



Grounds for decision making by social workers on housing for people with learning disability



Stella Neri-Porvali

Laurea University of Applied Sciences
Otaniemi

**Grounds for decision making by social workers on
housing for people with learning disabilities**

Stella Neri-Porvali
Master Degree
in Health Care
Thesis
2010

Stella Neri-Porvali

Grounds for decision making by social workers on housing for people with learning disabilities

Year	2010	Pages	47
------	------	-------	----

The need to strive to ensure access to needed information, services and resources, equality of opportunity and meaningful participation in decision making for all people is challenging. People with learning disabilities are no different from other individuals. Policies should guarantee human rights and non discrimination and the right for people with disabilities to inclusion.

The purpose of this study is to research grounds for decision making by social worker on housing for people with learning disabilities. A focus group interview consisting of four social workers originating from the same department of disabilities was conducted in Finnish and an inductive content analysis was used to interpret the data.

The findings incorporate three core themes and eight sub themes that emerged which are related to the study. The core themes being Housing environment based on a need, Social workers impact on decision and Final decision making. Housing was discussed quite widely, due to the housing aspect being the main cause for a decision. The findings show that the grounds towards a decision start with a need from the client to the social worker. What follows next is the flow of the decision through a complex structure of which finally the social workers make their final imprint on a decision. The findings of this study have clarified social workers role in the process of decision making, and the challenges of the evaluation process to get a decision.

Key words: Decision making, Housing, Learning disability, Social worker

Stella Neri-Porvali

Sosiaalityöntekijöiden perusteet päätöksentekoa varten koskien henkilö jolla on oppimisvaikeus

Vuosi 2010 Sivumäärä 47

Tarvittavan tiedonsaannin varmistamisen mahdollisuus, palvelut, resurssit, tasa-arvoinen ja tarkoituksenmukainen osallistuminen päätöksentekoon on kaikille ihmisille haastavaa. Henkilöt, jolla on oppimisvaikeuksia eivät poikkea muista henkilöistä. Toimintatapojen pitäisi taata samat ihmisoikeudet, syrjimättömyyden myös henkilöille joilla on oppimisvaikeus Tämän tutkimuksen tarkoituksena on selvittää asumisperusteet päätöksentekoa varten henkilöille, joilla on oppimisvaikeus. Ryhmähaastattelu koostuu neljästä sosiaalityöntekijästä, jotka ovat peräisin samasta yksiköstä. Ryhmähaastattelu tehtiin suomen kielellä ja induktiivista sisältöanalyysiä käytetään tiedon sisäistämiseen.

Tulokset sisältävät kolme keskeistä aihetta ja kahdeksan osa teemoja, jotka liittyvät tutkimukseen. Ydinteemoja ovat asumistarve, sosiaalityöntekijöiden vaikutus päätöksentekoon ja lopullinen päätöksenteko. Asumista oli käsitelty melko laajasti, koska asumisennäkökulma on tärkein syy päätökseen.

Tulokset osoittavat, että päätöksen perusteet alkavat asiakkaiden tarpeista sosiaalityöntekijälle. Mitä seuraa tämän jälkeen, on järjestelmän moninaiset eri vaiheet, joiden perusteella sosiaalityöntekijät tekevät lopullisen päätöksen.

Asiasanat Asuminen, kehitysvamma, päätöksenteko, sosiaalityöntekijä

TABLE OF CONTENT

1 INTRODUCTION.....	6
2 THE BACKGROUND OF THE THESIS	7
2.1 Social and Disabilities Laws	8
2.2 Disabilities policies and services	9
2.3 The reformed law	9
3 THE MAIN CONCEPTS OF THE STUDY	11
3.1 Decision making and Social worker	12
3.2 Housing for People with Learning disabilities.....	13
3.3 Learning Disability	14
3.4 Ethical decision making by social workers.....	15
4 PURPOSE AND RESEARCH QUESTION	16
5 RESEARCH METHODS	17
5.1 Qualitative approach	17
5.2 Participants and the study	18
5.3 Focus group interview as data collection method	19
5.4 Data Analysis.....	21
6 Findings	23
6.1 Housing based on a need	24
6.1.1 Concepts of housing environment and its changes	24
6.1.2 Housing environments and independence	25
6.1.3 Modification of housing environment based on client's need.....	26
6.2 Social workers' impact on decisions.....	26
6.2.1 Social workers' description of the needs of the clients.....	27
6.2.2 Initiation of the evaluation process	27
6.2.3 Evaluation and documentation of individual needs and support	27
6.2.4 Evaluation on the support needed by the client	28
6.3 Final decision making	30
6.3.1 Social workers role in the evaluation for a decision.....	31
6.3.2 The implementation of the decision making.....	32

7 DISCUSSION OF THE FINDINGS	33
7.1 Ethical considerations	33
7.2 Trustworthiness	35
7.3 Discussion.....	36
8 RECOMMENDATIONS' FOR FURTHER RESEARCH.	38
LIST OF REFERENCE	39
LIST OF CAPTIONS OF TABLES.....	41
LIST OF CAPTIONS OF FIGURES.....	41
APPENDIX 1 INVITATION LETTER FOR AN INTERVIEW	42
APPENDIX 2 KUTSU HAASTATTELUUN	43
APPENDIX 3 INFORMED CONSENT, ENGLISH	44
APPENDIX 4 INFORMED CONSENT, FINNISH	45
APPENDIX 5 LEADING INTERVIEW-THEMES, ENGLISH	46
APPENDIX 6 RYHMÄHAASTATTELUN AIHEET, SUOMEKSI	47

1 INTRODUCTION

The treatment of people with learning disabilities as equal functioning and independent people who are supported in life to develop their skills are the central objectives of the Government of Finland. The challenges of the present Finnish disability policy are evaluated by the government in order to find solutions for developing and reforming the policy. The Ministry of Social Affairs and Health is the main coordinator foreseeing that necessary support measures and services need are offered with equality. Ministry of Social Affairs and Health.(2006) The social workers mission is to take responsibilities in enhancing human well-being and support in achieving basic needs for people. It is the social workers priority to make general principals for the rights for people who are vulnerable, living in poverty and oppressed to be improved in quality and empowered. An essential feature of social work is the focus on individual needs and the well-being of society in a social context. National Association of Social Workers,(2008). According to the Ministry of Social Affairs and Health (2006), the promotion of social justice and social change to individuals, such as families, groups, communities and also organizations is the social worker fundamental priority. Social workers have to be sensitive towards ethnic diversity, culture and also strive towards prevention of oppression, discrimination, poverty and other forms of social injustice. The prevention of these injustices by the social worker is done by supervision, consultation, advocacy, community organizing, political action, education as well as research and evaluation of the injustices. The enhancing of independence and empowerment of people to address their own needs is one of many duties of the social worker.

There are 29 housing units and 318 ambulatory care in Helsinki for people with learning disabilities. The responsibility for housing services for people with learning disabilities is with the social board of Helsinki. The reviewed disability law and its goals is to empower the clients and create housing solutions for the well being of the clients by breaking down institutional form of housing and develop different types of dwellings. The social board of Helsinki have client orientation as one of their core values. Finding ways and networks, to develop unique services which will support and access different types of services not only client oriented but also client guided. The lack of verbal expression and mental processing skills should not be a reason for lack of equal opportunity and clients need of support and guidance, Vammaispalvelut Helsingiläisille (2006). The social workers role in decision making towards housing possibilities is of importance. The existing structure of decision making does not give the social worker a complete decision making responsibilities on housing for people with learning disabilities. The lack of resources is

also a contributing challenging factor. This study has looked into the decision making by social workers and to identify social workers influence and decision making process in order to secure a safe and developing support housing environment for people with learning disabilities. According to Schiemer (2009) Families have clear perspectives regarding housing environment, the importance of holistic approach focusing on housing and clients relate to each other in other words living and housing and other various aspect within the housing environment create an active housing environment.

2 THE BACKGROUND OF THE THESIS

The Ministry of Social Welfare and Health on the Finnish disability Policy, (2006) is based on three main principles. The right of equality to people with learning disabilities, and as a member state of the United Nations and the European Union, Finland is committed in promoting a society that is equally opened to all. The second principal is the rights of the inclusion of people with learning disabilities. This means taking barriers of restriction and their identification into positive attitudes to the needs of people with learning disabilities into account. The third principal is for people with learning disabilities, to have the necessary right to supportive measures and services, Ministry of Social Affairs and Health, (2008). For decision making Social workers it brings identifying the components of sound decision making and linking this with the realization of long term goals which improves the quality of social work and promotes the wellbeing of clients. These are the concepts of integration, full participation and equality. All services provided by the departments of disabilities will be provided and available when needed by the clients. Social workers objectives are to promote independent and make decision that will enable the possibility of coping and reduce restrictions caused by disabilities or obstacles that prevent person with learning disabilities to function on an everyday basis. Department for Disability services, services and support services are regulated according to the Disability Law (see table 1) as well as it momentums. Services and support services are either under special arrangements (subjective rights) or under limited funding rights. Espoo, Helsinki and Vantaa have an ombudsman for the disabled. His/her job is to protect the basic rights of the disabled and advise on disabled affairs. The local authority arranges mental health services for its residents. Help is available from

different centres and clinics such as health centres, psychiatric outpatient clinics, and centres for giving advice. Schools and other educational establishments and occupational health services also arrange mental health services. Helsingin Invalidien Yhdistys ry (2008).

2.1 Social and Disabilities Laws

There are several laws (see table 1) for people with learning disabilities; these laws are the guidelines for Social workers when making decisions in order to ensure equality when making decisions on housing for people with learning disabilities. Social Welfare Act (710/1982) states that the purpose of this act "social welfare" is to provide all social services such as, social assistance, social allowance, social loans and related measures to promote and maintain the social security and functional capacity of families, communities as well as individuals, Ministry of Social Affairs and Health (1982). Social welfare and health care services are provided to people with learning disabilities under these laws. The principal observed in organising services is that the general laws have precedence over special laws. The Special Care for Mentally Handicapped Act organises a major part of the social services for persons with learning disabilities. According to the Ministry of Social Affairs and Health every fourth intellectually disabled person also used services under the Services and Assistance for the Disabled Act, Ministry of Social Affairs and Health (2007). The key principal in social health care services, according to the Finnish government disability policy (2006) that services are a part of the general service systems, and people with disabilities have the right to these services. The policy also states that to ensure that services are provided municipalities have to make these services suitable for people with learning disabilities. The general arrangement of municipal social welfare and its provisions are laid in Social Welfare Act (Sosiaalihuoltolaki, 1982/710 ShL)(see table1).The policy states that services are to be provided without discrimination to people with learning disabilities and their treatment by social welfare services and by the people making decision in accordance to the Social Welfare Act, (Act on the status and rights of social welfare clients 812/2000). These laws are made to guide Social Workers when making decision as to what criteria should be used in the decision making process.

2.2 Disabilities policies and services

The law on Services and Assistance Disabled Act (380/1978 Kehityvammaispalvelulaki, VpL), and the Act Special Care for Mentally Handicapped persons (Kehitysvammaisten erityishuolto 519/1977) which is a law for support of housing services in the financial aspect (see table 2). The retardation law (Vajaamielislaki VpL 1958) on institutional care came into being the year that the retardation law came into force. Vuutaka et. al (2007) made a study on number of housing units, the studies aim was to highlight improvement in services needed on housing. Under the retardation law Social workers decision making for institutional care and improvement of services gave Social worker a level of ethical competence within the law for decision making. The Primary Health Care Act (66/1972) states that, health care services for people with disabilities, is a part of the municipality's primary health care. The policy states in addition to Primary Health Care Act provisions on rehabilitation services and support modes are laid down in the Medical Rehabilitation Decree, Ministry of Social Affairs and Health, (1991). Disability Service Act, including amendments to 09/01/2009 on Disability Services is in promoting equality and inclusion on the basis of disability service and support operations of the law 380/1987, hereinafter referred to Disability Service Act. The act came in to force in the beginning of September 2009 in a planned future changes to promote equality of severely disabled persons, and other fundamental and human rights. The aim is to increase disabled people's independence and sovereignty as well as opportunities to participate in various activities of society, Kuntainfo (2009). This means municipalities will have to provide personal assistance to individual needs to all eligible persons with disabilities according to the law. This is subjective and the municipalities will have to provide the service regardless the budget.

2.3 The reformed law

On the 1.9.2009 there was a reform of the disability law on services and Assistance Disabled Act/VPL. The key changes are in client's individual requirement that should be taken into account when organizing services and assistance. The need for services should be determined within a limited time frame, as well as individual service plans and decision making without delay. The law also clarified on the right to a personal assistance to severely disabled person, and a personal assistance without charges from social services, Ministry of Social Affairs and Health

(2010). The reforms were mainly on personal support and the empowerment of client her/himself identifying the need for support she/he needs. It means that the client has to be motivated and well knowledge about her/his own situation. That the client can her/himself identify her/his individual needs and inform what kind of personal support she/he needs. This law has clarified social workers responsibility on services for personal support, Viemerö (2009) According to the law municipalities have to arrange individual personal support according to the needs of the individual. It is a question of subjective rights for people with learning disabilities, which means municipalities have to come up with resources for such individual support whatever the cost.

TABLE 1: SOCIAL AND DISABILITY LAWS

THE LAW	YEAR	DEFINITION OF THE LAW
The retardation Law Vajaamielislaki VPL	1958	The year that institutional care came into service, the right to proper housing environment as a part of municipality's primary health care
Social Welfare Act Sosiaalihuoltolaki,SHL	710/1982	The right of municipalities to deliver social services, social assistance, social allowance, social loans and related measures intended to promote and maintain the social security and functional capacity of individual, the family and community
The law on Services and Assistance Disabled Act Kehitysvammaispalvelulaki VPL	380/1978	
The Act Special Care for Mentally Handicapped Kehitysvammaisten erityishuolto	519/1977	Law for financial support of housing services among other services
The Primary Health care	66/1972	Provison of medical health care services rehabilitation and support modes changes
1.9.2010 reform of the law and key changes	380/1987	Taking into account the individual rights of the clients when organizing services for the client Determine the need of the service within a time frame and planning the care plan and decision making without delay Personal help to disabled people and without pay for social services according to the law.

3 THE MAIN CONCEPTS OF THE STUDY

The supporting and equal treatment of people with learning disabilities to a functional capacity towards independent life skills are the fundamental objectives of the present Government of Finland. The giving of the Report on Disability Policy is based on the Governments Programme of Prime Minister Matti Vanhanen, Ministry of Social Welfare and Health, (2006). According to this report the Government states that the evaluation on the strengths and challenges of the present Finnish Disability Policy will suggest developing and reforming solutions to reforming this policy. There are transparent values-based on decision making which are necessary for people in positions of authority who claim to be making decisions in the interests of people subject to that authority, whether in private or public realms, Ministry of Social Affairs and Health, (2008).

The Government Resolution on the Health 2015 Public Health Programme, states that the aim of Finland's disability policy is, supporting for life management, an equitable treatment and functional capacity and independence for people with disabilities. This will be a removal of barriers and the inclusion of rehabilitation services. The policy states that drawing a personal plan for services to disabled people will ensure that all general services are sufficient and appropriate to all citizens. This will clarify the services and support needed. The aim is for all general services such as housing, assistive devices, and transportation are never to be as the first resort, but to aim at providing appropriate and sufficient for all citizens. Lehto (2006) The main concepts in this thesis are social workers and decision making, learning disabilities and housing. Social workers making decisions on housing for people with learning disabilities have to make decisions designed to improve the clients' autonomy and their responsibilities to improve their situation. When making decisions on plans for the service provided the consideration of many aspects of the decision making towards an appropriate providing of service such as personal assistant, transportation services, interpretation and translation service, service accommodation, home modifications, rehabilitation and assistive devices, adaptation training and rehabilitation guidance, rehabilitation allowance, special care for handicapped people, private family care, support for informal care, activities supporting employment has to be a part of a thoughtful on-going decision-making process. This thesis researches the extent to which social workers in disabilities services identify a decision which will decide on housing for people with learning disabilities who can successfully live in a wide range of different types of housing (see table 4). The Government states that its objectives are to enable people with learning disabilities and

their families to have greater choice and control over where and how they live, Lehto (2006).

3.1 Decision making and Social worker

Decision making is a skill in social work among other skills that social workers have, it is an effective professional intervention towards outcomes. Clear sound decision making and its components are identified and by making a link and combining these components with the realization of long term goals promotes the wellbeing of clients and improves the quality of social work. According to Martikainen (2008), increasing challenges face the western societies in funding and resources especially in their health care systems. Cost effective analysis gives decision-makers the scientific evidence by channelling their limited spending to improve efficiency of their health care budget into health technologies to generate biggest health outcomes.

In this thesis decision making entails more than selecting a choice but is also a context for the discursive negotiation of social reality. The actual understanding of decision making and its dynamics, one has to listen and look at what social workers say during the decision making. Maccracken & Marsh. (2008) states that “Many studies of language in decision-making contexts also have tended to treat meaning as static rather than as negotiated and changing over the course of interaction”. Choices are made through interaction, and the examination of how decisions are made during decision making interactions is therefore necessary.

Maccracken & Marsh (2008), referring to Connolly et al, 2000:Raiffa (1968) are talking about a decision flow diagram, when a decision has to be made the availability of information is not completed. The alternatives of actions from decision making process is displayed and presented by the flow diagram or decision tree. In this thesis the disability laws (see table 2) are the fundamental guidelines from which social workers can make alternative actions from which to choose when making decisions. Maccracken & Marsh (2008), states that theoretical individual decision making models are made by two general assumptions. First, that people base their decision on one or more cues or pieces of information. Second, people use these combinations of cues in some form from which they reach their decision. Adapting a Brunswik (1956) lens perspective, referring to Ilgen et al. (1995) states that, the frame work of individual decision making extents to decision making processes when individuals are faced with a situation of conflict. In this case different cue of adoption and decision making action may discourage or

encourage a course of action.

Jones (1991) proposed that moral intensity and determinants of individual ethical decision may be called moral characteristic of issues. Jones suggested there are five components that can conceptualize multidimensional construct of moral intensity: 1. *Social consensus* a dimension of social agreement of a good or evil act. 2. *Proximity* is the closeness and emotions towards beneficiaries or victims on their performances. *Magnitude of consequences* is having performed harm to beneficiaries or victims or benefit from the act. 3. *Concentration of effects* is the direct opposite function affected by a performance of a large magnitude of which a number of people will be effecting. 4. *Probability of effects* is a joint function of the probability and the anticipation that the act which actually occurred might cause an anticipated harm benefit. 5. *Temporal immediacy* means the onset of consequences of the act and the length of time between the present. Seedhouse (2005) states that people in positions of authority claim to be making decisions for people subjected to that authority in public or private realms, therefore transparent values-based decision-making is necessary. If technical evidence and expertise is not decisive then it is necessary.

3.2 Housing for People with Learning disabilities

In Finland people with learning disabilities can live in their own homes as well as in service flats. The objective is for people with learning disabilities to be able to live as independently as possible. The modification of homes is sometimes a necessity or some special equipment acquired to make independent life possible, Helsingin Invalidien Yhdistys ry (2008). In this thesis the decisions that social workers make will give the research a better understanding on how this decisions are made on housing, and the extend to which social workers in disability services identify a decision making dilemma when deciding on housing for people with learning disabilities. Statistics concerning housing services for people with learning disabilities in Finland Nummelin (2003), guidelines given by the World Health Organization (WHO 1981, 2005), Human Rights and laws clearly state a movement toward integration, equality and break down of institutionalized care for persons with learning disabilities. Based on values as interdependence and inclusion, underlined by a goal as equality, the momentary services are not reaching the recommendations given by the WHO still shows that, institutionalized care is still common, individual housing services are not covering the existing need. Yet, there is clearly an ongoing process toward those goals of individual housing. According to the Finnish government Resolution

on The Health 2015 Public Health Programme, states its objective towards severely disabled people to be provided service accommodation to ensure normal and independent lives at home. Due to severe handicap or sickness services are provided for people who need regular assistance at certain times during the day. Constant care and therapy in institutional service provides care on constant basis and also the availability of arranged home services, personal assistants and nursing at home can also be arranged. Service accommodation is also organized at service and group homes. Government disability report also states that municipalities are to reimburse severely disabled people for the costs of home conversion and for assistive devices and equipment installed in the home. Home conversion costs are covered if the alterations are essential to the client's ability to manage independently and if they relate to overcoming the impediments of disability or sickness, Ministry of Social Affairs and Health (2006) Development of housing service toward a more individual housing environment has been on debate for many years. During the past few years some reports and researches on housing environment have been available. A report has been published by Niemelä, Brandt (2008) on recommendations regarding housing and supportive services for people with intellectual disabilities. Vuutaka et.al (2007) made a study on number of housing units and their physical environment. The data was collected through observations of clients and interviews by questionnaires which were available to both target groups. The study purpose was the gaining of knowledge in order to plan and develop housing units and get the knowledge to defining evaluation criteria. Valtonen (2007)'s research is concentrated on viewpoints about services need on housing. Valtonen's target group were people with learning disabilities of the age between 15-64 and living at home. Also interviewed in the research were employees and relatives through questionnaires. The developments of the housing services were based on the study's recommendation. pitkänen, et.al (2004) evaluated the housing service of two foundations; Y-säätiön (Y-foundation) and Housing Service Foundation ASPA.

3.3 Learning Disability

The terms learning disability and learning disorder or questions like "what is disability?" When considering such a question there are some sources upon which to draw from the term disability. According to Oliver & Sapey (2006) there is the social consciousness, the professional definitions of disability and personal realities which are articulated by disabled people themselves. These definitions can be divided into different categories. Townsend (1979) refers to clinical condition, functional limitation, abnormality or loss and disadvantages. These learning disorder terminologies are not indicative of intelligence level, rather a disability in performing specific

skills. Social worker making decisions on housing for people with learning disabilities have to make decisions designed to improve the clients' autonomy and their responsibilities to improve their situation regardless of their disability level. The United Nations has been more explicit in its definition of disability. According to WHO on United Nations Standard Rules on the Equalization of Opportunities for Persons with Disabilities, the term disability "summarizes a great number of different functional limitations occurring in any population in any country of the world. People may be disabled by medical conditions, physical or intellectual as well as sensory impairment, mental illnesses and impairment, medical conditions. Such impairments, conditions or illnesses may be permanent or transitory in nature". Despite this emphatic inclusion of mental disability, many countries have not yet begun giving mental disability the attention it deserves, WHO Disability and Rehabilitation Plan (2006-2011). According to the World Health Organization, on Disability and Rehabilitation WHO action plan (2006-2011) an estimated 10% of the world's population experience some form of disability or impairment. Environment changes, population growth, ageing emergence of chronic diseases as well as medical advances that preserve and prolong life have increased the number of people with disabilities. Chronic diseases such as diabetes are the most common cases of impairment. One of the definitions of disability according to the World Health Organization often used is: "The inability to engage in any substantial, gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death, or has lasted or can be expected to last for a continuous period of not less than 12 months". World Health Organization, Disability and Rehabilitation Plan, (2006-2010). Due to these increase pressures, many countries have made explicit use of economic evaluation resources, Hjelmgren et al, (2001). Pro cost-effectiveness analyses by scientific evidence allows decision-makers to improve efficiency by improving on how and why they make decision to improve efficiency in order to get quality outcomes from their decisions, Drummond et al. (2005).

3.4 Ethical decision making by social workers

According to Reamer (1990) ethical decision- making process given a practice situation lies largely on the ability to recognize and ethical existing dilemma by practitioners. When competing values and principles as well as obligations are recognized in a situation helps to separate from practice ethical components or non ethical components. In identifying the ethical component of a situation it reduces social workers tendency to think that ethical issues are just practice problems.

Boland (2006) states that, there are a number of factors which are dependent on ethical decision making. The recognition of a situation which has competing values, obligations, practices, or principles is the first step in decision making. The understanding of the rationale which determines the presence of an ethical dilemma is the recognition of these ethical issues which will lead to the second step of which practitioners understand. This recognition involves a number of responses which will identify ethical dilemmas.

Jones (1991) states that, issues that are higher in moral intensity, when confronted by individuals have a likely hood of progressing through ethical decision making as described by Rest (1986) a reality. Specifically they are more likely to (1) identify the issue as an ethical and moral one, (2) regarding an issue and make a moral judgment of it (i.e., placing above all others moral concerns), (3) to behave intentionally and establish moral judgment according to the intentions (4) moral or ethical behaviour engagement. According to a study by Boland (2006) on ethical decision making, ethical dilemmas have led to a need of understanding and changes in practice which are resulting from improved health care technology and managed care economic pressures. There is a need to understand ethical decision making, as an ongoing process and as a part of the thoughtful, ongoing process. Therefore, it is as important to understand the process which influences the outcome as well as the actions taken. Boland (2006) continues that, knowing how a case is deemed as an ethical one depends on what tendencies and influences, how these influences factor's on a case, and ultimately it is important part of social work practice on how it is resolved and a first step in promoting ethical competence. Medical legal environment influences social workers and other professionals in health care in the environment in which they practice.

4 PURPOSE AND RESEARCH QUESTION

The purpose of the research is to study decision making among social workers, when deciding on housing for people with learning disabilities. The aim is to research the extent to which social workers in disability services identify a decision making dilemma when deciding on housing for people with learning disabilities. Providing a rationale for the basis of their decision and

subsequently follow a process for resolution. Understanding how practitioners identify the presence of decision making and how they make decisions provides the conceptual underpinnings for this study. The research questions reads as follows: What are the grounds for decision making by social worker on housing for people with learning disabilities? How are these decisions made?

5 RESEARCH METHODS

Qualitative research is used to gain insight into people's behaviours, motivations, aspirations, value systems, attitudes, culture or lifestyles. Qualitative research seeks the "why" not the "how" of a topic through the unstructured information of an analysis such as interview transcripts, feedback, notes, emails, photos, and videos. It doesn't rely on only numbers or statistics, which are the main factors to quantitative research. Focus groups, content analysis, evaluation, in-depth interviews and ethnography are some of the formal approaches used, never the less qualitative research also involves the analysis of any unstructured material, such as customer feedback, forms, and reports. The collection and analysing an unstructured information can take time when finding themes and extracting meaning form the material available, Ereaut (2007).

5.1 Qualitative approach

The qualitative research method is formed by focus group method as data collection and the applied method of qualitative content analysis. In addition, social work researchers have the potential to further develop focus groups as a qualitative research method. In order to understand the meaning that people give to their deeds or to a social phenomena qualitative research attempts to give a meaning to a research. The methodology used in this research by using focus group method sees social workers from inside and also a means of information that social workers bring to the qualitative researcher, Denzin & Lincoln (2005). Qualitative research in other words sees people from the inside. This qualitative research often enters into the

natural fields of social workers of whom a face to face interview will bring the answers to the content of the research, Hisada (2003).

5.2 Participants and the study

In this thesis the focus group consist of four social workers from the same department of disability in Helsinki. Stewart and Shamdasani (1990) add that having a group that consist of a large number of representative members of a large population ensures convenience sampling and preclude adequate participation by most members. At the same time a group should also not be too small that it will fail to give substantially greater coverage than when interviewing with one individual. Stewart & Shamdasani (1990), states that the objectives of the research depends on the number of participants. Smaller groups of (4-6 people) who have a great deal to share on the topic or have lengthy intense experiences are preferable with the topic of discussion, Kreuger, (1988). The Number of social workers participating in this thesis is small but the participants share the same working experiences. The participants are all women the youngest being 40 years old and the oldest 53 years old. The number of years that the social workers have working in the department of learning disabilities range from 3 years to 26 years. The educational background for all social workers is a university degree. An application for permission to conduct the study was sent to the city of Helsinki and to the department for people with learning disabilities, where social workers were contacted to ask for permission of their participation. An invitation letter for the interview in Finnish and English (appendix 1 & 2) was sent to the department and letters for informed consent in both languages were also available during the interview (appendix 3 & 4). Before the interview the social workers signed the consent forms. There was also a discussion on confidentiality and the participants were assured that, once the thesis was approved the information gain during the interview will be destroyed and that no names will be mention in the thesis. The themes for discussion in the focus group were also in both Finnish and English (see appendix 5 & 6).According to Stewart and Shamdasani, (1990) the researches questioning route and research questions should be the force of the research. Stewart and Shamdasani (1990) suggest that there are several principles for consideration when preparing questions for interview. One is that the order of questioning should be the general first followed by the specific. Two all questions in the beginning of the interview should be of greater importance, while the less important ones should be at the end of the interview. Stewart and Shamdasani (1990) state that, this does tend to look conflicting because general questions should be first questions that the researcher uses, and with the more specific coming next as questions and

move back to the more general questions. This questioning route approach of which from general to the specific is one way of ensuring the engaging interest and active involvement of the participants quickly. Steward and Shamdasani (1990) add that, specific questioning may side track the topic of discussion if it is done in the beginning of the session, and this might take the lead the discussion towards a too focused and narrow discussion.

5.3 Focus group interview as data collection method

The purpose of a focus group is the gathering of information in a group while listening. In this thesis the purpose is researching decision making among social workers, when deciding on housing for people with learning disabilities. The selection of social workers as participant is because of their common characteristics, that they have that relates to decision making as is in this thesis, the participants are from the same department of disability services in Helsinki, and are all social workers. The data consist of personal knowledge and experiences. The information collected from the social workers through a focus group discussion is raw data. According to Lewis (2000), the researches task is collecting of data and preparing of a statement, and once the data is available the process of transcribing the entire interview by the social workers starts. The discussion will provide a record of these discussions in order to facilitate and analysis of the data. Lewis (2000) adds that, the next step is to analyze the information that became available from the focus group. Through the social workers interviews trends and patterns will reappear of which the researcher will look for in a focus group. Kreuger (1988) suggests that the respondent's comments and intensity and emphasis must be considered by the researcher.

According to Krueger & Casey (2000) a careful and systematic analysis of a discussion needs insights and clues on how a product, service or opportunity is perceived. A focus group method can be used at any point in research. Steward & Shamdasani (1990) state that, information is gathered on a topic of interest, which will produces a hypothesis in a research can be used to test a research further. Steward and Shamdasani (1990) add that, the discussion by respondents about a phenomena of interest may facilitate tools for research. An analysis of a focus group is systematic, verifiable, sequential, and continuous. According Kreuger (1988) content analysis starts with a word used in an answer and its comparison in a focus group methodology. Group interviews in a variety of settings can be used and must be employed to promote validity. (Appendix 3 &4).

TABLE 2: FOCUS GROUP INTERVIEW PROCESS

FOCUS GROUP INTERVIEW PROCESS	
<u>Definition planning of the focus group and determining the purpose</u>	Focus group interviewing is defined to be limited to those situations where the participating group is small enough that it permits genuine discussion among all its participants. Four social workers will be interviewed the topic of decision making among social workers are topics that are better discussed by a small group of people who know each other. The topic being decision making among social workers.
<u>Use of focus groups</u>	The focus group interview in this thesis by four social workers on decision making will bring to light information to the research such as the obtaining of background information on interesting topics. The generating of research hypotheses which can be used to further research and testing using qualitative approaches. New ideas and stimulating creative concepts. The interpretation of previously obtained information and qualitative results
<u>The interview guide and structure</u>	Developing the questioning route categories of questions. The researcher sets the agenda for discussion, to provide direction. The agenda should grow directly from the research questions that are impetus for the research. The questions being <i>What decisions do social worker make, what are the grounds for decision making, and how are these decisions made on housing for people with learning disabilities.</i> Semi structured interview questions are normally specified the aim is for standardization and comparability. There are two principles to be considered when formulating questions for interview. Questions with more importance will be presented first and those with lesser significance to be presented towards the end of the interview. The order of the questions should be from more general to the more specific. This will increase social workers interest during the interview. A small focus group interview permits genuine discussion among the participants and in this thesis it means social workers and focus group interviews are better discussed by small group of experienced people who know each other.
<u>Collecting data.</u>	The tendency for tape recorders to sometimes pick up background noises is possible in focus group. The researcher will have to encourage the participants to speak clearly to avoid unclear interview. It is necessary for the social workers to identify themselves before they speak. Note making is important to capture phrases by the participants as long as the process does not interfere with the discussion at hand. Note taking is a security measure on the event that the tape recorder stops working, they should be readable and clear.
<u>Analysing focus group data</u>	The information collected from a focus group discussion by the interviewed social workers is raw data. The preparing of a statement regarding the collected data is the researchers' task. Transcribing the entire interview. This will provide a complete record of the discussion and will facilitate analysis of the data. The aim of analysis is for the researcher to look for trends and patterns that reappear within a focus group. In this research it means patterns and trends which will appear from the interviews with the social workers on decision making.
<u>Conclusion and findings</u>	CONCLUSION FINDINGS, OUTCOME
	Successful data after the interview will reveal the information available for the findings. The methodology of focus group is employed to promote validity. The elements for credible qualitative research are the essential of the findings.

Qualitative research in focus-group particularly in interviews there is a large amount of data generating from interviews which is overwhelming. An hour interview takes almost 5-6 hours to transcribe and may lead up to 20 pages. There are number of ways to analyse qualitative data. Krueger (1994) states that, there are some key stages that incorporate a framework of approach in analysing. Krueger's approach provides in the analysis clarity in the key stages of analysis which could help the researcher to manage and control the large amount of data that has become available. According to Krueger (1994) in focus-group qualitative analysis the analysis occurs in accordance to the data collected. Krueger (1994) also suggests analysis and its way of thinking should be considered as a succession of analysis which ranges from the data which has accumulated to the interpretation of the data. Statements are interpreted and descriptive as raw

data. Kreuger (1988) suggests that a focus interview usually include less than ten questions and often between five or six. Stewart and Shamdasani(1990) propose that, interview should consists of not more than a dozen questions. Unstructured and open-ended questions allows answers from different angles by the respondents. Maximum responses by all participants can be achieved when questions are well phrased and carefully selected in advance. According to Stewart & Shamdasani (1990) questions that include words such as how, why, under what conditions, gives the respondents the information that the researcher is interested and the quality of facilitating the discussion (see table 2). Kreuger (1988) also argues that in focus group researchers should rarely use questions as they will force the participants into providing answers too quickly and that may look rational or appropriate to the situation. In this thesis there were questioning themes, and the informers were aware of the purpose of the research and the identifying decision making process. In this case the discussion was done in a relaxed manner and the topic was interesting to the participants.

5.4 Data Analysis

The aim of the analysis is to look for the reappearance of patterns and trends within a single focus group. The analysis of the contents begins the comparison of words to the answers. Thereby the aim is to understand the research questions: what are the grounds for decisions making by social workers? How are the decisions made? Kreuger (1988) states that, the context of the transcript, meanings and motives are for consideration in a focus group discussions and interactions, as well as the contents of the data for analysis. Content analysis is a generic name for a meaning of textual analysis, which means categorizing of data, comparing, contrasting. (see table 3). In other words content analysis means the transformation of the acquired data into findings and organizing the words into less content related categories, (Patton 2002, Cavanagh 1997, Schwandt 1997). Content analysis begins with comparing words used in answers and it's an analyzing data method, for data that comes from the discussion by participants which is systematically and objectively a qualitative process. This process includes to a certain extent a subjective interpretation and approach of the researcher. Burns & Grove (1997), Referring to Cormark(1996) and Patton(2002) state that the analysis happens during the adaptation of the data and its implementation, in which there are no existing rules only suggested strategies. According to Kreuger (1988) the beginning of content analysis is the comparison of the words used in the answer. Denscombe (2003) states that, a direct and somewhat logical procedure generally follows in content analysis. Appropriate sampling text the choosing of the criterion for choice of

sampling should be defined and each word is analyzed as a unit. Whole paragraphs or headlines in the analysis can be alternatively as a unit to complete sentences. The data available from this research are from the interviews from the social. Denscombe (2003) continues that the researcher needs to develop relevant categories and have a clear idea for analyzing and kinds of categories ideas and issues of how this will be represented in the text. The coding of units needs concentrated attention and are written in text and referred too, (see table 3). Content analysis discloses potentially aspects communicated through many hidden aspect of written text and through text. According to Denscombe (2003) content analysis is quantifying the contents and provides a meaning in a text by using clear method. Content analysis is clear, obvious and simple when dealing with communication aspects. Denscombe (2003) continues that this is a method of analyzing which helps the researcher to analyze the quantify contents. Denscombe adds that, a relatively and straight forward procedure is the logic of content analysis. The many hidden aspects in the data collected from the interview with the social workers has the potential to be disclose, which is, communicated through the written text from the collected data. According to Krueger (1994) the reducing of the data is an important phase of analysis, this is achieved by is achieved by comparison and contrasting data, pasting similar quotes together and cutting. Mapping and interpreting is the final stages of analysis. The task is to see the connection through the analysis between the quotes and make sense of the individual quotes and link it with the data as a whole. Krueger & Casey (2004) state that, the understood transparent documented process of data analysis is to establishing a trail of transparent evidence. The recorded spoken language is the main source of data analysis derived from the interview. During the transcribing of the raw data for this thesis, the interview which was an hour interview and the transferring of the data from the tape recorder into readable text took about 5hrs, which resulted into 11 pages of data. During the focus group interview with the four social workers from the Department of Disability in Helsinki, there was a lot of information which became available to the study. After familiarizing with the data by listening to the tape recorder several times and at the same time reading the text available in order to make sense of the interview some themes started to emerge. Continuous comparison was made throughout the analysis process between the transcript and the themes to prevent discrepancies. Identifying themes, indexing and charting were the next step of this analysis. Some concepts began to develop and by dividing the text to form short phrases in order to develop categories. The shifting of the data and highlighting and sorting out quotas was to make comparison in the data that was able to develop into appropriate thematic content from the data. Through this method of analysis, the data became manageable in finding the information needed to answer to this thesis research questions the "what and the how" The "what" being grounds for decision making and "how" is the process and implementation of the decision. The emerging of the themes is the source of data from the interview. After

familiarizing with the data several categories for the study started to appear. Housing, the evaluation process, decision making which are vital information to finding the purpose of this research.

TABLE 3: DATA ANALYSIS PROCESS ACCORDING TO KRUEGER (1994)

PROCESS	MEANING	AIM
Familiarization of data	Listening to tapes and reading the transcript several times,	Making sense of the interview before breaking into parts. major themes begin to appear
Identifying themes	Writing memos in the margin of the text in the form of short phrases, ideas or arising concepts are beginning to develop categories	Descriptive statements are forming and an analysis is carried out on the data of the questioning route
Indexing	Shifting the data highlighting and sorting out quotas	To make comparison both within and between cases. managing the data
Charting	Lifting quotes from their original context and re-arranging under the newly developed appropriate thematic content	Managing the data

6 Findings

The findings presented in this thesis will be linked with the discussion. In defining the critical issues involved in decision making can aid in understanding those individuals affected by the decisions made and its possible course of action to take. The data available is from four social workers with many years experience in their field of work. As social workers working with people with learning disabilities the respondents provided an additional inside on grounds for decisions. This study will give a more holistic picture on the process on grounds for decision making on housing and its environment. The reflections of social worker and their role in the process are presented in the thesis. During the findings the use of officials now and then will represent social workers so as to avoid continuous repetition of the word social worker.

6.1 Housing based on a need

The category “Housing environment based on a need” is one of the main concepts of this thesis being a ground for decision making by social worker on housing for people with learning disabilities it describes different types of housing environment available through three sub-categories. Concepts of housing and its changes and environment and independence as well as modification of housing environment based on the client’s needs are categories describing different types of possibilities.

There are different types of housing available to people with learning disabilities according to the findings, the availability of these housing environment depends on the process of evaluating the individual needs of the clients. Housing is understood in this thesis as a place where it is possible to live and carry out everyday activities and feel independent. It means to live and carry out basic living everyday functions. Modification of the housing environment are done in accordance to the disability law, and are granted to clients living within the authorities’ catchments area and are in need of some adaptation or modification in some areas of their dwellings. Wanting to continue to dwell in childhood homes is a good example of a modified home or in a group home. In new housing environment consideration for clients mobility have been taken into consideration by having doors that open by remote so that people using wheel chairs can move freely. Social worker C; *“the first consideration is the needed service and support, then we can consider the housing environment. This is considered during the evaluation process, but it is not a decision making.”*

6.1.1 Concepts of housing environment and its changes

The concept of housing environments for people with learning disability has changed. Institutional care is no longer the first priority, and such care is slowly disappearing as an option. Institutional care is available only as an extreme measure and when the clients cannot manage at all to function in everyday living without assistance. The changing progress on housing environment means institutional places are being given up completely. People with learning disabilities do not live any more in institutional type of housing. Institutional care is the last resort if the client cannot manage in any other housing environment.

TABLE 4: DIFFERENT TYPES OF HOUSING ENVIRONMENT

Support housing	the clients either needs individual support part time or whole day
Group home	other people living in the same environment, not necessary in one room, two clients but can also have own room. Arranged activities and socializing
Apartments type of living	such apartments may have been for workers, but renovated to accommodate clients with learning disabilities
Home care	living in own home and receiving the needs within the home. It can be home renovated to suit the clients needs and may have a support worker coming to assist
Shared housing	where clients who are friends can share a home together or two rooms , and a support worker coming in to help
Own child hood home	home where the client grew up and possibility of having the childhood home renovated to serve the clients needs
Other possibilities	living in the country side, possibilities of city apartments

The changing progress on housing environment means that institutional places are being given up completely. In order to place a client or young person with learning disability in an institution the client has to have a big need for support. People with learning disability do not live anymore in institutional type of housing. Clients are satisfied with living area in cities where it easy to get into the city by using public transport. Living near the city is also quite expensive for the clients. *Social worker B. "there are institutional places at the moment which are shutting down and giving way to new type of housing environments. In Lapinlahden area with its park environment although its an apartment building but clients live peacefully in such areas, but then there is no explanation for sending a client to institutional care"*

6.1.2 Housing environments and independence

Housing environments today provide a lot of possibilities to the clients and the client's wellbeing. The availability of such environments, where clients who prefer living in the country side, and can manage on their own, and feel independent and able to release energy, or city living where one steps out to the street from her/his housing environment and doors with safety locks are modern day housing environments. *Social worker A: "there are those housing environment for example in Rinnekoti area where clients feels independent and is able to move by her/himself and able to release energy such a client one cannot place in the city"*. In group homes (see Figure 4) where clients live with other clients, such homes enables them to interact with other clients living in the home, to make friends and socialize. The possibility of living at home is also considered and if needed funds would be made available for modification of the home to make

the housing environment safe and make changes that will enable the client continue to live in the same environment that she/he grew up in. *Social worker C: these modifications of dwellings are done according to the disability law, these modification can be done also if a clients lives in his childhood home and there is a need to improve the living environment or group homes.*

6.1.3 Modification of housing environment based on client's need

The modification of housing environment is made in accordance with the disability law. Municipalities are to reimburse disable people for the costs of home conversion. The changes in the housing environment can also be made while the client is already living in an allocated housing. *Social worker B: if a client lives in a group home and perhaps the environment has become not suitable for the client and does not serve the clients needs, we can make changes in the environment so that the client can continue living in the same environment, in some cases it just not possible to continue living in that environment and has to change to another appropriate environment.*

6.2 Social workers' impact on decisions

The category "Social workers impact on decisions" being one of the main concepts of this thesis on grounds for decision making, describes the social workers impact on decisions through four sub-categories. Social workers' description of the needs of the clients is mentioned as a sub-category to clarify their role when reaching for a decision. The further three sub-categories are the initiation of the evaluation process, the evaluation and documentation of individual needs and support and the evaluation of the support needed by the client.

The evaluation process is a very important phase for the client as it's the ground for decision making. There are several phases of the process before an official decision making is done, once the clients contacts the social worker of the department of learning disability on his/her needs. The grounds for decision making starts with the contact with the social worker, the filling of the evaluation form, the forwarding of the forms to the SAS group, who will then decide how to make the decision based on the evaluation and the official decision, the social workers make an individual decision which is the process of the implementation of the decision. Out these phases only three phases affects the social worker and decision making. The contact with the client, the evaluation, and the management (hallinto päätös) and individual decision (yksilö huollon päätös). *Social worker C: It starts with a client or the client's family or someone else who contacts a*

social worker and says that this person would need housing. Then a social worker meets with family, clients, and any other persons to fill the evaluation of the form

6.2.1 Social workers' description of the needs of the clients

Social workers do not make the decision as to where the clients will live. The grounds towards the decision making is done by the social worker and the clients who together will determine the problems and needs of the clients first, as to what support and services does the client need. All extra wishes that the clients brings to the social worker will be noted during their evaluation discussion, and will be taken into consideration only after the review of the support and needs is clarified. Extra wishes from clients are usually issues like wanting to live in the same housing environment as a friend, or want to live in the city centre or want to still live at home, even if the home environment is not manageable to the client anymore. *Social worker B: " only the individual needs and support are documented, we do not make the final decision on where the client will live we only make an evaluation of the need.*

6.2.2 Initiation of the evaluation process

During the evaluation process (see Table 6) the client/client with family get in contact with the social worker informing them that there is a need for housing environment. During the contact with the officials choices are made through this interaction which is necessary for a decision outcome. Either the need is a new need or then an urgent need to move to a new environment because the present one does not service the clients' individual needs. There is an evaluation form available (see Table 5) once the client contacts the social worker. During the evaluation process by filling the evaluation form is how the grounds for decision making are clarified when the individual needs of the clients start to emerge and these individual needs of the clients are social workers priority. *Social worker C: its starts with the client, family or someone else making contact with the social worker. The social worker meets with the family, the client and possibility other people, and fill the evaluation form, the needs.*

6.2.3 Evaluation and documentation of individual needs and support

All the needs that come up during the process are documented in the form and are the grounds for decision making. Social workers primarily take into consideration what kind of support and

services the client will need individually, and also consider the support the family will need. Social workers do not take stand on the current type of housing that the client's lives in, but then again there are always exceptions taken if the client cannot dwell in the present environment anymore. *Social Worker C: "the service first is what kind of housing environment is the need or the little that is needed. we fill the information in the evaluation form but we don't make decisions. only the individual needs and support are documented, we do not make the final decision on where the client will live we only make an evaluation of the need.* This phase of the process is of outmost importance. What the social workers says or understands about the information coming form the client and the dynamics of the process between the social worker and the client/family of the client is of importance to the realization of the needs of the client. The biggest issue is the filling the form which enlightens the grounds for a decision for the SAS group (selvitä,arvio, sijoita) who will decide how to make the official decision to the realization of a housing environment. In the form questions like mobility in and out of the home, and how independently does the client manage and how much support he will need in the housing environment, and therefore what kind of housing environment will be appropriate for her/him have to be visible in the evaluation to get a decision.(see Table 5).

6.2.4 Evaluation on the support needed by the client

The social workers first consideration is not on what kind of housing does the client want. If a client prefers living in the city or in the country side, the first emphasis is on what kind of support does the client need or will need towards every day living. Secondly the social worker will consider the clients other wishes, as to client's first choice of housing environment. *Social worker A & B; " the housing environment is still a head ace in such a way that one cannot implement what the clients wish. Clients wish for certain housing environment, but it is not always possible". "Sometimes the best moment is when a client wishes to be placed at a certain place and those places happen to have an empty slot, that's when we are thanked. Thanks is difficult to get because the placement does not depend on the social worker".It is quite rare that the clients gets exactly what he wishes for".*Wishes are difficult to grant due to the type of wishes that clients bring during the evaluation. Such wishes as wanting to be placed where a friend, or wanting to live in town, even though some wishes might be beyond their resources, or not suitable to the client's needs.

TABLE 5: EVALUATION FORM (ARVIINTI LOMAKE) ON HOUSING ENVIRONMENT OF INSTITUTIONAL NEED / DEPARTMENT OF DISABILITY

<p>CLIENT</p>	<p>Name, social security number, family, legal representative, place of stay or placement at moment, study place or work place, diagnosis of disability. Special disabilities client</p>
<p>CLIENTS WISHES ON HOUSING ENVIRONMENT AND PERMISSION TO WORK ON THE INFORMATION AVAILABLE</p>	<p>Client wishes to live in the present home/wants to live in another area,/not yet sure of his/her wishes the client/legal representative/guardian gives permission for the clients information to be processed by social services and to allow the information to be transferred to the clients new living place</p>
<p>DESCRIPTION CLIENTS FUNCTION CAPABILITIES AND THE NEEDED SUPPORT</p>	<p>Evaluation of disability by health officials (if needed) on health and the need for support/ special needs/ function capabilities and urgency of placement</p>
<p>DESCRIPTION OF CLIENTS FUNCTION CAPABILITIES AND THE NEEDS FOR SUPPORT THE ADVISER OF LEARNING DISABILITIES</p>	<p>Washing and dressing, self eating and assistance eating, home chores and laundry, taking of medicine and self health care, movement function, out door activities, and dealing with chores, communication, social activities and hobbies, housing needs and special needs, (the client and guardian fill this information)</p>
<p>EVALUATION OF THE TYPE OF SERVICE NEEDED</p>	<p>The clients housing history and support offered at present housing environment, reasons for change of present housing environment, reasons could also be clients independence from childhood home Clients housing environment needs: support housing, guided housing, the clients needs morning worker in guided housing, assistance housing, family care, institutional care Housing environment materially effecting factors: special environment needs, or support needs, in family care from family needs, movement free space, the need for psychiatric expertise, dementia care, autism care Urgency of placement. The timing for the need of placement; The need is urgent the client cannot live at present care place. The client is ready to take the placement, but can still wait at the present care place awaiting arrangements. The timing of the placement is schedule within a year, (if known) The timing of placement is later; accurate timing (the evaluation at present) The clients or relatives views on the needed services or their evaluation on the urgency of the placement. The client and or with relatives possible wishes on the new housing environment The social workers signature and contact information.</p>
<p>REVIEW OF THE TYPE OF SERVICE NEEDED BY THE SAS-WORK GROUP</p>	<p>The social worker takes her evaluation of the kind of service needed by client to the SAS work group or on unclear decision to the SAS group for clarification and decision making. The final review on the type of service needed by the SAS work group will be hand to their secretary The social worker sends the review to the SAS work group dated The clients needs on the type of service or its definition of urgency is unclear needs to be resolved by the SAS work group Reasons; the social workers evaluation of which the clients service need is urgent will be decided by the SAS group (e.g. difficult evaluation situation, the different views between the clients and relatives, institutional care evaluation) The clients service needs; (SAS group resolves) in support housing, guided living, the clients needs a morning worker in guided living, help living, family care, institutional care, the service needs are denied.</p>

6.3 Final decision making

The final decision making takes place within the SAS-group (clarify, evaluate, placement). Figure 1 depicts the kind of decisions needed and the process on how a decision might be made.

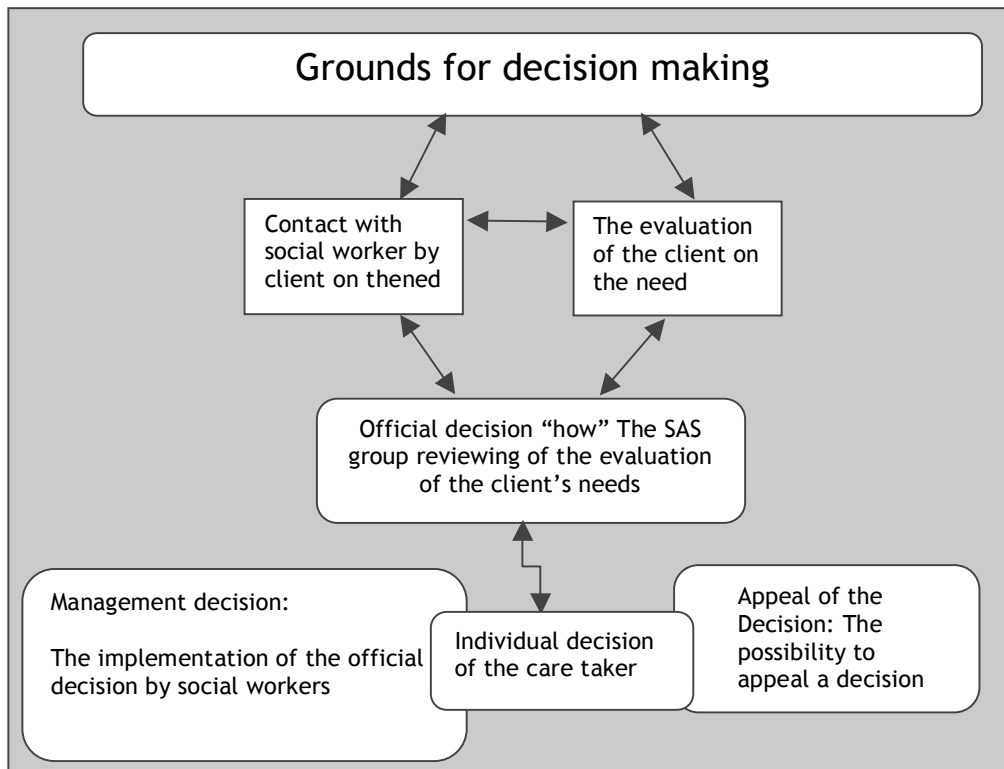


FIGURE 1: Decision tree

The category "Final decision making" describes the decision maker whose role is of importance to the deliver the needs and wishes of the clients. There are two sub-categories. Social workers role in the evaluation for a decision, and the implementation of the decision. The final decision maker is the SAS group (selvitää, arvio, sijoita) who will then inform the social worker of how they made their decision and how the group has decided on that particular decision (see Table 6). The social workers input in the evaluation of the clients individual needs is the grounds for decision and how a decision is finally made. The filling of the forms and the information which becomes available during the evaluation is presented to the SAS group who make the official decision for placement. Social worker C: "we fill the evaluation form and the SAS group make the official placement decision. We then make the official individual decision (virallinen yksilöhuollon

päätös) that the placement has been granted and where the area where the housing will be and the starting date of the placement".

TABLE 6: OFFICIAL DECISION & PLACEMENT PROCESS

CLIENTS PLACEMENT PROCESS AND DECISION MAKING	
THE CLIENT OR THE CLIENTS AND HIS/HER FAMILY MAKE CONTACT WITH THE DEPARTMENT OF LEARNING DISABILITY WITH SOCIAL WORKER	
SOCIAL WORKER	The social workers interview the clients/client with family. Fill in a form to determine and evaluate the individual needs of the client and the support families need on the type of housing environment needed. Social worker forwards the evaluation to the SAS-work group
SAS-WORK GROUP SAS (selvitä/clarify, arvio/evaluate, sijoita/placement)	<ul style="list-style-type: none"> receives the application of the evaluation made by the social worker checks and review the evaluation and if necessary meets the clients placement department informs of the availability of vacant places returns the evaluation to social workers if unclear a decision is made and the work group informs the social worker on their decision who then informs the client the group registers the decision on their data base
SOCIAL WORKER	Receives the decision, informs the client, the placement receiving department, the clients decides whether he/she takes the placement, social worker visits the environment, makes a care plan, arrangements for the placement, the client moves and the social worker makes the placement decision.
DISABILITY WORK COMMITTEE	Follow up of new housing environments, information on new environments and projects, evaluate the need for institutionalizing if the client is already in a group home, follow up bought services and if needed take a stand on crises placement, follow up the placement process and the SAS group work
SPECIAL MAINTENANCE PROGRAMME AMENDMENT	at this phase the social worker has a saying of the type of special maintenance needed by the client on his/her housing environment and the social workers can if possible considers the clients wishes on which area he/she prefers to live if there is a place available for placement

6.3.1 Social workers role in the evaluation for a decision

The evaluation is reviewed and if there is a need to meet the client, the SAS group will meet with the client. During this process the department for placement will have already informed the SAS group on availability of vacant places for placement. A decision for the placement will be made after the SAS group has reviewed the form delivered by the social worker. The SAS (clarify, evaluate & placement) group does not make the final individual decision, they make an official decision. An official decision is decision where the social workers evaluation has been presented as the grounds for a decision on deciding where the client will be placed and that's how an official decision (virallinen päätös) is made. The group will inform the social worker of their decision who will then make a management decision (hallinto päätös) and inform the client their

individual decision (yskilö huollon päätös). Social worker C: *"social worker does not make the final decision on placement, but fills the evaluation form and fill all available information from the client to the form. We then sent the form to the SAS group who will go through the application and if there are any questions from the group on the information in the evaluation form the forms will be return to us for correction"*.

6.3.2 The implementation of the decision making

The next phase after the official decision has come through is the paper work phase. The paper work phase is the implementation of the individual decision of which the social worker makes. The social worker works on the paper work, where they make a review of the decision as to what was decided by the SAS group and send a management decision to the client (see process Table 5). It is then the responsibility of the social worker to implement the placement. At this point the social worker can influence on the individual decision on the clients wishes on certain places where she/he wishes to live if available. Social worker B: *"that social worker do not make decision, but they prepare it for implementation, and someone else from special care management team or the head of social services from the department of disabilities then we put on paper for the implementation towards the housing environment. But sometimes there are peak moments when the availability of the housing that the clients wished is possible"*The structure of decision making according to the findings is perhaps somehow not quite clear to the social workers themselves. Somehow it was not clear what decision do they make after the official decision has been made by SAS group. Social Worker C: *"SAS makes the decision, but that too is not a management decision (hallintopäätös) but its only a oh well I don't know.... how would we say again..."* Social worker A: *"is it an official decision (virallinen päätös) it actually decides where a person will go to live, but the social worker after that does the paper work in which there is a formal decision, but she/he gets to make the decision... how does it actually goes. They are probably then management decision papers that we fill and send home."* For some clients who for some reasons need to change their housing environment there are usually put on a waiting list to wait for placement places to be free. The SAS group also takes into consideration on urgency of the placement. The social workers consult among each other during the evaluation when they feel that they need to consult each other. Social worker C: *"the clients are put on a waiting list to get a placement. If a place happen to become vacant the SAS group checks the list to determine which of the clients on the list can be placed and who has an urgency placement need, then social workers implement and make sure that it is a possible placement."*

7 DISCUSSION OF THE FINDINGS

Following discussion consists of ethical considerations and trustworthiness of this research. The discussion of the findings aims towards describing the findings context in regards to the social welfare laws and criteria. The origination of the data from the research will be able to recommend further research, and the experience of this research process and its concepts.

7.1 Ethical considerations

Social research involves ethical issues, it is the involvement of collecting data from people about people as well as social workers in the research. The research has to necessary meet two important criteria, considering the consequences of the research study ethically. One is that, when obtaining something of value without the abuse of trust interaction has to be achieved from all parties. The aim of the research should lead to the development of examining the human situation (Jorgensen 1992, Kvale 1996). There are several key ethical issues to be considered in order to fulfil duties which endeavour for mutual benefit, and the possibility of reducing the harm the informants suffer when participating in an investigation. According to Banks (2001) in social work decision making involves a complex interaction of political, ethical, legal and technical issues, which are all connected to each other. Ethical values and principles have an influence on the law and how it is interpreted. Bank (2001) continues that deciding whether a person is entitled to services or disabled car parking badge is a technical matter of deciding. A defined standard of evaluation is usually done. This illuminates some of the ethical problems social workers may face when making decisions. Banks (2001) adds that, there are three main types of ethical issues in social work. 1. Issues around a user's individual rights and welfare the right to make own choices of decisions, and the social worker's responsibility to the user to promote the users welfare. 2. Issues around public welfare, the social worker has responsibility towards the employer and the society for the rights and interest of parties other than the users, and to promote at the greatest good to a greatest number of people. 3. Issues around the social worker's responsibility towards inequality and structural oppression, and to challenge oppression in order to work for changes in society and employer policy.

In this thesis there is a need to be aware of sensitivity to ethical issues involved and to consider

them during the research. According to Punch (2004) "codes of conduct are helpful in sensitizing researchers to the possible issues". The process of ethical decision-making may be affected by a number of factors such as internationalization of social work values, education, and experience in social work, prior ethics training and professional identification. The presence of these factors may guide a practitioner toward a decision-making process that is based on an examination of the value conflicts present, the establishment of the ethically relevant facts, the consideration of ethical theory, principles and codes of ethics and the examination of all possible alternatives and options available to resolve the ethical dilemma. Ethical guidelines according to Richards & Schwartz (2002) are followed in order to consider the welfare of the participants who are in this thesis the social workers. By giving insight on how the research will meet the conditions of these ethical issues will increase intuitively trustworthiness.

Watt (1992) states that, ethical decision making is the identification of the value conflicts presented in a situation. In thesis ethical problems and dilemmas that occur have a value based component that includes issues such as client's autonomy. The reformed law states that a client with learning disability has to have the capability of identify his needs her/himself in order to get these services, such as clients' autonomy. This is a conflict for social worker particularly when faced with determining whether the client with learning disability is capable of doing so. These value often conflict and involve choosing a course of action where alternatives options appear to offer a resolution. According to Richard & Schwartz (2002) guidelines for qualitative studies is the relationship of power between the participants and researchers on privacy, confidentiality, anonymity and consent. There are two parts to these guidelines, ways to minimize the risks and risks to the participants, and the protection and anonymity of the participants has to be ensured. Burns & Grove (2001) add that, gained data and the unidentified of participants must be handled confidentially and anonymity and confidentiality must be assured. Participants have to be informed well on the background and purpose of the research. Anonymity and confidentiality was discussed with the participants the social workers, this enhanced the trustworthiness during the interview process. The social workers were sent and invitation letter (Appendix 1&2) after discussing with them by phone and contact through email they had agreed to participate. A letter of consent was also sent to the participant, and when the interview took place the social workers signed the consent (Appendix 3&4) The informed consent clarifies the purpose and the topic of the research. According to Richard & Schwartz (2002) the identification of participants reduces harm by confidentiality. Unwanted exposure is safeguarded by confidentiality. Information like names and personal information is shared only by the interviewer, and the transcribers. After the transcribing all names will be handled with confidentiality. By using a focus group method of interview and having participants from the same department with the same qualified experience

with working with people with learning disabilities it provided the trustful environment for the interview.

7.2 Trustworthiness

There are interpretations on requirement of validity and reliability in qualitative research that these traditional measures of reliability are not applicable in qualitative research. But there is a demand of using the same criteria for qualitative research to evaluate on trustworthiness of the research. According to Gibbs (2002) there are interpretations that these traditional measures of reliability are not applicable at all in qualitative research because of the nature of the methods and epistemological assumptions of the research which promote the uniqueness of the research. Gibbs (2002) continues to say that between these poles are many different variations for justifying the results of the research, and however the issue of trustworthiness cannot be avoided whatever the epistemological approach of the research.

Qualitative research Johnson (1997), three types of validity can be discussed. First, descriptive validity refers to the factual accuracy of the account as reported by the qualitative researcher. Second, interpretive validity is obtained to the degree that the participants' viewpoints, thoughts, intentions, and experiences are accurately understood and reported by the qualitative researcher. Third, theoretical validity is obtained to the degree that a theory or theoretical explanation developed from a research study fits the data and is therefore, credible and defensible. Patton (2002) states that, certain subjectivity cannot be avoided in the process of qualitative content analysis; as a result reliability and validity cannot be measured. The improvement of trustworthiness and the analyst's own analytical process and procedures appear in the report. According to Graneheim & Lundman (2003) in qualitative research, dependability, credibility and transferability are commonly described through the research process.

In order to have credibility in a research, the researchers interpretations and conclusions have to be convincing, Talbot (1995). During the interview of this thesis it was important for the researcher to keep the meaning of the contents of the research all the time during the analysis process to ensure credibility in the qualitative content analysis. The contents of the interview have to be prevented from losing context therefore loops are planned during the analysis process. This helps to bring out insights into the sort of analyzing that determines credibility, Graneheim & Lundman (2003).

In terms of dependability the process and procedures used in the studies are easy to follow by a reader of the research and using authentication by an auditor to determine the process, Talbot (1995). Transferability gives not the researcher but someone else to conclude whether the findings can be put to practical use in another setting or context. Transferability is carried out by detailed database and full description, Talbot (1995). Transparent description of context and selection of characteristics of participants increases transferability in data collection and the analysis of the process. Guaranteeing the conclusions, findings and the supporting of data is conformability, Talbot (1995).

7.3 Discussion

The findings of this study will clarify the thought among society that social workers have the sole authority to make decisions and in this thesis it's on housing. This research is to find out grounds for decision making by social workers on housing for people with learning disabilities. The "what" for grounds for decision making, on the "how" the SAS (clarify, evaluate, placement) decision is made and the management decision by the social workers as well as individual decision. This gave the research a better understanding on grounds for decisions. The data is from four social workers from the same department with long working experiences with people with learning disabilities. The social workers long extensive working experience has made them experience the changes in the law and in the way society looks at people with learning disabilities then and today. The data was collected through focus group interview in which four experienced social worker from the same department of disabilities were the participants. These social workers have been working in the department for disabilities for number of years.

The finding of this study indicates that decision making has its challenges, as well as the importance of social workers evaluation (see table 5) which is the ground for decision making which will result to a decision has its significance enabling clients to get their wishes. The social workers process towards an overall placement decision starts with the contact on a need by the client and the evaluation. According to Boland (2006) during an assessment, what the social worker says, or understands and fills in the form on the client's needs and the dynamics of this assessment is of importance to the realization of the needs of the client. Social workers works within a structure of decision making, and their role is of importance before and after the official decision by SAS group (selvitä, arvio, sijoittaa) has been made. The study also indicates that the implementation of the demands from the clients are challenging, for the social worker who makes the management decision to work towards the process of housing within the structure of

decision making of the department of disabilities. The client can be discontent with the decision made on his/her placement, as the client might have hoped to be placed somewhere of his/her wanting, and this can be challenging to the social worker, and can be a decision making dilemma when social worker cannot deliver what the client had wished during the evaluation, and because it might not only be the client that the social workers works with but the pressure also comes from the clients family who have to be also considered too. Disability Service Acts aim is to increase disabled people's independence and sovereignty as well as opportunities to participate in various activities of society. According to Kuntainfo (2009) this means municipalities will have to provide personal assistance to individual needs to all eligible persons with disabilities according to the law. This is subjective and the municipalities will have to provide the service regardless the budget. According to the Ministry of Social Affairs and Health (2006), housing solutions must be made according to people with learning disabilities needs and wishes'. These services are fundamental and human rights, equality, inclusion and independent living security. The rapidly changing social care environment also requires operators more precise control and supporting tools. The management decision that social work make in providing services such as personal assistance has become easier after the reform of the disability law on providing services (see table 1). Since the law states that municipalities will have to provide services regardless the budget. This means for social workers the resource problem is now the municipality problem. The challenges that social workers face and the rapid development of the services that has to be provided by municipalities and decision makers. The importance of the social worker to be able to identify these needs during the discussion with the client will affect the process for a decision. The ability of social workers recognizing principles and obligations and competing values in a given practice situation helps to reduce the tendency of social workers to see ethical issues as simply a practice problems. The process of decision making may be influenced by number of factors such as social work values, education, ethics and experience in social work. Townsend (1979) refers to clinical condition, functional limitation, abnormality or loss and disadvantages. These learning disorder terminologies are not indicative of intelligence level, rather a disability in performing specific skills. Social worker making assessments towards decisions on housing for people with learning disabilities have to make assessments for decision making designed to improve the clients' autonomy and their responsibilities to improve their situation regardless of their disability level. The challenges for social worker is how well can the client decide their own affairs and take responsibilities. In this research grounds for decision making is based on the facts provided on a situation/need and the examination of all possible alternatives and options towards the process and implementation of the results. The making of the evaluation demands a lot from the official who is dealing with the client, it demands personal input from official's and whether it's causing an ethical dilemma. Social workers do not make the final decision but starts the

process, the grounds of which the client brings as the need which is delivered to the board that makes the official decision. The follow up after the official decision is done by the social workers on the decision made in order to make a management decision which is an implementation towards individual decision. An individual decision is a process of which the social worker informs the client of the official decision which was made based on the clients individual needs.

8 RECOMMENDATIONS' FOR FURTHER RESEARCH.

This thesis is a study on decision making process by social workers on housing for people with learning disabilities. According to the findings the whole process for decision making starts with a need by the client to the social worker, who will then evaluate the need in order to get a decision from the decision making body SAS (clarify, evaluate, placement). The recommendations for further research would be on the evaluation process, the evaluation form as a tool does it fully cater individually to the client's needs? The interaction with the client and the family as well as the social worker during the evaluation process. According to Boland (2006) during an assessment, what the social worker says, or understands and fills in the form on the client's needs and the dynamics of this assessment is of importance to the realization of the needs of the client. To research this interaction during the evaluation process and to study the efficiency of the form as a tool that can clearly bring out the needs of the clients. To study on individual feelings of the social worker on the decision making and what recommendations would the social workers have to improve the efficiency of their work is also an recommendation. Would the quality of service improve if the SAS board could make it a habit of meeting the client personally before making a decision? The client's feelings or say on the evaluation stage, the client's perception of the process. Another recommendation can be on the quality of decision making by the SAS (selvitä, arvio, sijoitta) board on process how efficient is the process and what's the time limit towards a decision. Another recommendation is to look thoroughly into the new disabilities law, how has it effected/improved the well being of clients.

LIST OF REFERENCE

- Banks S. (2001) *Ethics and Values in Social Work*. Second Edition
- Boland K. (2006) *Journal of Social Work Values & Ethics*. 2006 Vol.3
- Burns N. & Grove S. (1997) *The practice of nursing research: Conduct, critique and utilization*. Third Edition. Philadelphia. Saunders Company.
- Clark L. Chris. (2000) *Social Work Ethics Politics, Principles and Practice*.
- Denzin N.K.& Lincoln Y.S. (2005) *Handbook of qualitative research*. Third edition. Sage. London
- European Communities (1995-2008a, accessed 09/2010) *The European Union Disability Strategy* http://ec.europa.eu/employment_social/soc-prot/disable/strategy_en.htm
- Gibbs GR (2002) *Qualitative analysis with Nvivo*. Open University Press, Buckingham
- Glesne, C. & Peshkin, A. (1992). *Becoming qualitative researchers: An introduction*. New York: Longman.
- Graneheim U.H., Lundman B. (2004) *Qualitative content analysis in nursing research: concepts, procedures and measures to achieve trustworthiness*.
- Harrison J. (2001) *Regimes of Trustworthiness in qualitative research: The rigors of Reciprocity*.
- Hintsala S., Nummelin T., Matikka L.M. (2004) *Laatusuosituksista arviointiin. Hyvät käytännöt ja vammaisten asumispalvelujen laatusuositukset projektin loppuraportti*. Kehitysvammaliiton ry. Helsinki.
- Johnson R. B. (1997) *Examining the validity structure of qualitative research*. Jorgensen D.L. (1992) *Participant Observation: Methodology for Human Studies*. Newbury Park:sage
- Kavle, Steinar. (1996) *Interviews: An Introduction to Qualitative Research Interviewing*.
- Kimmel, A.J. (1998) *Ethics and Values in Applied Social Research*. Newbury Park: Sage
- Koehn D. (1994) *The Ground of Professional Ethics*, London Routledge
 Krueger A. Richard & Casey Mary Anne (2000) *Focus Groups. A Practical Guide for Applied Research*, 3rd edition.
- Krueger RA (1994) *Focus Groups, A practical Guide for Applied Research*. Thousand Oaks,
- Lehto M. (2006) *Ministry of Social Affairs and Health*. www.stm.fi/pressreleases/view (563/2006 accessed 11/2008)
- Lewis M, (2000) *Focus Group Interviews in Qualitative Research. A Review of the Literature*.
- Loughry L. Misty, Ohland W. Matthew & Moore D. DeWayne. (2007) *Development of A Theory-Based Evaluation of Team Member Effectiveness*.
- Lynn E. (1991) *Anti-Oppressive Social Work Practice Handbook*.
- Martikainen J. (2008) *Application of Decision-Analytic Modeling in Health Economic Evaluations*.

- May T. (2001) *Social Research. Issues, Methods & Process*. Third Edition.
- Mccracken G. Stanley & Marsh C. Jean. (2008) *Practitioner Expertise in Evidence Based Practice Decision-Making* National Association of Social Workers (accessed 02/08) <http://www.socialworkers.org>
- Nummelin T. (2003) *Kehitysvammopalvelujen Rakennemuutos*. Kehitysvammaliitto ry
- Oliver M. & Sapey B. (2006) *Social Work with Disabled People*. 3rd Edition
- Richards H.M. & Schwartz L.J. (2002) *Ethics of qualitative research: are there special issues for health services research?* *Family Practice*
- Talbot L.A. (1995) *Principals and practices of nursing research*. Mosby Inc., United States of America.
- Patton, M.Q. (1990) *Qualitative evaluation and research methods*. (2nd ed.). London: Sage. Payne M. (1997) *Modern Social Work Theory*. (2nd ed.)
- Pitkänen S. Rissanen P., Mattila K. (2004) *Ihmisen arvoista asumista. Y-säätiön ja Asumispalvelusäätiö Aspan tuki- ja palveluasumismallien arviointi*. Pekan Offset Oy. Helsinki.
- Powell N. G. & Greenhus H. J. (2006) *Managing Incidents of Work Family Conflict. A Decision-Making Perspective*
- Punch F. K. (2004). *Introduction to Social Research. Quantitative & Qualitative Approaches*. 2nd Edition
- Reamer F. (1990) *Ethical dilemmas in Social Service*. New York: Columbia University Press. Retardation law vajaamielislaki (1958)
- Richards H.M. & Schwartz L.J. (2002) *Ethics of qualitative research*
- Samajärvi T. (2009) *Tukiviesti*. Tukkiitto ry www.kvtl/sivu/ajankohtaista. (accessed 07/2010)
- Schiemer C. (2009) *Activating Housing Environment for People with Learning Disabilities*. Laurea University for Applied Science.
- Seedhouse D. (2005) *Values-Based Decision-Making. For The Caring Professionals*
- Shapiro L. M, Miller J. & White K. (2006) *Theory of Cultural care Diversity & Universality and Tri-Dimensional Leader Effectiveness Model*.
- Stewart D. W., & Shamdasani, P.N. (1990). *Focus groups: Theory and practice*. London: Sage.
- Sosiaalihuoltolaki 1982/710 ShL
- Thompson N. (2001) *Anti-Discriminatory Practice*, (3rd ed.). Townsend.P (1979) *Poverty in the United Kingdom*
- Valtonen A. (2007) *Kehitysvammaisten ihmisten asuminen ja asumispalvelutarpeet Helsingissä*. Asumispalvelusäätiö ASPA Helsinki.

Vammaispalvelut Helsinki (2006) http://www.hel.fi/wps/wcm/connect/vammaispalvelut_helsinki.pdf (accessed 01/2010) Viemerö J. (2009) Suomen Kuntaliito (accessed 12/2009) <http://www.stm.fi/tiedotteet/kuntainfot/kuntainfo/view/1418362>

Viitala S, Wiinikka T, Åkerblom S. (2007) Parempaan kehitysvammaisten asumiseen. Viiden asumisyksikön arviointi. Suomen ympäristö 43/2007. Edita Oy Helsinki

Wimbush E. (2007) The Evaluation Framework for Health Promotion: Theory, Quality and Effectiveness. Sage Publications London.

World Health Organisation, (1981) Disability prevention and rehabilitation. Report of the WHO Expert Committee on Disability Prevention and Rehabilitation. Vammaispalvelulaki, VPL laki (380/1978).

LIST OF CAPTIONS OF TABLES

TABLE 1: Social and Disability Laws	10
TABLE 2: Focus group interview process	20
TABLE 3: Data Analysis process according to Krueger (1994)	23
TABLE 4: Different types of housing environment	25
TABLE 5: Evaluation form (arviointi lomake) on housing environment of institutional need / Department of Disability	29
TABLE 6: Official decision & placement process	31

LIST OF CAPTIONS OF FIGURES

FIGURE 1: Decision tree	30
-------------------------	----

APPENDIX 1

INVITATION LETTER FOR AN INTERVIEW

Laurea University of Applied Sciences
Stella Neri-Porvali
Gsm: 045 677 6632
E-mail: stellaneri@yahoo.co.uk

Dear Social Worker,

I am currently enrolled in a Masters of Health Care Degree Programme at Laurea. My name is Stella Neri-Porvali. The degree entails writing thesis report based on the research carried out in the field of Health Care

The purpose of the study is to find out as to what are the grounds for decisions making and on decisions made on housing for people with learning disabilities, by interviewing social workers

I wish to ask you if you would be willing to be involved in my research by allowing me to interview you as a group, which will enable me to understand your work. Be assured that all information available during the interviews will be treated with utmost confidentiality. The identity of the informants will not be revealed, and you have the option if you wish to read the interview findings of the research and analysis process prior to the inclusion in the final report. I hope that you will give me the opportunity to interview you, in order to understand your challenging work more clearly.

Kind Regards
Stella Neri-Porvali

APPENDIX 2

KUTSU HAASTATTELUUN

Laurea University of Applied Sciences
Stella Neri-Porvali
Gsm: 045 677 6632
E-mail: stellaneri@yahoo.co.uk

Hyvä Sosiaalityöntekijä,

Teen parhaillaan loppututkielmaa, opiskelen ylempää amktutkinto (Master of Health Care) Laurea- ammattikorkeakoulussa. Tutkielman tavoitteena on selvittää millaisia päätöksiä kehitysvammaisten asuinympäristön erityistarpeista tehdään sekä tehtyihin päätöksiin liittyviä päätöksentekoperusteita.

Haluaisin tällä kirjeellä tiedustella halukkuuttanne osallistua tutkielmaa varten suoritettavaan ryhmähaastatteluun. Kaikki haastattelun aikana esille tulleisiin tietoihin tullaan suhtautumaan luottamuksellisesti eikä haastatteluun osallistuneiden henkilöllisyyttä tulla julkistamaan. Teillä on myös mahdollisuus tarkistella haastattelun tuloksia ennen kuin ne lisätään tutkielman loppuraporttiin.

Toivon, että suotte minulle mahdollisuuden haastatella teitä, jotta voisin ymmärtää paremmin työnne haasteita.

Ystävällisin terveisin,

Stella Neri-Porvali

APPENDIX 3 INFORMED CONSENT, ENGLISH

_____ agree to take part in the interview for research on decision making by social workers, on housing environment for people with learning disabilities

We grant authorization for the use of the information we give throughout this interview. Thereby we understand fully that anonymity and confidentiality will be preserved during the research .We understand that our names will never be disclosed or referenced in any way. We are aware and grant permission to use the information that will be available for the research. We understand that the tapes, transcripts and saved versions, will be handled confidentially and will be erased after the research.

We understand that our participation is entirely voluntary and that we may withdraw the permission to participate in this study without explanation at any.

Social Workers Signatures

APPENDIX 4 INFORMED CONSENT, FINNISH

Suostumme _____ osallistumaan tähän haastatteluun, jonka tutkimusaiheena on selvittää millaisia päätöksiä kehitysvammaisten asuin ympäristön erityistarpeista tehdään sekä tehtyihin päätöksiin liittyviä päätöksentekoperusteita. Olemme tietoisia, että tämä tutkimus liittyy ylimmän ammattikorkeakoulun tutkintoon. Annamme luvan käyttää tämän haastattelun aikana annettuja tietoja tutkimukseen. Olemme tietoisia siitä, että tietomme käsitellään anonymisti ja luottamuksellisesti. Hyväksymme ja annamme luvan käyttää tietoa asiakkaiden laatu palveluun kehittämiseen. Tutkimukseen kerätty tieto säilytetään huolellisesti ja hävitetään tämän tutkimuksen päätyttyä.

Olemme tietoisia, että osallistuminen tähän haastatteluun on täysin vapaaehtoista ja että voimme kieltäytyä osallistumasta tähän tutkimukseen milloin tahansa ilman selitystä. Haastattelussa kerättyä tietoa käytetään asuin ympäristön kehittämiseen.

Allekirjoitus

APPENDIX 5**LEADING INTERVIEW-THEMES, ENGLISH**

1. Discussion on decision making by social workers (what) do social workers make concerning housing environment for people with learning disabilities.
2. Discussion on the grounds for decision making (what).
3. Discussion on how are these decisions made.
4. Discussion on the challenges.
5. Discussion on the challenges the new the disabilities law the challenges they bring on decision making by social workers.
6. Do you always make decisions on your own without the help of other social workers? In which situation do you seek help from coworkers for decision making?

APPENDIX 6

RYHMÄHAASTATTELUN AIHEET, SUOMEKSI

1. Sosiaalityöntekijät ja päätöksiä koskien kehitysvammaisten asiakkaiden asumisympäristöä/asumispalvelua (mitä päätöksiä).
2. Millä perusteilla asumispalvelujen päätöksiä tehdään.
3. Miten päätökset tehdään? Haen prosessin.
4. Millaisia haasteita kohtaatte tehdessänne päätöksiä kehitysvammaisille asiakkaille.
5. Millaisia haasteita uusi vammaislaki tuo sosiaalityöntekijöiden päätöksentekoon.
6. Teetkö aina itsenäisiä päätöksiä ilman toisten sosiaalityöntekijöiden apua? Missä tilanteissa etsit apua päätöksentekoon työkavereiltasi?