional Comments" section at the end of the questionnaire.
9.	What was the nature of your involvement with A.F.M.? (Check as many as applied)
	shared clients () shared personnel () joint programs () shared space () information sharing () service to A.F.M () shared technology () service from A.F.M () funds to A.F.M () funds from A.F.M () service contract with A.F.M.()
10.	How often did A.F.M. interact with P.O.W.E.R.?
	Monthly () Bi-weekly () Weekly () Daily ()

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11.	Who did you primarily	interact with at	t A.F.M.?
12.	How would you rate yo (Circle as many as apply	ur working rela y)	tionship with A.F.M.?
	a) positive and helpfulb) inconsistent, dependingc) less than helpfuld) uncooperative	ng on the indiv	idual
13.	Would you say that you understanding of substanengaging in prostitution?	nce abuse issues	ith A.F.M. has improved your knowledge and s facing prostitutes and women/girls at risk of
	YES () NO ()		
14	How has this connection substance abusers? (Circ	affected the welle as many as a	way you or your staff relate to clients who are apply)
	a) has not affected the y b) has enabled us to unde c) has enabled us to respe d) has assisted us in deve e)other (please specify)	erstand their si ond more effect	tuation cively to their needs ag relationship with this client group
	This section will provide t to P.O.W.E.R.'s target pop Please answer the follow	pulation. ving questions	ersonal perspective on the role of A.F.M. with
represe	ents the following:	greement or dis	sagreement with the statements. Each number
		1 strongly dis 2 disagree 3 undecided 4 agree 5 strongly ag	
15.	A.F.M. is actively involved 1 2 3	d in improving 4	the accessibility of their services to clients.
16.	Prostitutes regularly acces	ss services at A	.F.M
	1 2 3	4	5
17.	A.F.M. is interested in inc	reasing the nun	aber of prostitutes who access their services.
	1 2 3	4	5

18.	The service with clients	providers who are	in A.l prostitu	F.M. hav	e no difi are wome	ficulty developing a trusting relationship in at risk of becoming prostitutes.
	1	2	3	4	5	
19.	Services to accessible in	prostitutes the City	, and of Win	women nipeg.	at risk o	f becoming prostitutes, have always been
	1	2	3	4	5	
20.	A.F.M. shoul risk of become	d be invo	lved in titutes.	providi	ng suppo	ort services for prostitutes, and women at
	1	2	3	4	5	
21.	A.F.M. are invo	olved in p g prostitu	providin res.	g suppo	ort servic	es for prostitutes, and women at risk
	1	2	;	3	4	5
22.	A.F.M. should a becoming p	allocate fi prostitutes,	scal res	sources e adequ	to ensure	prostitutes, and women at risk of ices.
	1	2	3	4	5	
23.	A.F.M. should en	nsure thei	r staff	are pro	vided wi	th information about street life and
	1	2	3	4	5	
24	A.F.M.organizati risks associa	on should ited with	d be con prostitu	ncerned ition ar	with rec	lucing the short and long term health life.
	1	2	3	4	5	
25.	A.F.M. should street prostitu	be concertion for	rned w	ith redu ic survi	cing the val.	necessity for women and girls to turn to
	1	2	3	4	5	
26.	A.F.M. should risk.	be concer	ned ab	out the	well-beir	ng of prostitutes and women and girls at
	1	2	3	4	5	
27.	A.F.M. should	be concer	rned ab	out ens	uring pe	ople have adequate housing.
	1	2	3	4	5	- 0

					,
28	A.F.M. has	a responsibility	to educate	the	public on the risks of intravenous drug use.
	1	2 3	4	5	
29.	A.F.M. has	a responsibility	to educate	the j	public on the effects of substance abuse.
	1	2 3	4	5	
30.	A.F.M. has	a responsibility	to ensure t	hat a	n individual's legal rights are not abused.
	1	2 3	4	5	
31.	A.F.M. shou	ıld be actively	involved in	preve	entative health measures.
	1	2 3	4	5	
32.	A.F.M.shou	ld be concerned	with educat	ing t	he public on the harmful effects of violence.
	1	2 3	4	5	
33	A.F.M. has	the responsibilit	y to ensure	the :	safety of children and youth.
	1	2 3	4	5	
34.	A.F.M. has	the responsibilit	y to suppor	t pro	stitutes as parents.
	1	2 3	4	5	
35.	Our organiza	ation experienc nt of a formal	ed a high le linkage.	vel o	f cooperation with A.F.M. staff prior to the
	1	2 3	4	5	
36.	Our organiza	ation has exper kage has been	rienced a hig established.	gh le	vel of co-operation with A.F.M. staff since
	1	2 3	4	5	

37.	The linkage	with A.F.	.M. has bee	en effe	ective in improving service to target group clients.	
	1	2	3	4	5	
38	An organiza risk receive	tion sucl adequate	h as A.F. services i	.M. is in the	necessary to ensure prostitutes and women at area of substance abuse.	
	1	2	3	4	5	
39	An organizat receive adeq	ion such uate servi	as Mount ices.	Carmel	l Clinic is necessary to ensure inner city residents	
	1	2	3 4	ŀ	5	
	TIONAL COM					
Name o	of Agency/De	partment:				
Individ	ual Completi	ng Questi	onnaire:			
Position Within Organization:						