Achieving Capability Development through Welfare Service Delivery: Exploring welfare service delivery experiences
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1. EXECUTIVE SUMMARY

1.1 Background to the Study

The Human Services Delivery Research Alliance between CSIRO and Centrelink aims to develop welfare decision-making tools which capture the value that is achieved through welfare service delivery and inform the future allocation of service delivery resources.

One of the aims of the Alliance’s research program is to develop a measurement and evaluation process of the outcomes of welfare service delivery that extends beyond traditional quantitative indices (e.g., transaction speed, accuracy, and customer satisfaction) to recognise the social impact of service delivery. The current study is the first step in achieving this goal. It explores how welfare service delivery affects customer’s social inclusion capability development.

1.2 Current Study

The current Labor government has initiated a program of service delivery reform, and one of the aims of this reform is to facilitate social inclusion – the process that provides people with the capability and resources required for participation in society. The qualitative research study presented in this report explored whether the outcomes described in customer and employee accounts of welfare service delivery experiences could be captured by a social inclusion capability framework (Alkire et al., 2009; Burchardt & Vizard, 2007; Ipsos MORI, 2007; Sen, 2001). This capability list was developed through a two-stage process involving a review of the international human rights framework and a process of democratic deliberation and debate (Alkire et al., 2009; Burchardt & Vizard, 2007; Ipsos MORI, 2007). Through this process ten domains (each broken down into subdomains) of valuable capabilities, or central and important freedoms that people can be and do, were identified.

From April to December 2010, two CSIRO social scientists conducted one-on-one interviews with 52 Centrelink customers and 19 Centrelink employees. Interview participants were asked to talk about experiences with Centrelink service delivery that
“stood out” for them. Their stories provided an understanding of how Centrelink’s service delivery is perceived and what effect it can have in customers’ lives. These interview participants came from six Customer Service Centres, three of which provided intensive support through Centrelink’s Place Based Services (PBS) initiatives and three of which served as comparison sites. The Place Based Services initiatives were developed in response to the government’s social inclusion agenda and provide direct holistic customer-centric assistance to specific “disadvantaged” customer groups in the local area.

The interview transcripts were analysed using NVivo, a qualitative analysis software program. Three researchers coded the service delivery behaviours and outcomes identified by interviewees, using a capability list developed by Burchardt and Vizard (2007) to identify effects on social inclusion capabilities. Many of the outcomes described by interviewees represented capability impacts, which could be either positive or negative. The capabilities most frequently affected by Centrelink’s service delivery involved:

- Standard of living – *the capability to enjoy a comfortable standard of living, with independence and security*
- Individual, family and social life – *the capability to enjoy individual, family and social life*
- Education and learning – *the capability to be knowledgeable, to understand and to reason, and to have the skills to participate in society*
- Health – *the capability to be healthy*
- Productive and valued activities – *the capability to engage in productive and valued activities*

An additional group of impacts were reported by participants that appeared to represent an additional capability, namely, “welfare security”. This capability was concerned with customers’:

(a) confidence in their welfare rights and entitlements,
(b) trust in Centrelink and other welfare service providers,
(c) willingness to engage with Centrelink the future, and
(d) ability to access care and support through the welfare system in times of need.
To examine whether more capability impacts were achieved when customers experienced more intensive support, we compared the number of capability impacts reported by participants at sites where Place Based Services initiatives were offered and at the comparison sites. There was a tendency for more capability impacts to be reported at the sites with Place Based Services initiatives, although our sample size did not allow us to test whether this difference was statistically significant. Moreover, the study findings suggested that in order to capture Centrelink’s contribution to social inclusion, it would be important to identify more immediate outcomes of service delivery (labelled “pre-capabilities”), which might eventuate into long-term capabilities. These pre-capabilities included:

- Emotional reactions
- Referrals to services and other sources of support
- Short-term financial situation
- Understanding of the welfare system
- Time spent on Centrelink business
- Amount of job search activity required
- Perceived value of Centrelink service delivery
- Identifying options that assist with the customer’s goals
- Outcomes affecting family members

1.3 Implications

This study finds that the manner in which services are delivered by Centrelink employees impacts the capabilities of welfare recipients. Furthermore, these effects were reported across a range of important capabilities, indicating that the potential impact of service delivery for welfare recipients is broad. With reliable and valid quantitative measurement of these outcomes, an index can be created to reflect the benefits of welfare service delivery for customers, as well as to provide an assessment of a customer’s level of social inclusion.
2. RESEARCH CONTEXT

The challenges associated with measuring and evaluating the outcomes of welfare and other social programs are well known. These programs typically have multiple objectives, intangible as well as tangible outcomes, long-term and even inter-generational effects and are realised through highly indirect pathways (Monro, 2003). Nevertheless, the measurement and evaluation of the outcomes of welfare service delivery is vital in order to be able to establish the benefits of the service, identify areas for improvement and inform the allocation of resources. In this study, we explored whether the outcomes described in customer and employee accounts of welfare service delivery experiences could be captured by a social inclusion capability framework (Alkire et al., 2009; Burchardt & Vizard, 2007; Ipsos MORI, 2007; Sen, 2001).

2.1 Capturing the social value of welfare service delivery

Centrelink is the government agency responsible for administering Australia’s welfare programs, worth approximately $84 billion a year (Commonwealth of Australia, 2009). Delivering these payments and services costs over $2.3 billion dollars (Commonwealth of Australia, 2009). The foci of Centrelink’s performance indicators for service delivery are transaction speed, accuracy, and customer satisfaction. However, the current Labor government has initiated a program of service delivery reform across the public sector. One of the goals of the reform is to address social exclusion, or in other words, facilitate social inclusion. Social exclusion has been described as “a process that deprives individuals and families, groups and neighbourhoods of the resources required for participation in the social, economic and political activity of society as a whole” (Pierson, 2002, p. 7). Thus, there is a need for Centrelink to develop a broader range of performance indicators that can be used to focus and evaluate its service delivery efforts, including the impact of its service delivery on social inclusion.

Researchers have argued that the service delivery encounter between welfare customers and employees is key in determining the extent to which policy objectives are met. In his study of “street-level bureaucrats” Lipsky (1980) highlighted the important role played by public service workers, arguing that their actions actually constitute the services delivered by government. Lipsky found that these workers often have considerable discretion in interpreting centrally-decided allocation principles and
thus, through their choices could either enable or hinder customers’ access to services and resources. Meyers, Glaser and MacDonald (1998) subsequently argued that welfare officers play a key role in determining whether welfare policy objectives are achieved because they control critical information and, through their interpretation of this information for customers, they influence customers understanding of their rights and obligations. Consistent with this line of argument, Hasenfeld, Raferty and Zald (1987) conceptualised human service delivery encounters as being the venue in which customers attempt to claim their social rights, while the response of the public service workers in these encounters determine the form and substance of customers’ rights.

2.2 Social inclusion and the capability approach

The Australian Government’s social inclusion agenda “aims to make sure every Australian has the capability, opportunity and resources to participate in the economy and their community while taking responsibility for shaping their own lives” (Australian Government, 2009a, p. iii). The references to “opportunities” and “capability” in the above statement draw on Amartya Sen’s (2001) capability approach. Sen argued that societal arrangements and institutions should be evaluated in terms of their contribution to enhancing and guaranteeing the substantive freedoms or capabilities of individuals. Although Sen viewed individuals as active agents of change rather than passive recipients of dispensed benefits, he argued that individual freedom is inescapably qualified and constrained by the social, political and economic opportunities that are available to citizens. Thus, societal arrangements and institutions should be evaluated in terms of their contribution to enhancing and guaranteeing the substantive freedoms of individuals.

In this study, we used the capabilities approach to understand whether the outcomes of Centrelink service delivery can be captured with a social inclusion capability framework. We adopt the philosophy of prior research that conceptualises social inclusion as a process, rather than a state (e.g., Levitas, 2006; Pierson, 2002) and as multi-dimensional in nature (de Haan, 2001). An important benefit of adopting a process perspective on social exclusion is that by identifying the mechanisms through which inequalities are created, we have the potential to break cycles of exclusion (Mathieson & Popay, 2008). Furthermore, the multi-dimensional aspect of social inclusion means that we can identify capability effects in different spheres (e.g.,
economic, social, cultural) of a customer’s life. Thus, in this study we examine the proposition that welfare service delivery experiences (i.e., direct, personal contact with an employee of Centrelink) can shape the opportunities and capabilities that are available to Centrelink customers.

While Sen’s (2001) capability framework provides an approach for evaluating the value of welfare service delivery, Sen did not actually specify what capabilities societies should provide their citizens. Two capabilities lists have been developed which aim to identify the central and important capabilities that all individuals should be able to enjoy (Burchardt & Vizard, 2007; Nussbaum, 2000). We used the capabilities list that was developed for the UK Equalities Review (Alkire et al., 2009; Burchardt & Vizard, 2007) as it was developed through a systematic, two-stage process, reflecting both the international human rights framework and public input. First, the international human rights framework was reviewed to provide an initial list of capabilities. This list was then supplemented and refined through a process of democratic deliberation and debate which involved interviews and focus groups with members of the general public and groups at risk of social exclusion (Alkire et al., 2009; Burchardt & Vizard, 2007; Ipsos MORI, 2007). Through this process ten domains (with each domain being composed of several sub-domains – see Appendix A) of valuable capabilities were identified, namely:

1. Life - The capability to be alive.
2. Health - The capability to be healthy.
3. Physical security - The capability to live in physical security.
4. Legal security - The capability of knowing you will be protected and treated fairly by the law.
5. Education and learning - The capability to be knowledgeable, to understand and reason, and to have the skills to participate in society.
6. Standard of living - the capability to enjoy a comfortable standard of living, with independence and security.
7. Productive and valued activities - The capability to engage in productive and valued activities.
8. Individual, family and social life - The capability to enjoy individual, family and social life.
10. Participation, influence and voice - The capability to participate in decision-making, have a voice and influence.

2.3 Capability development and welfare service delivery

The capabilities approach and the framework is gaining increased recognition. It has been adopted by the United Nations Development Programme as the basis for its human development index (Burchardt, 2004) and also forms the basis of the Equalities Review measurement tool in the United Kingdom (Alkire et al., 2009). Despite the widespread application of the capability approach, there have been few empirical studies evaluating the extent to which these capabilities are fostered by societal institutions (Austin, Johnson, Chow, Marco, & Ketch, 2009; Borghi & Berkel, 2007). There is a need for empirical research which demonstrates the generalisability and utility of the framework, especially in a Western context (Anand, Hunter, & Smith, 2005; Burchardt, 2004). Although proponents of the capability approach argue that welfare service delivery agencies such as Centrelink should have an impact on customers’ capabilities, there has been little research focusing on service provision in the welfare sector. Thus, an important contribution of this study lies in testing the utility of the framework in terms of whether it can be used to capture the outcomes that are experienced by customers from welfare service delivery in an Australian context.

Some initial evidence that Centrelink service delivery can have an impact on customers’ capabilities derives from an independent evaluation carried out on Centrelink’s PBS program (Social Justice and Social Change Research Centre, 2009). This program was developed in response to the government’s social inclusion agenda and consists of seven local initiatives which target specific “disadvantaged” customer groups. Although each initiative was designed to respond to the specific needs of the target customer groups, the program combined two approaches to improving social inclusion outcomes: (a) direct holistic customer-centric assistance and (b) community capacity building to address structural and cultural barriers to inclusion (Social Justice and Social Change Research Centre, 2009). The evaluation identified six types of social inclusion outcomes that were achieved for participants: (a) physical/environmental (b) emotional/psychological (c) social (d) skills/educational (e) financial and (f) employment (Social Justice and Social Change Research Centre, 2009). Although these outcomes do not completely match those captured by the
capability framework, they are similar enough to provide grounds for arguing that Centrelink service delivery (through the PBS initiatives) can have an impact on customers’ capabilities. However, this program, involving intensive support for customers, may not be representative of the effects that are achieved through more mainstream Centrelink service delivery.

The growing body of literature informed by the capability framework provides additional support for the proposition that the way in which welfare services are delivered has the potential to impact capabilities. For example, a study carried out in Sweden examining a labor market re-activation project found that the initiative promoted capability development by providing welfare recipients with choice and individualised pathways (Gascoigne & Whiteside, 2009). Another study revealed that the eligibility criteria associated with a welfare initiative affected the extent to which the program was successful in empowering and fostering voice for all potential participants (Galster, Rosenstein, & Bonvin, 2009). Other studies have found that capability effects were constrained when initiative requirements and strategies were largely decided by central government or beneficiaries of the program were not given input into decision-making (Green & Orton, 2009; Monteleone & Mozzana, 2009). Although these studies highlight the challenges associated with capability development, they also illustrate that characteristics of welfare service delivery, such as the extent to which customers are allowed choice and input to decision-making, can affect the opportunity for capability development.

Research exploring the effects of service delivery in other public sector institutions provides further evidence that service delivery can have an impact on customers’ capabilities. International research exploring the effects of public sector service delivery (Citizens First 3, 2003; Heintzman & Marson, 2005; Kampen, Walle, & Bouckaert, 2003) suggests that the quality of service delivery in government agencies can foster participation and voice by building individuals’ confidence and trust in government institutions. Thus, Centrelink service delivery may achieve these positive outcomes through establishing a client-centred, open-dialogue relationship with the customer. Participation, influence and voice is one of the capabilities identified in Burchardt and Vizard’s (2007) list.
However, there are also reasons why we might not see an effect of welfare service delivery on customer capabilities. First, although capabilities such as employment and life expectancy represent goals for the entire welfare system, in Australia (as in other countries, see Riccucci, Meyers, Lurie, & Han, 2004) responsibility for finding a home or getting an individual into a job rests with other welfare service providers, not Centrelink. Centrelink’s prescribed role in the welfare sector may restrict the extent to which employees are able to directly influence the full range of customer capabilities. Second, there are multiple values and objectives associated with welfare service delivery, some of which may not be captured by the capability framework. A more traditional priority for welfare service delivery is timely and accurate benefit determination (Riccucci et al., 2004). A study by Meyers, Glaser and MacDonald (1998) suggests that this type of concrete and measurable objective may be more influential in shaping the service delivery encounter than the policy objective of social inclusion. Thus, it was important to adopt an open approach for this research, not constraining or directing the way in which study participants described the effects or value that they experienced from welfare service delivery.

3. METHODOLOGY

The current study was conducted within a larger research program that had a secondary aim of exploring whether the PBS initiatives, which provided more intensive support for customers, had an effect on the outcomes of welfare service delivery. Therefore, participants were recruited from six Centrelink customer service centres, three of which had PBS initiatives and three of which represented comparison sites. The six customer service centres were located in Queensland, New South Wales and Victoria. All of the customer participants met the criteria for recruitment into the PBS initiative, representing different “target” groups. In Queensland, the target group were customers who were either leaving foster care, victims of domestic violence or diagnosed with mental illness and known to be disconnected from other sources of support. In New South Wales, the target group were young refugees who were considered “at risk” either due to homelessness, or lack of social support, or physical or mental illness. In Victoria, the target group were customers who had been unemployed for more than two years (Social Justice and Social Change Research Centre, 2009).
A letter, distributed by Centrelink, was sent to customers inviting them to take part in the study. A total of 957 letters were distributed to customers, and 111 customers agreed to take part in an interview, representing a 12% response rate. However, only 52 customer interviews were carried out (representing 31 males and 21 females) due to response load and customer cancellations (Table 1).

The Centrelink employee participants for the study were identified using a stratified random sampling procedure. Employees were grouped according to the customer service centre that they worked at and their work role (e.g., social worker, senior customer service advisor, customer service advisor, job capacity assessor, project manager). Of the 47 employees at the centres, 23 employees were invited to take part in an interview, and of these 17 (12 females and 5 males) chose to participate, representing a 74% response rate (Table 2).

Table 1 Customer response rates

<table>
<thead>
<tr>
<th>Site</th>
<th>Invited to participate</th>
<th>N Responses (% of those invited)</th>
<th>N Interviews (% of those invited)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Logan</td>
<td>149</td>
<td>13 (9%)</td>
<td>10 (7%)</td>
</tr>
<tr>
<td>Fairfield</td>
<td>52</td>
<td>8 (15%)</td>
<td>6 (12%)</td>
</tr>
<tr>
<td>Liverpool</td>
<td>35</td>
<td>3 (9%)</td>
<td>1 (3%)</td>
</tr>
<tr>
<td>Shepparton</td>
<td>330</td>
<td>26 (8%)</td>
<td>10 (3%)</td>
</tr>
<tr>
<td>Morwell</td>
<td>106</td>
<td>21 (20%)</td>
<td>12 (11%)</td>
</tr>
<tr>
<td>Beenleigh</td>
<td>285</td>
<td>40 (14%)</td>
<td>13 (5%)</td>
</tr>
<tr>
<td>Total</td>
<td>957</td>
<td>111 (12%)</td>
<td>52 (5%)</td>
</tr>
</tbody>
</table>

Table 2 Staff response rates

<table>
<thead>
<tr>
<th>Site</th>
<th>Invited to participate</th>
<th>Interviews done (response rate)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Logan</td>
<td>2</td>
<td>2 (100%)</td>
</tr>
<tr>
<td>Fairfield</td>
<td>2</td>
<td>2 (100%)</td>
</tr>
<tr>
<td>Liverpool</td>
<td>5</td>
<td>5 (100%)</td>
</tr>
<tr>
<td>Shepparton</td>
<td>8</td>
<td>4 (50%)</td>
</tr>
<tr>
<td>Morwell</td>
<td>3</td>
<td>2 (67%)</td>
</tr>
<tr>
<td>Beenleigh</td>
<td>3</td>
<td>2 (67%)</td>
</tr>
<tr>
<td>Total</td>
<td>23</td>
<td>17 (74%)</td>
</tr>
</tbody>
</table>

One-on-one interviews were conducted with each of the study participants. Customer interviews were carried out face-to-face, at a neutral location, whereas staff interviews were carried out over the telephone. Our framing question for employees was: “Can
you think of an experience with a Centrelink customer that stands out for you? Would you tell me about it?”. Similarly, in the customer interviews we asked: “Does any particular experience with Centrelink stand out in your mind as important? Would you tell me about it?”. Interviews were tape-recorded and transcribed verbatim for more detailed analysis. On average, each interview lasted approximately 45 minutes.

The coding was carried out in NVivo (QSR International Pty Ltd, Australia) by the two researchers who conducted the interviews and another independent researcher. While coding, the researchers used memos and annotations to record their ideas and reactions and to draw out emergent themes and relationships. The coders also met regularly to ensure consistency in the coding of capabilities, and to discuss other emerging themes and concepts. An initial list of codes was derived from Burchardt and Vizard’s (2007) capability list and included both the capabilities and the subdomains identified within each capability. Three criteria had to be met for an outcome to be coded as a capability impact:

1. There needed to be a clear connection between an action involving a Centrelink customer and a Centrelink employee and the outcome achieved.
2. The outcome described had to fit one or more of the subdomains identified for that capability.
3. There had to be evidence that the outcome was sustained over the long-term, without requiring ongoing service delivery support from Centrelink.

Direct quotes from the interviews are provided in Section 4 to illustrate the types of outcomes that participants associated with Centrelink service delivery. Identifying information has been removed from the quotes and participants are identified by a randomly generated number which is linked to the raw data set in a separate, confidential document.

4. RESULTS

4.1 Capability impacts

Both employees and customers described effects of Centrelink service delivery that represented capability impacts. Table 3 identifies the number of participants who described effects for each of the capabilities. As customers and employees often
### Table 3 Number of capability impacts reported by customers and employees

<table>
<thead>
<tr>
<th>Capability</th>
<th>Customers (N=52)</th>
<th>Employees (N=17)</th>
<th>How the outcome was achieved</th>
</tr>
</thead>
</table>
| Standard of living          | 16               | 4                | • Willingness of staff to understand customers’ individual circumstances and identify alternative means through which support could be provided to customers  
                          |                  |                  | • Ensuring customers are informed about eligibility requirements or extra benefits that they may be entitled to.  
                          |                  |                  | • Identifying services or resources external to Centrelink through which food, housing and healthcare needs can be met more cheaply |
| Individual, family and social life | 13               | 6                | • Taking the time to ask about the customer’s life and listen  
                          |                  |                  | • Identifying goals, options and pathways  
                          |                  |                  | • Exempting customers from job search activity  
                          |                  |                  | • Organising a carer’s payment  
                          |                  |                  | • Assisting the customer to separate from a violent or abusive partner  
                          |                  |                  | • Supporting broad-reaching positive change in the customer’s life |
| Education and learning      | 12               | 5                | • Identifying customers’ goals  
                          |                  |                  | • Identifying courses that further customers’ goals  
                          |                  |                  | • Identifying sources of financial, language and social support to ameliorate barriers to education and learning  
                          |                  |                  | • Mentoring customers in dealings with service providers |
| Health                      | 9                | 3                | • Establishing a connection with the customer through which previously unrecognised health needs can be identified  
                          |                  |                  | • Identifying resources through which healthcare can be accessed at lower cost to the customer |
### RESULTS

<table>
<thead>
<tr>
<th>Category</th>
<th>Count</th>
<th>Notes</th>
</tr>
</thead>
</table>
| **Productive and valued activities** | 8     | 4\(^2\)  
- Recognising when customers should be exempted from participation requirements  
- Identifying organizations that offer opportunities to do paid or volunteer work  
- Recognising those customers who are providing full-time care to dependent family members and ensuring they are receiving the payments and support that they are entitled to  
- Providing intensive support to facilitate positive change in customers’ lives |
| **Legal security**               | 5     | 3  
- Respecting customers’ privacy  
- Providing information about customers’ rights  
- Advocating on the customer’s behalf |
| **Identity, expression and self-respect** | 4     | 2  
- Connecting with the customer as a human being rather than a number  
- Identifying the customer’s strengths  
- Giving the customer choices |
| **Physical security**            | 4     | 2  
- Determining eligibility for crisis payment  
- Identifying sources of support for victims of domestic violence  
- Exempting customers from maintenance action |
| **Life**                         | 1     | 2  
- Identifying customer in crisis  
- Listening  
- Talking through issues and identifying possible solutions |
| **Participation, influence and voice** | 0     | 0  
- Not reported |
| **Total**                        | 72    | 31 |

**Notes**

1. The number of participants who described each impact. For each welfare service delivery encounter described, multiple impacts could be recorded but each type of impact was counted only once.
2. Two staff participants described these impacts, but they appeared to be talking about one customer’s experience at Centrelink.
identified multiple effects associated with a welfare service delivery experience, and many participants chose to report on more than one welfare service delivery experience, the total number of capability impacts reported is greater than the number of participants in the study (Table 3).

To illustrate the capability impacts, selected verbatim quotes of participants are provided. Please note that these comments are subject to the customers’ or employees’ interpretation of the interaction.

### 4.1.1 Standard of living

Twenty participants (16 customers, 4 employees) described service delivery experiences in which customers’ standard of living capability was affected. The most common way in which Centrelink service delivery affected customers’ standard of living was by providing (or withdrawing) welfare payments, or by determining eligibility for a higher level of payment. These decisions were only classified as a standard of living impact if the customer had been denied these payments for a long period of time (3 months or more) and it was evident that this had had an impact on his or her ability to access an adequate standard of living including, for example, food and housing.

In the stories that participants told, accessing payments was described as an outcome of service delivery rather than simply being determined by policy or eligibility requirements. The types of service delivery behaviours that were associated with standard of living impacts were understanding and responding to customers’ individual circumstances, ensuring that customers understood the eligibility requirements affecting their payments, and identifying additional benefits and services (sometimes external to Centrelink) that customers were entitled to. Although in the majority of cases, Centrelink customers receive the payments they are eligible for, there were instances described by participants where communication failures were associated with a negative impact on customers’ standard of living. The following story relayed by a customer illustrates the potential negative consequences of a communication failure:

“...because I got paid out from my workplace, from my holiday pay I didn’t get paid for like two months. And it took me ringing up and finding out why I wasn’t getting paid to understand... we had to get assistance from the church for food because we needed to pay rent. It was only my wife’s payments coming in. It wasn’t explained to us - that we - if I'd known, I would have hung on to that $3000.
Instead, we used that to do car payments so that we were ahead, and paid some other bills...we basically through that time also had to max out the credit card paying for my wife’s medication so we were totally stuffed... so we had to declare bankruptcy... Because it all snowballs. You know the credit card’s maxed out and then you’ve got a $20,000 credit card - there’s no way in hell you can pay that down on Centrelink.” [Customer ID27]

4.1.2 Individual, family and social life

Nineteen participants (13 customers, and 6 employees) reported that Centrelink service delivery had affected customers’ capability to enjoy individual, family and social life. In the main, this effect occurred through either enabling or hindering customer’s ability to spend time with, and care for others, including wider family. For example, several participants reported that Centrelink had assisted customers by exempting them from job search activity and sometimes providing them with a carer’s payment. This action allowed the customer to concentrate on providing special care that was needed for family members without worrying about meeting job search requirements. Although there are criteria associated with these decisions, the interaction between Centrelink staff and customers seemed to be critical in terms of whether the customer’s eligibility was identified. For example, one customer had been on unemployment benefits for many years and it was only when he joined the PBS program and began dealing with a staff member who explored what had been happening in his life that it emerged that he was spending most of his week looking after his disabled mother. Until then, the customer had never realised that he qualified for a carer’s allowance and a carer’s pension.

Another way in which Centrelink enabled customers to spend time with and care for their family members was by assisting them to separate from a partner who was violent or abusive. For victims of domestic violence with children, the assistance that Centrelink provided in establishing independent, safe living conditions meant that they felt they were doing a better job of caring for their children.

The support that Centrelink provided to customers who were in an abusive or violent relationship also sometimes had an impact on customers’ ability to enjoy independence and equality in primary relationships, including marriage. For one customer, the fact that Centrelink gave her her own healthcare card, without her
husband’s name on it, and officially made her separated from him while under the same roof, changed this dynamic in their relationship.

We also heard about instances in which Centrelink staff had linked them to external sources of support that gave them access to emotional support and friendships, ranging from a support group to a local book club. Finally, customers reported that when staff spent time with them, helping them formulate goals and identify options, they developed a sense of hope for the future where previously they had lacked options and direction. One staff participant reported:

“...when he came, he was out of home, had no family connections, there was domestic violence issues and they didn’t know what to do.... the end result was that he was able to work out his goals, where he wanted to go. He re-enrolled back in a school and he had a direction where he wanted to head to in uni...” [Employee ID68]

4.1.3 Education and Learning

Seventeen participants (12 customers, 5 employees) identified instances in which Centrelink service delivery had affected customers’ education and learning capabilities. In most of these instances, Centrelink’s impact was seen to be positive. This impact was achieved when Centrelink employees took the time to understand customers’ skills and goals and used that information to identify courses, learning activities or training opportunities that met their individual needs. This capability was also affected when employees identified resources that assisted customers to overcome financial, social or language barriers to learning and education. One of the employee participants explained:

“So I worked with them through TAFE, got them mentored and helped them through that. They were able to get into uni through a scholarship program… because the uni has programs pertaining to young refugees. So we went to the uni, assist them with applications, we talk to the university and say, “This case, I’m sure they will pass all their marks but they might have problem with the English language. I’m sure they won’t have problems if you link them with someone who can assist them with that language that they need while they’re in the Uni course.” They are both doing very well.” [Employee ID57]
These service delivery behaviours not only assisted customers to access education and training, but also helped them develop broader skills for participation in productive and valued activities. For example:

“He [the Centrelink employee] asked me, like he asked me how, what do you study and your family. And I say everything’s okay, yeah. And I say I want…to find some, voluntary work… And I think he went with me and he find that voluntary work, and he contact, he do everything for me…And to do voluntary work, I think it good, give me confidence, and also I know how to communicate to other people, yeah. And I know many things about how to apply the job, and how to looking for the job, yeah...’cause you know, we just arrived in Australia and we don’t have any qualifications, and we don’t know how to communicate with people…” [Customer ID38]

4.1.4 Health

Twelve participants (9 customers, 3 employees) described instances in which Centrelink service delivery affected customers’ health capability. In the main, the effect on customers’ health capability was achieved by identifying resources (either payments from Centrelink or external resources) that the customer could access to overcome financial barriers to treatment, as described below:

“…I was in a counselling session [at Centrelink], and he picked up and suggested that I could get dental work done…at the moment I’ve got five grand’s worth of dental work thanks to this young dude in Centrelink…Yeah. So, I’m getting – getting false teeth, like, ‘cause my teeth have been shocking my whole life and that…And he said – he said, no you can get $5,000 rebate from Medicare.” [Customer ID5]

The process of establishing a client-centred, open-dialogue relationship with the customer appeared to be a key pathway through which Centrelink assisted customers to improve their health. The development of this relationship between Centrelink employee and customer allowed previously unrecognised health needs to come to light. Finally, Centrelink was seen as having a direct effect on customers’ health when customers were experiencing an illness that prevented them from meeting their job search requirements. When Centrelink withdrew payments from these customers, the added financial stress sometimes led to a worsening of their health condition.
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However, when Centrelink responded by exempting these customers from job search requirements, their physical and mental health was seen to improve.

4.1.5 Productive and valued activities

Twelve participants (8 customers, 4 employees) described instances in which Centrelink had either helped them or prevented them from engaging in productive and valued activities. In the majority of these cases this impact was positive. Most of the examples that were given involved the customer taking up either paid work or volunteer work. This process usually began with the customer identifying that he or she was seeking paid or unpaid work and the Centrelink employee identifying an organization where suitable work was available. However, for a few customers this outcome was achieved when Centrelink’s service delivery supported the customer in making more positive lifestyle changes (e.g., cessation of drinking, resolving family disputes) which enabled customers to subsequently gain paid employment.

While nearly all of these capability impacts were positive, sometimes the story was more complex. For example, a few customers involved in volunteer work had originally been seeking paid employment. One described this process as follows:

“[The Centrelink employee] tried a few different things…like this insulation program…in the end I said well at my age I’m not going to go crawling up ceilings and – in summer time and whatever. And actually there was a course going that was supposed to go visit houses and you become like the inspector…and write reports…but that fell through anyway…I ended up doing voluntary work for a school; which he saw as a great thing and when I left the program, when it finished up, he sort of said out of all things stick to that job. It’s been great…what I’ve just handed into Centrelink is a form that I’ve become a full-time volunteer and come off the books of like with Job Network “ [Customer ID3]

In this type of situation it is difficult to determine whether the volunteer work was valued in its own right, or whether it was valued only as a stepping stone to paid employment, or because (in the case of this customer) it exempted him from job search activities.
Centrelink’s service delivery also affected customers’ sense that their caring roles were recognised and valued. One of the study participants was a single parent with two children, one of whom had been diagnosed with Asperger’s syndrome. This child was repeatedly involved in violence in the schoolyard requiring frequent visits to the doctor and hospital. He was also sometimes violent towards his mother and sibling, meaning that she couldn’t leave her children on their own. She believed that she could not meet her caring responsibilities and hold down a job. The fact that Centrelink still required her to seek work left her feeling that her caring responsibilities were not being recognised and valued:

“Well, I'm just really disappointed that they... knowing my circumstances, I would think that they would back off and leave me alone. And not try to make me go to all these – like the job centres and looking for work and – I don't have time for it. It's just more stress on me with the situation that I have...these people from government that have never been in this position don't know, and they don’t understand. And we are punished for being parents. And that's wrong. I just think that that's so wrong.” [Customer ID2]

4.1.6 Legal security

We identified eight examples (5 customers, 3 employees) of service delivery experiences in which the customer’s legal security capability appeared to have been affected, half of which represented a positive impact and half of which represented a negative impact. Three customers gave examples of experiences in which their privacy had not been respected in their dealings with Centrelink, such as when they were required to provide information about their sexual activity and religious orientation or allow Centrelink to contact their medical practitioner to determine their eligibility for a payment. In other instances, Centrelink employees supported customers’ legal security by serving as an advocate for customers in dealings with other government agencies or by clarifying customers’ legal rights and entitlements for them. In one case, Centrelink had been instrumental in assisting a customer with her ability to own personal property in her own right. She said:

“But before I separated, I was separated under the one roof [by Centrelink], so I had been put on allowances already. And that little bit of financial help built my confidence... because I was totally dependent on my husband. I didn't have my own account and he had taken all my money away, out of the account. Any cent I need to ask my husband for…” [Customer ID46]
4.1.7 **Identity, expression and self-respect**

Six participants (4 customers, 2 employees) referred to the impact of service delivery on identity, expression and self-respect. Centrelink’s impact on the capability “Identity, expression and self-respect” was achieved primarily by affecting customers’ self-respect. Simply spending time in the Centrelink queue was sometimes seen to have an effect on customers’ self-esteem, as one participant explained:

“… it’s an open plan office, and the way it is, you see people, staff there walking around, making coffees, getting up, on the phone, and there might only be one of them at a desk serving people. That’s why it’s frustrating, ‘cause there might be 40/50 people waiting…Makes you feel a bit small actually, do you know what I mean? I - I don’t think the staff do it deliberately… the government’s providing a service for you, you should be grateful, but there’s something demeaning about it….” [Customer ID9]

However, customers reported that their sense of worth, confidence and self-esteem were strengthened when Centrelink took the time to understand their values and concerns and gave them given choices and input into decision making. In particular, the “strengths based approach” that was utilized within some of the PBS initiatives seemed to have a powerful effect on participants’ self-esteem.

4.1.8 **Physical security**

Six participants (4 customers, 2 employees) described instances in which Centrelink service delivery had contributed to a customer’s physical security capability. In five of these cases, the customer was a female who had been experiencing domestic violence. Centrelink employees were able to support the customer to move to a safer situation by determining that the customer was eligible for crisis payment that would allow the woman to relocate. Employees also supported customers by talking through their options, identifying external services that were available to them and sometimes exempting the customer from taking maintenance action for child support. One customer described the way in which Centrelink helped her achieve greater physical security as follows:

“…They guided me where to go, they supported me in finding [my own home]. Otherwise… I would have kept on putting up with the abuse and probably
committed suicide or something. But to be able to move out, take care of myself and my kids and most of all, give them a peaceful environment, that meant so much...And now being with the Housing Commission, thanks to the supportive letter from DVConnect and from Centrelink, both, getting that house and getting that security and safety and peacefulness, that means so much to me and my kids.” [Customer ID46]

Another service delivery experience involved a male customer who had applied to Centrelink for a crisis payment that would allow him to leave town and escape from a threat of violence from ‘local authorities’.

4.1.9 Life

Three participants (1 customer, 2 employees) described instances in which Centrelink service delivery had affected a customers’ life capability. In two of these examples the customer was in a state of crisis when he/she arrived at Centrelink. Centrelink staff responded by giving the customers as much time as needed to talk through issues and identify sources of support or solutions to their problems. Both customers reported that without this response from Centrelink, they would have committed suicide that day:

“If it wasn’t for the [Place Based Services initiative], I’m sorry but I probably would’ve committed suicide that day... I probably would’ve walked out of that office if I hadn’t have seen somebody, I probably would’ve walked straight out of the office and straight out into the middle of the road and the first car I would’ve come across. Or straight down the train station and jumped... I think I was there that day for 4 hours, 4 hours, horrid...These guys [the Place Based Services initiative employees], it all comes from their heart and you can see it comes from their heart. You sit there, you talk to them and [the Place Based Services employee’s] brain would be running a million miles an hour to help you before you even get your question out basically.” [Customer ID45]

The third instance in which a customer's life capability was affected involved a customer who had been drinking heavily for more than 20 years. Centrelink staff established a connection with this customer and then connected him to services through which he achieved a more healthy lifestyle (including giving up alcohol), thereby potentially increasing his life expectancy.

Achieving Capability Development through Welfare Service Delivery: Exploring welfare service delivery experiences
4.1.10 Participation, influence and voice

None of the outcomes described by the study participants were classified within the capability for participation, voice and influence as defined by Burchardt and Vizard (2007). Currently the subdomains of this capability are concerned with an individual’s ability to participate in activities such as formulation of government policy, elections, and forming and joining civil organisations and solidarity groups. These types of outcomes were not described by our study participants. Nevertheless, if a broader conceptualisation of participation, influence and voice were adopted, some of the outcomes described in the next section, such as trust in Centrelink and willingness to engage with Centrelink in the future, might be classified within this capability.

4.2 Welfare security – An additional capability

As well as the above capability impacts, participants described a range of outcomes which could be conceptualized as an additional capability. Specifically, twenty-nine participants (23 customers, 6 employees) described service delivery experiences that affected (a) their confidence in their welfare rights and entitlements, (b) their trust in Centrelink and other welfare service providers, (c) their willingness to engage with Centrelink the future, and (d) the ability to access care and support through the welfare system in times of need. Arguably, these welfare security outcomes could be categorised as either a ‘standard of living’ or ‘participation, influence and voice’ capability impact. However, we have identified these outcomes as a separate capability because they could not be coded within the existing subdomains for ‘standard of living’ and ‘participation, influence and voice’ delineated by Burchardt and Vizard (2007) and Alkire et al. (2009).

Confidence in their welfare rights and entitlements refers to the customer’s understanding or perceptions of their rights and entitlements to welfare benefits. Employee communications also affected customers’ perceptions of their rights and entitlements to welfare benefits. One customer said that Centrelink staff had told him that he had to leave town if he did not get a job within two weeks (possibly because the town had low employment opportunities). He had checked this advice and apparently had it confirmed. He believed the only reason he had been allowed to stay longer in his current location was because his son was living there, so Centrelink was making an
exception for him. Another customer who was a long-term recipient of unemployment benefits reported that he had been told:

“The money’s not for you to live.” I’ve been told that about fifty billion times by Centrelink...The dole money is for you to go and look for work so you’ve got no excuse, if you’ve got to go to Dandenong every day, you can afford to get a train. You don’t have to worry about rent, eating or nothing... “The money we give you is not for you to survive. We don’t care about you. The money is for you to go and look for work.” [Customer ID11]

Service delivery also impacted on trust in Centrelink and other welfare service providers. The effects on trust were sometimes quite specific. In one case the participant reported that the customer now trusted the PBS staff members, but still didn’t trust other Centrelink staff. In two instances, the experience was described as affecting the customer’s trust in Centrelink as a whole. For three other participants, the effects were broader, affecting their trust in the welfare system as a whole.

“...it was like, you lost any sort of faith in the system because when you asked the question, you didn’t get the same answer. Or you would act on the answer that you got from somebody who supposedly would know and you went to do that thing and then when you went back after doing what was told to you to do, somebody else would say, “No.”” [Customer ID43]

Experiences with Centrelink also left customers either more, or less, willing to engage with Centrelink staff or systems in the future. Some customers who had had negative experiences when they had approached Centrelink for support, now avoided going to Centrelink whenever possible, to the point where some customers were willing to go without some of the payments they were entitled to in order to reduce their contact with Centrelink:

“I had a smart one up there...threaten me and like to chop me payments off...You know, like when I come to her at the line, I just wait and let other people go until I get someone else...Yeah I’ve stopped heaps of appointments walking up to go in there...“ [Customer ID48]

Customers’ belief that they could access care and support from Centrelink was influenced by the focus of their interactions with Centrelink. Customers with positive experiences reported that staff wanted to know what was happening in their lives. However, customers with negative experiences reported that their interactions with
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Centrelink were only ever concerned with ensuring that they were meeting their obligations to Centrelink. For customers who were struggling with significant challenges, this focus left them feeling that Centrelink did not care about them as individuals. For two customers, their experiences with Centrelink reviews were particularly important as they had hoped these reviews would provide an opportunity to discuss their current circumstances and have these taken into account in their dealings with Centrelink. However, one attended his review but was disappointed to discover it was just about confirming his identity and bank account details. The other customer reported:

“I never got that interview. I was waiting for this letter or phone call to say that this interview was coming. I eventually rang them and they said, “Oh, no, that was done automatically from your file.” And I said, “I have lost my home and everything I own, in this time, and you’re going off a piece of paper…you didn’t contact me, my doctors, the psychologist or anybody…and you’ve made a decision that I can go out and do, 20, 25 hours work and I’m no longer on sickness benefits? From reading a piece of paper. And you have delayed me money, I’ve now been without money for so many weeks, what happened to the ‘interview’ and the keeping in, your concerns at heart and making sure that you’re safe, gone?” [Customer ID43]

4.3 Effects of intensive service delivery

We obtained further evidence for the effect of service delivery on capabilities when we examined whether capability impacts were more frequent for those customer service centres where customers were offered more intensive support through the PBS initiative. Figure 1 compares the number of capability impacts for centres with and without PBS initiatives. This figure reveals that participants from the PBS centres tended to report more capability impacts. Although the size of our sample does not allow us to make strong inferences, the results also suggest that intensive service delivery may be important for certain types of capability impacts. That is, participants in PBS centres reported more capability impacts for “Productive and valued activities”, “Individual, family and social life”, “Identity, expression and self-respect”, “Health” and “Education and learning”.

Achieving Capability Development through Welfare Service Delivery: Exploring welfare service delivery experiences

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4.4 Other outcomes (pre-capabilities) of welfare service delivery

We have described above some of the capability impacts reported by participants in their experiences with Centrelink service delivery. However, participants also described other types of outcomes associated with Centrelink service delivery which did not constitute capability development because their long-term impact was unknown. The most commonly reported outcomes involved:

- Emotional reactions (e.g., stress, frustration, gratitude and calm)
- Referrals to services and other sources of support
- Short-term financial situation
- Understanding of the welfare system (e.g., entitlements and obligations)
- Time spent on Centrelink business
- Amount of job search activity required
- Perceived value of Centrelink service delivery
- Identifying options that assist with the customer’s goals
- Outcomes affecting family members
These outcomes were sometimes described as part of the process through which capability impacts were achieved. These relationships suggest that some of these other outcomes might be conceptualised as “pre-capabilities” which, if reinforced over time, should eventuate in capability development. However, in other cases these outcomes were not associated with a capability impact, either because they did not have a long-term effect or because their long-term impact was unknown (i.e., the long-term impact was not discussed by the customer/employee in the interviews). For example, some customers described negative emotional reactions involving recurring panic attacks, which could eventually negatively affect customer’s health capability (e.g., development of an anxiety disorder). But if the participant did not explicitly describe that they developed a mental health outcome as a result of the service delivery experience, then a health capability impact was not coded.

5. DISCUSSION

This study explored whether the social value of welfare service delivery could be captured in terms of customers’ capability development. It is one of the first attempts to test the utility of the capability list as a way of conceptualising the social value of welfare service delivery. Several key findings emerged from the study. First, many of the effects described by Centrelink employees and customers could be captured by the capability list. However, there were important impacts of Centrelink service delivery that could not be captured by the list. One of these outcomes, which we labelled “Welfare security” is conceptualized as a capability in its own right. Moreover, other outcomes (e.g., referrals to services) were identified which could be conceptualized as “pre-capabilities” or intermediate outcomes that may, in the long-term, result in capability development.

5.1 Capability development through welfare service delivery

The capability impacts that were attributed to Centrelink’s service delivery tended to occur in the domains of “Standard of living”, “Individual, family and social life,” “Education and learning,” “Health,” and “Productive and valued activities.” A visual inspection of the number of capability reports for participants in customer service centres with PBS versus participants in more mainstream customer service centres indicates that intensive service delivery may be more important for the capabilities of “Productive and valued activities”, “Individual, family and social life”, “Identity,
expression and self-respect”, “Health”, and “Education and learning”. These results provide some indication that the observed capability impacts may be related to differences in service delivery between the centres with PBS and centres without PBS.

None of the participants reported that Centrelink service delivery had an impact on their capability to participate in decision-making, have voice and influence. This capability is concerned with activities such as being able to participate in the formulation of government policy, and participate in democratic and fair elections, which may be less central to Centrelink’s business. Therefore, this capability might be removed in the interests of parsimony. Instead, we identified another potentially important capability, namely, “Welfare security”. Although there is no exact definition of what constitutes the welfare state, it encompasses the nonmarket, governmental provision of, or direct funding of, consumption needs in such areas as income, housing, and health care (Hasenfeld et al., 1987). The ability and willingness to access welfare services in time of need can be vital to an individual’s survival. Our study participants shared many stories describing how Centrelink service delivery affected customers’ perception of their welfare rights and entitlements, trust in, and willingness to engage with Centrelink services and belief that they could access care and support from the welfare system when they needed it. This finding is consistent with the results of a qualitative study on public perceptions of welfare state reform in the United Kingdom (Taylor-Gooby & Wallace, 2009). The study participants were concerned that proposed reforms could affect the perceived legitimacy of the service and public trust in services. The importance of confidence in welfare services also has been demonstrated in a recent study of 26 European countries (Yur’yev, Varnlk, Varnlk, Slaska & Leplik, 2011). This study found that greater confidence in welfare provision was associated with a lower level of suicide mortality among male recipients of welfare benefits. Other researchers have found that the effects of public service delivery extend to affect trust in the government of the day (Citizens First 3, 2003; Heintzman & Marson, 2005; Kampen et al., 2003). Thus, we believe that this capability is quite broad in its potential impact. However, further research in different contexts may be required to establish whether this outcome qualifies as a central and important capability outside of the welfare context.
5.2 Other outcomes (pre-capabilities) of welfare service delivery

The fact that we were able to identify many instances in which welfare service delivery achieved capability impacts provides support for the proposition that we can evaluate social institutions on this basis. However, our participants identified a range of other outcomes (e.g., experiencing negative emotional reactions, receiving a referral to other services) that could not in themselves be categorized as capability impacts. In some of the stories told by participants, these outcomes appeared to represent pre-cursors of capability development, but in other instances their long term impact was unknown because it was not discussed by the participant, or it did not represent a capability impact. There is some evidence from previous research to support the proposition that these pre-capability outcomes will achieve capability development. In their evaluation of a Swedish labour market reactivation initiative, Gascoigne and Whiteside (2009) identified that it was through providing welfare recipients with choice and individualised pathways and options that capability was developed. However, in their study, there was a long-term relationship with welfare recipients and the effects of these options were able to be assessed. In the mainstream Centrelink environment, many of the contacts between customers and staff are one-off, which may weaken the potential for pre-capabilities to develop into capability impacts. Longitudinal research, ideally involving a control group, is necessary in order to clarify the potentially complex relationship between and among pre-capabilities and capabilities. Such research also offers the opportunity to explore what service delivery behaviours and processes underlie these outcomes and thus develop our understanding of the processes through which Centrelink can support the social inclusion of disadvantaged Australians.

We believe that these additional pre-capability outcomes reflect Centrelink’s prescribed role within the welfare system. The complexity of the social problems contributing to social exclusion have fostered inter-institutional approaches to tackling this exclusion (Galster et al., 2009; Wiklund, 2007). Multiple institutions in different service fields (e.g., health, education, social care, employment) are encouraged to combine their resources and efforts to assist in breaking down the multiple barriers that face individuals experiencing social exclusion. Indeed, the Australian Social Inclusion Board has identified that the co-ordination of services is a key component of social inclusion (Australian Government, 2009b, p. 15). With a multiple agency model
of service delivery, capability development will be the outcome of multiple institutions’ service delivery effort. Therefore, it is likely that a focus on pre-capabilities will be required if individual organizations are to be able to demonstrate their individual contribution to capability development. Another implication of the identification of pre-capabilities is that these outcomes may provide an early indication of the impacts on social inclusion. The Australian Social Inclusion Board has recommended evaluating both the short-term and long-term social inclusion outcomes of service delivery (Australian Government, 2009b, p. 19), and the pre-capabilities we have identified may be a viable set of short-term outcomes to measure. However, further research is needed to establish the connection between pre-capabilities and capabilities.

5.3 Implications for the measurement of the social value of welfare service delivery

One of the many challenges for welfare service delivery reform agencies is identifying performance metrics that measure social well-being. Our research has shown that the service delivery component of welfare systems, i.e. the manner by which welfare employees interact with customers, can contribute to capabilities and, thereby, help build a more inclusive society. But in the absence of measurement it is difficult to strategically plan and allocate resources to achieve these outcomes. Therefore, exploring both the content and process of a new measurement framework and welfare benefit index for Centrelink is an important direction for further research. In the United Kingdom, indicators for the Equalities Measurement Framework (as the capabilities list is now termed) have been identified through a programme of consultation involving 194 stakeholders and subject specialists (Alkire et al., 2009). Similar work is required in Australia to identify suitable measures of Centrelink’s service delivery impact. This work also will need to take into account the need for efficient measurement systems (due to the high volume of service delivery), the need to preserve customer confidentiality, and the need to minimise intrusiveness and other negative impacts for customers.

There are many published accounts of indices and metrics which measure social disadvantage or poverty (Pampalon & Raymond, 2000; Salmond, Crampton, & Sutton, 1998; Tunstall & Lupton, 2003; Vinson, 2007). There have been comparatively fewer attempts to design metrics which are linked to welfare service delivery systems and can be used to help plan and target resources (Darton, Forder, Netten, Bebbington,
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Holder & Towers, 2010; Hajkowicz, Mason, & Spinks, 2011). Creating metrics and indices linked to the service delivery system is challenging for two main reasons. First, there is a complex valuation dilemma. Social services deliver intangible outcomes that are difficult, or impossible, to quantify in monetary units. Economic valuation of social programs based on traditional methods is typically capable of only partial measurement of outcomes (Ackerman & Heinzerling, 2004). The second major challenge is the difficulty of treatment-response modelling. Changes to the service delivery system (i.e. treatments such as case management) are indirectly linked to outcomes such as capability development via complicated pathways over long time periods.

In our future research we aim to tackle both these issues as we attempt to build a new welfare services benefits index (WSBI) for Australia. Our approach is informed by the development and application of healthcare metrics of Quality Adjusted Life Years (QALYs) and Disability Adjusted Life Years (DALYs). Both of these metrics have attracted a vast body of research since they first emerged in the 1970s and 1990s (Dolan, Shaw, Tsuchiya, & Williams, 2005; Gold, Stevenson, & Fryback, 2002; Schwappach, 2002). Although heavily debated, and subject to continual refinement, these metrics have had a major impact on the planning and allocation of healthcare resources. They provide a consistent and comparable value-metric which can be used instead of monetary units. This permits cost-effectiveness analysis to guide investment decisions. Our aim is to develop similar systems of measurement that inform welfare service delivery investment and planning choices.

5.4 Conclusion

Theoretically, our findings provide important support for the capability framework by demonstrating that Centrelink’s service delivery can develop the capability of disadvantaged Australians. Existing research exploring the effects of welfare programs and initiatives on recipients’ capabilities has tended to highlight the many barriers to capability development (Galster et al., 2009; Green & Orton, 2009; Monteleone & Mozzana, 2009). Our study focused on experiences with welfare service delivery that “stood out” or were important to study participants. The findings demonstrate that societal institutions such as Centrelink can and do support capability development for
their customers. Furthermore, the finding that welfare service delivery has the potential to either promote or diminish customers’ capability to participate in society highlights the importance of service delivery as a public policy issue. It suggests that governments have a responsibility to ensure that welfare service delivery achieves positive rather than negative capability impacts for citizens. Furthermore, the effects of welfare service delivery were reported across a range of capabilities, indicating that the potential impact of service delivery for welfare recipients is broad. Thus, this research provides the impetus for future research aimed at identifying broader metrics of the social value of welfare service delivery in Australia.
REFERENCES


### APPENDIX A – THE CAPABILITIES' SUB-DOMAINS

<table>
<thead>
<tr>
<th>Capability</th>
<th>Sub-domains</th>
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<tbody>
<tr>
<td>1. Life: The capability to be alive</td>
<td>A. Avoid premature mortality through disease, neglect, injury or suicide</td>
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<td></td>
<td>B. Be protected from being killed or murdered</td>
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<tr>
<td>2. Health: The capability to be healthy</td>
<td>A. Attain the highest possible standard of physical and mental health, including sexual and reproductive health</td>
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<td></td>
<td>B. Access to timely and impartial information about health and healthcare options, including contraception</td>
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<td></td>
<td>C. Access to healthcare without discrimination and in a culturally sensitive way</td>
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<td></td>
<td>D. Be treated medically, or subject to experiment, only with informed consent</td>
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<td></td>
<td>E. Be assured of patient confidentiality and be free from the stigmatisation associated with some health conditions</td>
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<td></td>
<td>F. Maintain a healthy lifestyle including exercise, sleep and nutrition</td>
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<td></td>
<td>G. Live in a healthy and safe environment including clean air, clean water, and the freedom from pollution and other hazards</td>
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<tr>
<td>Capability</td>
<td>Sub-domains</td>
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| 3. Physical security: The capability to live in physical security | A. Be free from violence including sexual and domestic violence and violence based on who you are  
B. Be free from cruel, inhuman or degrading treatment or punishment  
C. Be protected from physical or sexual abuse (especially by those in positions of authority)  
D. Go out and to use public spaces safely and securely without fear |
| 4. Legal security: The capability of knowing you will be protected and treated fairly by the law | A. Know you will be treated with equality and non-discrimination before the law  
B. Be secure that the law will protect you from intolerant behaviour, and from reprisals if you make a complaint  
C. Be free from arbitrary arrest and detention  
D. Have fair conditions of detention  
E. Have the right to a fair trial  
F. Access to affordable and high-quality information and advocacy as necessary  
G. Have freedom of movement  
H. Have the right to name, gender and nationality  
I. Own property and financial products including insurance, social security, and pensions in your own right  
J. Know your privacy will be respected |
<table>
<thead>
<tr>
<th>Capability</th>
<th>Sub-domains</th>
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</table>
| 5. Education and learning: The capability to be knowledgeable, to understand and reason, and to have the skills to participate in society | A. Attain the highest possible standard of knowledge, understanding and reasoning  
B. Be fulfilled and stimulated intellectually, including being creative if you so wish  
C. Develop the skills for participation in productive and valued activities, including parenting  
D. Learn about a range of cultures and beliefs and acquire the skills to participate in a diverse society, including learning English  
E. Access education, training and lifelong learning that meets individual needs  
F. Access information and technology necessary to participate in society |
| 6. Standard of living: The capability to enjoy a comfortable standard of living, with independence and security | A. Enjoy an adequate and secure standard of living including nutrition, clothing, housing, warmth, social security, social services and utilities, and being cared for and supported when necessary  
B. Get around inside and outside the home, and to access transport and public places  
C. Live with independence, dignity and self-respect  
D. Have choice and control over where and how you live  
E. Have control over personal spending  
F. Enjoy your home in peace and security  
G. Access green spaces and the natural world  
H. Share in the benefits of scientific progress including medical advances and information and technology |
### APPENDIX A – THE CAPABILITIES’ SUB-DOMAINS

<table>
<thead>
<tr>
<th>Capability</th>
<th>Sub-domains</th>
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<tbody>
<tr>
<td>7. Productive and valued activities</td>
<td>A. Have a decent paid job, with support where necessary</td>
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<tr>
<td></td>
<td>B. Care for others, including children and parents</td>
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<td>C. Do something useful and have the value of your work recognised even if unpaid</td>
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<td>D. Have rest and leisure, including holidays, and respite from caring responsibilities</td>
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<td>E. Choose a balance between paid and unpaid work, care and leisure on an equal basis with others</td>
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<td>F. Work in just and favourable conditions, including health and safety, fair treatment during pregnancy, maternity and paternity, fair pay, reasonable hours, and freedom from harassment or discrimination</td>
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<tr>
<td></td>
<td>G. Not be forced to work in a particular occupation or without pay</td>
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<td>H. Not be prevented from working in a particular occupation without good reason</td>
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<td>Capability</td>
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<tr>
<td>8. Individual, family and social life</td>
<td>A. Develop as a good person</td>
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<td></td>
<td>B. Develop your moral outlook and other beliefs</td>
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<td>C. Formulate and pursue goals and objectives for yourself</td>
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<td>D. Hope for the future</td>
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<td>E. Develop and maintain self-respect, self-esteem and self-confidence</td>
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<td>F. Have a private life and some personal space, including protection of personal data</td>
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<td>G. Access emotional support</td>
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<td>H. Form intimate relationships, friendships and a family</td>
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<td></td>
<td>I. Celebrate on special occasions</td>
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<td>J. Be confident that your primary relationships will be treated with dignity and respect</td>
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<td></td>
<td>K. Spend time with, and care for, others including wider family</td>
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<td></td>
<td>L. Enjoy independence and equality in primary relationships including marriage</td>
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<td></td>
<td>M. Be free in matters of sexual relationships and reproduction</td>
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<td></td>
<td>N. Enjoy special support during pregnancy, maternity, and paternity</td>
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<td>O. Know that someone will look out for you</td>
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<td>P. Have peace of mind</td>
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<tr>
<td>Capability</td>
<td>Sub-domains</td>
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<tr>
<td>9. Identity, expression and self-respect: The capability of being and</td>
<td>A. Have freedom of conscience, belief and religion</td>
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<tr>
<td>expressing yourself, and having self-respect</td>
<td>B. Have freedom of cultural identity and expression of gender</td>
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<td>C. Have freedom of expression</td>
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<td>D. Communicate, including using information and communication technologies and use your own language</td>
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<td>E. Engage in cultural practices, in community with other members of your chosen group or groups, and across communities</td>
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<td>F. Have self-respect</td>
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<td>G. Live without fear of humiliation, harassment, or abuse based on who you are</td>
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<td>H. Be confident that you will be treated with dignity and respect</td>
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<td></td>
<td>I. Access and use public spaces freely</td>
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<td>10. Participation, influence and voice</td>
<td>A. Participate in decision-making and make decisions affecting your own life independently</td>
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<td>B. Participate in the formulation of government policy, locally and nationally</td>
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<td>C. Participate in non-governmental organisations concerned with public and political life</td>
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<td>D. Participate in democratic free and fair elections</td>
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<td>E. Get together with others, peacefully</td>
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<td>F. Participate in the local community</td>
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<td>G. Form and join civil organisations and solidarity groups, including trade unions</td>
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