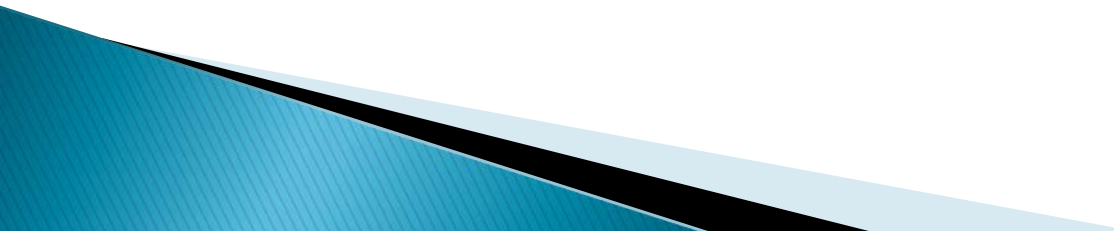


Advocacy and Empowerment

Vela Tadic MSW RSW

Learning objectives

- ▶ Describe advocacy skills
 - ▶ Describe empowerment approach
 - ▶ Apply an integrated advocacy and empowerment approach as a navigator
- 

Reflection

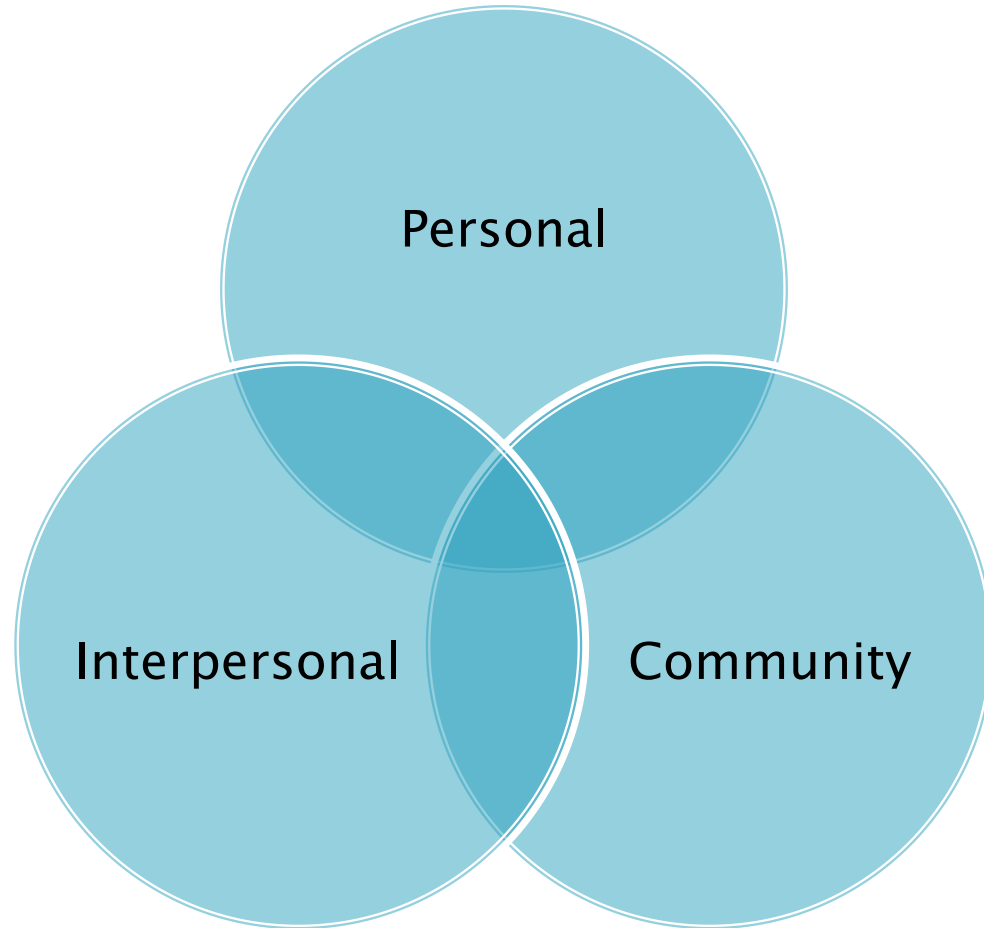
Advocacy and empowerment often intertwine.

This work will require an element of reflection on:

- ❖ who is your client,
- ❖ what is their perspective,
- ❖ what are their needs,
- ❖ what are the services available,
- ❖ what is my role with advocating,
- ❖ what power exists in this relationship
- ❖ navigating the boundaries between need, what is available and what should be available, and
- ❖ self care: myself, my relationships and my worldview.

(Parrott 2006)

Person in context



Concepts of Power/Powerlessness

“Real powerlessness”

- ▶ Income disparity
- ▶ Access limitations
- ▶ System/structural barriers

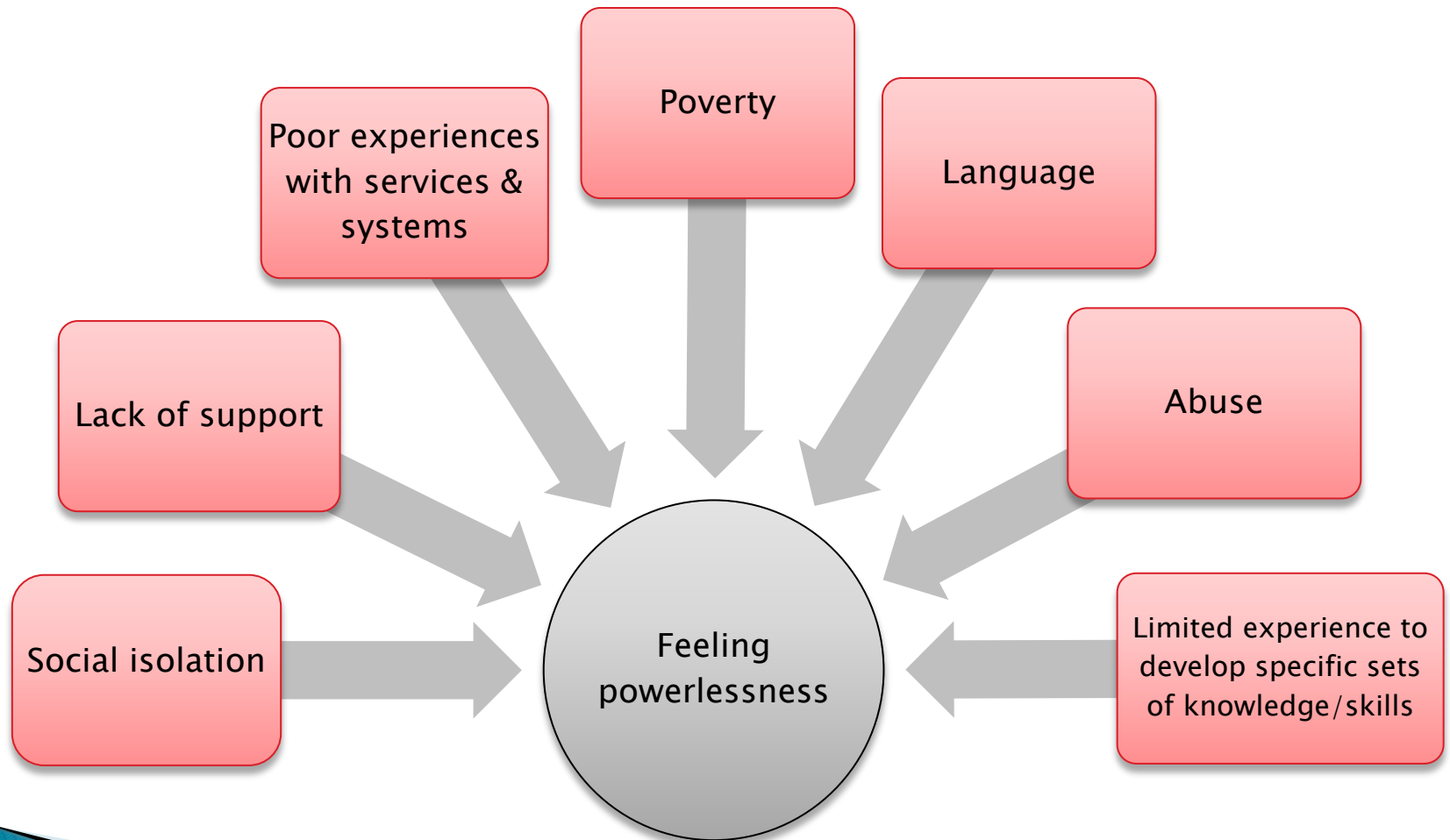
“Surplus powerlessness”

- ▶ Internalized belief that influences motivation and confidence in ability to exercise change

(Lord & Hutchison 1993)



Person in Context



(Lord & Hutchison 1993 / modified)

Empowerment

- ▶ Empowerment is a conceptual framework and not a specific method or theory, it encompasses principles for an approach to work.
- ▶ Empowerment asks you to critically consider multiple cross sections of factors contributing to the presenting problem. (Lee 2001)

Example:

Single, 18 y.o. mother of two children on OSAP while going to school; recently moved from out of province. She has subsidized daycare only while going to school, and asking you about free summer camps so she can work during summer. She needs the summer job when OSAP ends.

Empowerment

Empowerment practice involves respecting where the client is at in their lives and how they got there. It includes a belief in their ability to make changes for themselves. This may include attention to improving specific skills and/or knowledge.




What can they do for themselves?

Example:

John is asking for help with finances being recently unemployed. He does not know what options are.

(Parsons 2002; Torre 1985)

Empowerment practice skills

- ❑ **Context:** what has contributed to this person's situation? Social status, race, gender, orientation, disability...
 - ❑ **Capability:** think about what the person can do for themselves
 - ❑ **Strengths:** what they have been able to do so far?
 - ❑ **Knowledge:** sharing of information can be seen as empowerment addressing knowledge imbalance
 - ❑ **Collaborate:** identifying their goals/needs, how they would like your level of involvement, checking in
 - ❑ **Capacity:** Believe in their capacity
 - ❑ **Self-advocacy:** how might they have their voice heard?
- 

Empowerment in practice: example

Empowerment Practice Skills

- ❑ **Context:** what has contributed to this person's situation? Social status, race, gender, orientation, disability...
- ❑ **Capability:** think about what the person can do for themselves
- ❑ **Strengths:** what they have been able to do so far?
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- ❑ **Collaborate:** identifying their goals/needs, how they would like your level of involvement, checking in
- ❑ **Capacity:** Believe in their capacity
- ❑ **Self-advocacy:** how might they have their voice heard?

General Application Example

- ▶ As a new refugee there are language & cultural barriers. They have survived significant losses, transitions, and instability from leaving their home to coming here.
- ▶ They may have difficulty communicating in non-maternal language but can think for themselves, if given written instructions can follow through/share with others.
- ▶ Providing them with information about resources, explaining options.
- ▶ Can they contact on their own? Would they like you to call the resource there in office? Do they prefer to discuss with family first?
- ▶ Maintain belief that this person has capacity to develop navigation skills.
- ▶ Explore what else they may need to do on their own/barriers? Do they need bus tickets? Are they comfortable scheduling appointment with caseworker on their own? Do they need a map of how to get to local community centre?

Empowerment in practice: example

Empowerment Practice Skills

- ❑ **Context:** what has contributed to this person's situation? Social status, race, gender, orientation, disability...
- ❑ **Capability:** think about what the person can do for themselves
- ❑ **Strengths:** what they have been able to do so far?
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- ❑ **Capacity:** Believe in their capacity
- ❑ **Self-advocacy:** how might they have their voice heard?

General Application Example

- ▶ As a someone with mental health challenges there may be stigma/discrimination, history with health care system, family issues, losses.
- ▶ They may be depressed but have still been able to work, take care of the kids, pay the bills.
- ▶ They may not know that their employer has a duty to accommodate and that it is reasonable to make such a request. They may not know of supportive housing options to live independently.
- ▶ Can they contact on their own? Would they like you to call the resource there in office? Do they prefer to discuss with family first?
- ▶ Maintain belief that this person has capacity to make the right decision for themselves.
- ▶ Explore what else they may need to do on their own/barriers? Do they need bus tickets? Are they comfortable scheduling appointment with caseworker on their own? Do they need a map of how to get to local community centre?

Advocacy

The concept of advocacy is derived from law. It means to speak up, to plead the case for another, or to champion a cause, often for a group... that cannot speak out on its own behalf.

(Reisch 2002)

Advocacy

Advocacy in values and ethics therefore speaks to those aspects of individual and collective empowerment which seek to enhance the autonomy and self determination of those people unable to speak for themselves because they are either temporarily or permanently excluded from: access to key resources, access to key services, access to social networks, access to political process networks.

(Parrott 2006)

Advocacy


Negotiating on their behalf:

- phoning phone company asking for extension on bill payment; writing support letter for workplace accommodation.

Helping them to develop their skills to negotiate/navigate on their own behalf:

- providing them with contact information for labour lawyer consultation with work issue; describe best way to complete disability application; teach clients how to find community health and social resources (how to use 211 /how to find local CHC/CRC).

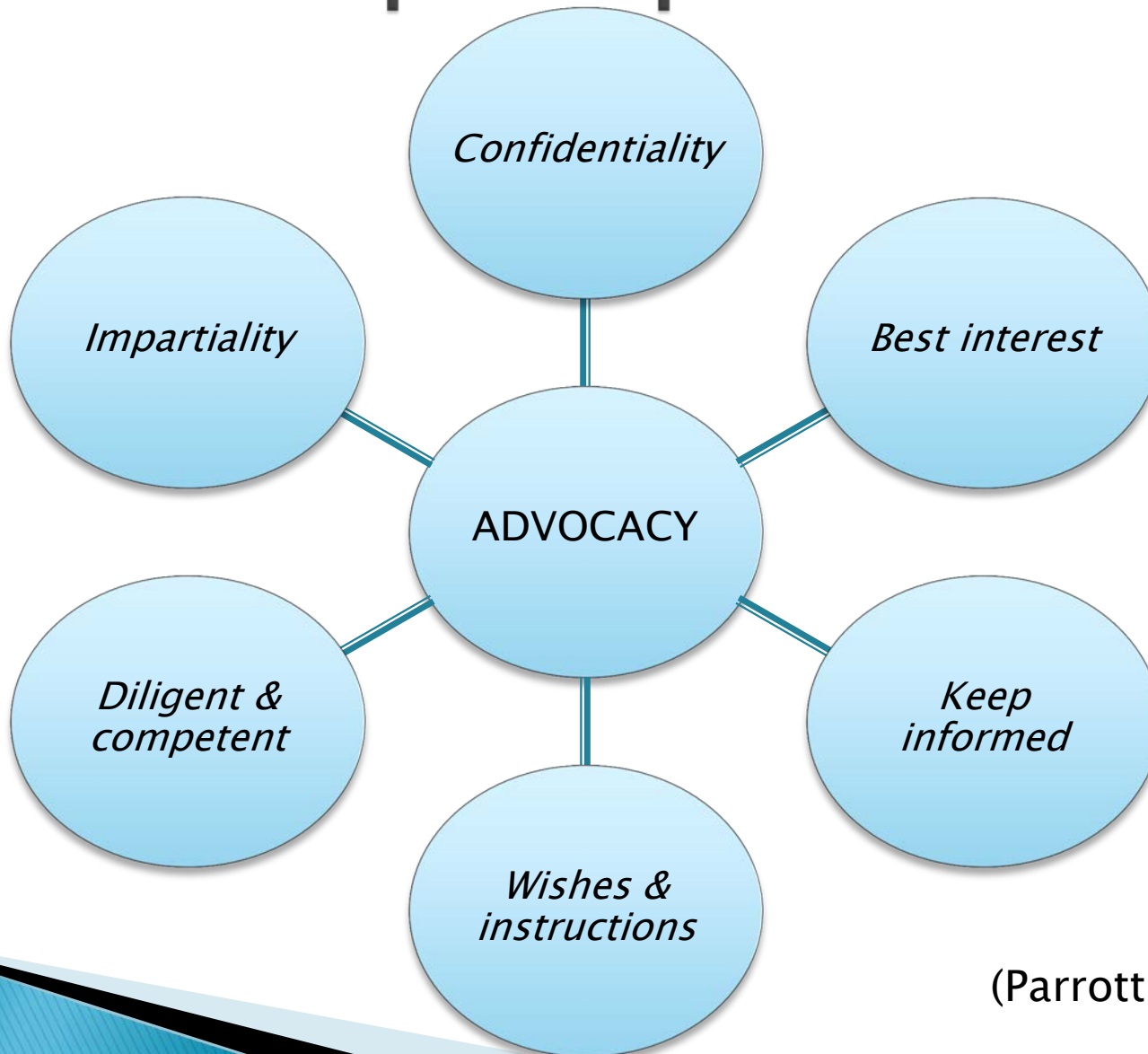
Supporting them to make their own decisions:

- respecting their choice not to use food bank; review options with them and discuss what their perspective and choice is.
- 

Advocacy practice skills

- ❑ Develop relationships
- ❑ Negotiate with others to address client needs
- ❑ Using language that makes sense to the individual/group you are advocating to (ie: “if client does not receive one time payment for this bill then they may be at risk of losing housing” vs “they have no money and cannot pay this month, can you help?”)
- ❑ Make an argument supporting the ask (ie: “this person has always paid on time in full for x# years; it is only because of delays from employer payroll system that they cannot pay on time this month; can you make an exception?”)
- ❑ Be flexible and creative

Bateman's principles:



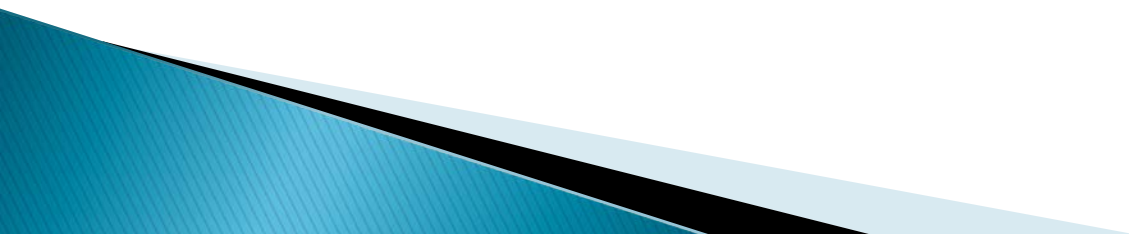
(Parrott 2006: 102)

How this fits as a navigator

- ▶ Being clear about role, function and limits as a navigator. Importance of client ability and perspective.
- ▶ Attention to exploration of contributing factors. Attention to ecological factors such as couple, familial and social relationships; employment/spiritual. Interpersonal interactions.
- ▶ Exploring first what patient knows and thinks of as a solution, and in some cases offering additional ideas based on personal expertise/knowledge – “filling in the gaps.”
- ▶ Importance of having knowledge of the resources themselves in order to address questions/concerns/guide process.
- ▶ Exploring barriers to goal achievement.
- ▶ Importance of privacy and respect with all interactions, acknowledging importance of developing trust, the vulnerability with sharing their needs, their story; and allowing non-judgmental stance.

(Hepworth 2006)

Demonstration



Self-care

This can be challenging and rewarding work, and you may find yourself affected by the stories you hear. You are likely doing this because you are already someone who is a helper, believes in social justice and equity, and committed to doing the best possible job.

Compassion fatigue can be characterized by deep emotional and physical exhaustion, symptoms resembling depression and PTSD and by a shift in the helper's sense of hope and optimism about the future and the value of their work. (Mathieu 2007)



- A) KNOW YOUR EARLY WARNING SIGNS
- B) DEVELOP SELF CARE STRATEGIES

Mathieu, F. (March 2007) *Transforming Compassion Fatigue into Compassion Satisfaction - 12 Top Self Care Tips.*
www.workshopsforthehelpingprofessions.ca

Self-care

Adapted from Mathieu's Top 12:

1. Re-evaluate your workload, commitments & responsibilities
2. Identify key self care that nourishes/de-stresses
3. Schedule formally & informally these strategies (big or small)
4. Delegate
5. Have a “workplace to home” transition
6. Be attentive to degree & frequency of trauma inputs – set limits
7. Learn to say yes/no more often
8. Learn more about compassion fatigue
9. Increase social support including supervision/peer support
10. Attend professional development regularly
11. Consider working part-time or adjusting work schedule
12. PHYSICAL ACTIVITY

Mathieu, F. (March 2007) *Transforming Compassion Fatigue into Compassion Satisfaction – 12 Top Self Care Tips.*
www.workshopsforthehelpingprofessions.ca

They may forget what you said — but they will never forget how you made them feel.

—Carl W. Buehner



References

- Hepworth, D.H. et al. (2006) *Direct Social Work Practice: Theory and Skills*. Seventh Edition. Thomson Brooks/Cole, Canada.
- Lee, J. (2001) *The Empowerment Approach to Social Work Practice: Building the Beloved Community*. Second Edition. Columbia University Press, New York, Chichester, West Sussex.
- Lord, J. and Hutchison, P. (1993) "The Process of Empowerment: Implications for Theory and Practice." *Canadian Journal of Community Mental Health*. Spring, 12:1: 5–22.
- Parrott, L. (2006) *Values and Ethics in Social Work Practice*. Learning Matters Ltd., Great Britain.
- Parsons, R.J. (2002) "Guidelines for Empowerment-Based Social Work Practice." *Social Workers' Desk Reference*. Eds. Albert R. Roberts and Gilbert J. Greene. Oxford University Press, 396–401.
- Pulvirenti, M. et al. (2011) "Empowerment, patient centred care and self-management." *Health Expectations*. John Wiley and Sons Ltd, 17: 303–310.
- Rock, B.B. (2002) "Social work in health care for the 21st Century: The Biopsychosocial Model." Eds. Albert R. Roberts and Gilbert J. Greene. Oxford University Press, 10–15.
- Reisch, M. (2002) "Legislative Advocacy to Empower Oppressed and Vulnerable Groups." Eds. Albert R. Roberts and Gilbert J. Greene. Oxford University Press, 545–550.
- Rose, S. (1996) "Advocacy/Empowerment: An Approach to Clinical Practice for Social Work." *The Journal of Sociology and Social Welfare*. 17 (2): 41–51.