



Workshop 6: New collaboration mechanisms

COLLABORATION BETWEEN VOLUNTEERING ENTITIES AND SOCIAL-HEALTH ORGANIZATIONS, Anna Varderi i Casas, ENRIQUETA VILLAVECCHIA CHILDRENS' ONCOLOGY FOUNDATION

The workshop on the new models of collaborations suggests a reflection on the new forms of *partnerships* between volunteering entities and other different kinds of organizations, especially in the fields of entrepreneurship, and on how we can reach out further based on the collaborations we establish. When talking about collaborations, it is inevitable to also look at what has been done in Catalonia up till now as regards volunteering entities and other sectors, not only entrepreneurship.

Entities and companies are gradually coming closer to each other, looking for strategic alliances; along this path a number of future challenges arise, and when thinking about the future we cannot only discuss these types of collaborations, we must also take into account the many and important strategic alliances which have been established with other types of institutions, such as social and healthcare ones, which have made it possible to offer better responses.

A good example of collaboration between institutions and volunteering entities is the programme on **Volunteering to support children and young people with long-term diseases**, of the **Enriqueta Villavecchia Children's Oncology Foundation**. This programme was rewarded with the 2008 Volunteering National Award, by the Catalan regional government, and the 2010 Active European Citizenship Award, by VOLONTEUROPE. This is a possible model, based on the collaboration between different types of organizations. It is made up of a team of 250 people and is carried out in all Catalan territory in collaboration with other volunteering entities located in the territory which work in the same issues. It has been implemented under strict coordination with the healthcare teams of the five reference hospitals for children's oncology in Catalonia, with the direct participation of professionals offering different levels of healthcare. It is structured in several lines of action, for hospital and home care and activities outside hospitals. It can therefore be used as an example of a programme carried out by an organization in collaboration with other volunteering entities and hospital and social-healthcare institutions.

The entities working in the social sphere in Catalonia, and more specifically those providing care for people with severe diseases and support to their families, have designed and set up volunteering programmes that are highly complex which have gradually been implemented rigorously and based on very

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demanding quality standards. What do we mean by “highly complex”? By this we are referring to persons with some form of severe disease, who are fragile and suffering, who are dependent, in chronic stages or at the last stage of life, who are in complex organizational structures, in scenarios that demand for excellent response such as hospitals or beyond, in extremely sensitive scenarios such as at home. Complex for two reasons, since besides the individual characteristics of the individuals who benefit from this programme and of the places where this care is provided, these programmes imply placing volunteers in situations with a high emotional impact, who require an adaptation process, and a highly structured initial and specialized training, as well as permanent training and spaces to monitor them continuously and solve any difficulties they may encounter.

Going back to the point on *partnerships*, and for volunteering entities, it becomes necessary for them to undergo a strategic search which is not only based on looking for partners who can contribute economic resources. This strategic search is also based on their strong determination to offer an effective answer to the need which are identified, adapting to new scenarios and to new needs, while remaining faithful to the objectives set out and facing new realities. It is all based on the wish to provide the best possible solution to the people we care for and, therefore, to know who these partners are, the necessary collaborators, those we will be forming an alliance with to offer better healthcare.

In Catalonia we have also been able to make important progress in putting volunteering in this sector into order. The work done by second level entities involved, such as the Catalan Federation of Social Volunteering and the Catalan Federation of Entities against Cancer, in conjunction with the Catalan Ministry for Governance and the Ministry of Health, has given a new momentum to and boost to the collective awareness in the sector, and has contributed to define a general framework and a common model.

Today it would not be possible to imagine a way forward which was not based on this relationship, nor would it be possible to imagine a project without the idea of networking. Entities working hand in hand, social and healthcare institution, the administrations, and the support of companies, all working towards a same objective, that of offering support to patients and their families, to improve their quality of life.

One of the challenges we are faced with is, beyond doubt, that of consolidating and improving what we have achieved up till now, and to continue innovating. Bearing this scenario in mind, and with the current economic crisis and all the changes occurring within the Catalan healthcare system, it will be necessary for

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all of us to make a concerted effort to adapt to this new scenario and to excel even more in what we do. If we are to gain the social and institutional acknowledgment in our sector, we will have to strive to improve our delivery when performing our tasks, with coherence and efficiency. Entities will not be able to continue working in collaboration with social and healthcare institutions, identifying them as partners, unless we increase our demands for quality, and unless we start thinking about improving the way in which we carry out our programmes and assess them, depending always on the type of work we do. We should demand from ourselves a greater quality when implementing our programmes, improve the way in which we manage them, renovate training, and being aware that the work done up till now is only the beginning. It may be that excelling does not mean reaching a determined point, but rather thinking about making progress and never stop.

Going on to the more specific issue of social and healthcare, another challenge we encounter is that of spreading volunteering within hospital care to other levels of healthcare, and being able to offer responses and coordinate efforts with the network of primary healthcare and basic social services. We still have a long way to go to improve the coordination between services and entities and there is still a great lack of mutual knowledge among healthcare services and entities. There are still patients and families who do not know they can turn to an entity for help.

Volunteering is a core element for society, which plays an essential role for a more active and co-responsible citizenship, which is more directly involved in the problems and needs. Volunteering has a strong tradition in Catalonia, and has a great power of transformation. This response capacity is there for all sorts of difficult situations, no matter how complex and difficult these may be, we only have to believe in it and start networking.