

Professional and Independent Advocacy

ECAY4003

2023

Professional Advocacy



Professional Advocacy

- Advocacy can be found in many professions
 - Nursing
 - Health and Social Care
 - Social Work
 - Government
 - Benefits sector
 - Housing sector
 - Etc.
- There can be both positive and negative factors to advocacy within such professions
- In this session we will explore both the positive and the negative, and discuss our thoughts with the group.





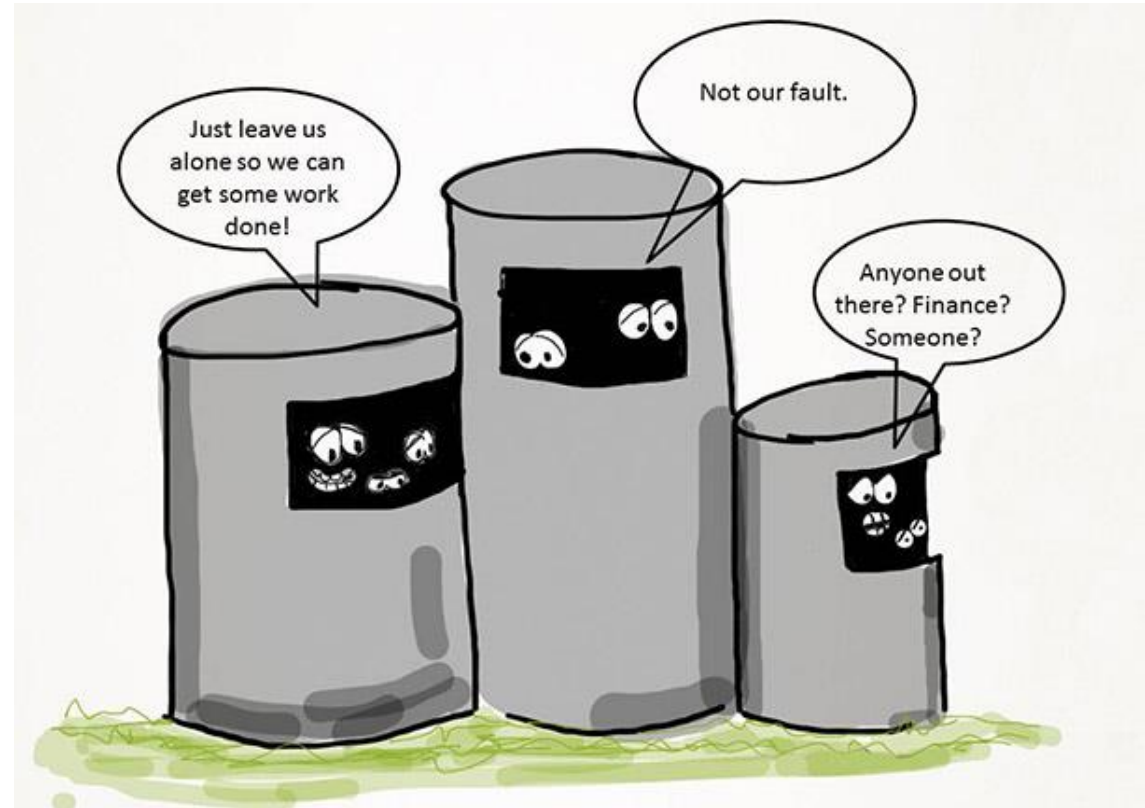
Silo Working

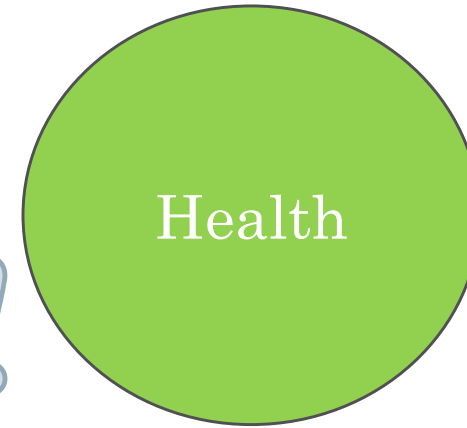
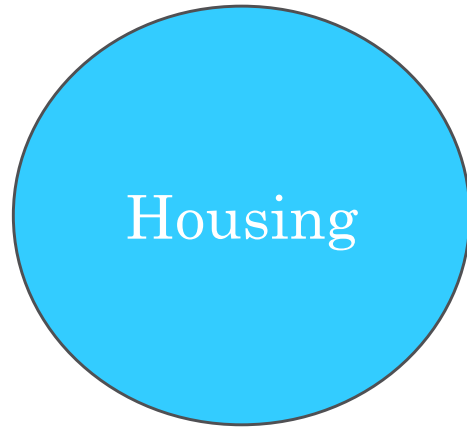
- What is Silo Working?
- What does it mean?
- Can you give me an example?

Silo Working

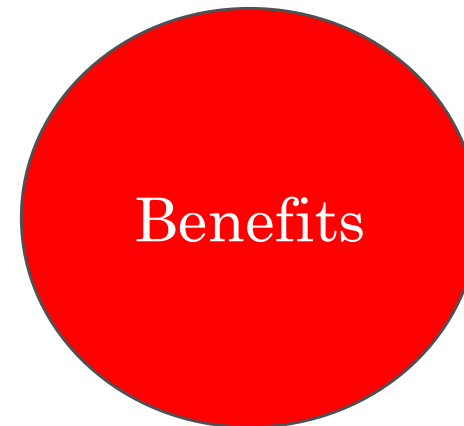
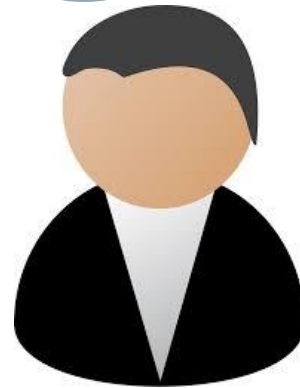
- Silo working is where different agencies work with the individual separately one at a time.
- Creates the potential for individuals to be at the end of one waiting list for a particular service while being referred to next service and then stuck on another waiting list.
- Professionals involved in silo working may also be restricted by internal organisational influences, financial constraints, political and policy factors and tunnel vision thinking.

(Conradie And Golding, 2013)





Arghh!!!

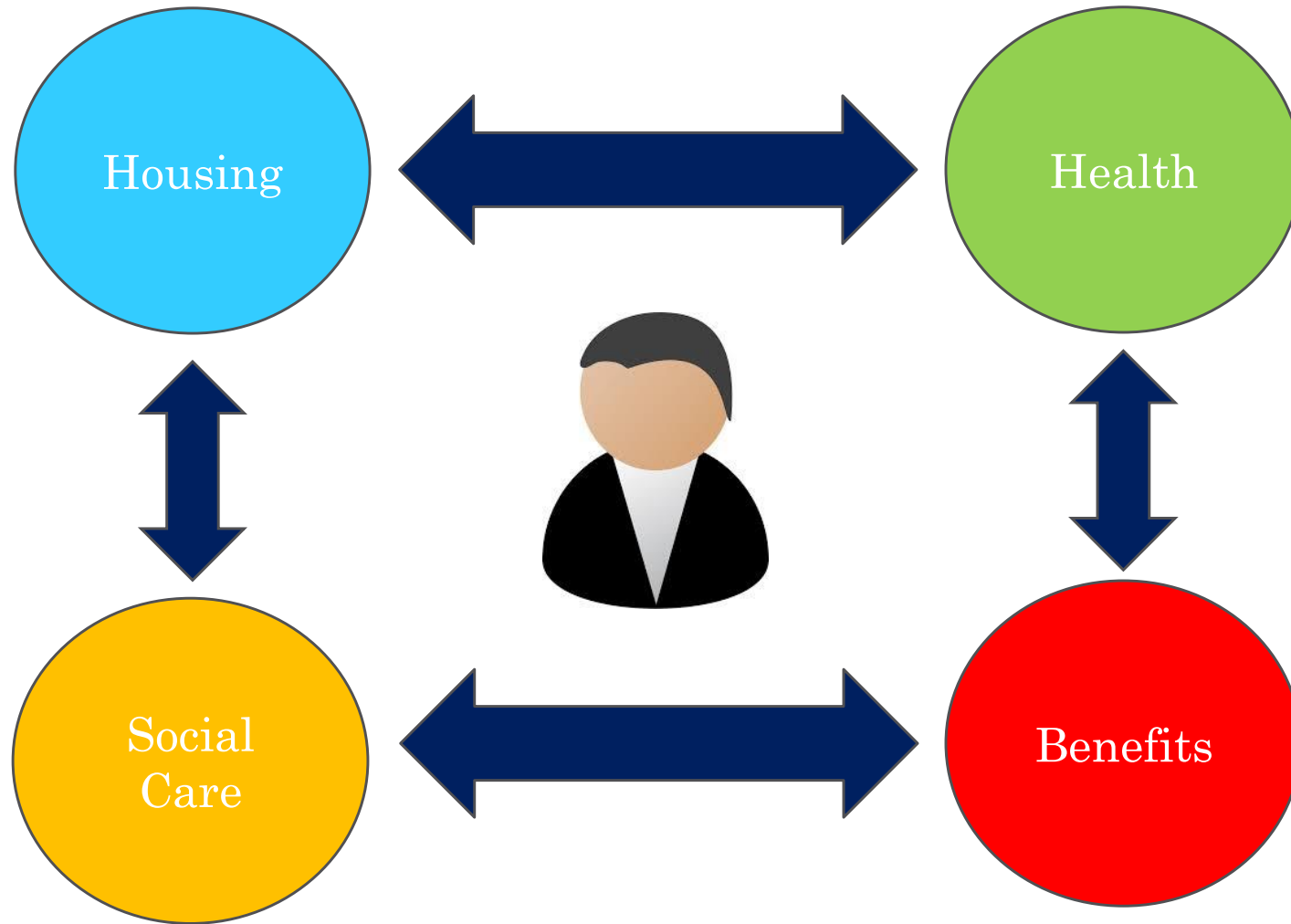


(Based on Conradie And Golding, 2013)



Changes from Silo to integrated Working

- High profile cases and catalyst incidents such as Victoria Climbié were the driving factors for change.
- Cross party support for integration had been present in government before the catalyst cases.
- Professional working practice changes were introduced by the New Labour Government (Blair And Brown years 1997-2010)
- New Labour instigate the changes from silo working (Professionals in specialist single teams) to integrated approaches (Practitioners working in multidisciplinary teams).



(Based on Conradie And Golding, 2013)

Integration has many names in social policy contexts

- Multidisciplinary teams
- Multi-agency working
- Partnership working (long term)
- Collaborative working
- Inter-agency working
- Inter-disciplinary working





Integrated Working

- Integrated working practices offer a one-stop shop for individuals in need allowing engagement with a variety of services at one point and place.
- Working this way gives a more holistic manner guiding towards a Person-centred approaches and best practice models.
- Can you think of any examples?

Advocacy: What could it look like?

- For example, Social work and health care practitioners who provide a form of advocacy for their client can create conflict.
- Although they may have best interest priority for the individual it can not be seen as truly independent as they have different goals, values and targets.



Negative aspects of delivering advocacy by professional practitioners

- ‘Social workers who may have to make decisions in the ‘best interest’ of a service user will find it difficult to truly represent their views, or indeed go against the service’.
- ‘Social workers are in a unique position because they are able to advocate and challenge the systems from within’.
- ‘This could mean advocating for the person but against the system they are located in’.
- ‘It is not always easy for social work advocates to confront the professional power of the organisations within which they are located’.
- ‘It may not make social workers popular either within their own agency or with other professionals’.

(Dalrymple and Boylan 2013, p. 13-19)



‘Dependant’ Advocacy

- This type of advocacy, provided by a professional who is part of the organisations that the service user is trying to negotiate is known as dependent advocacy.
- The professional is dependent on the organisation for their employment and therefore is more likely to see the situation from the organisation's perspective rather than the service user.

The changing landscape of health and social care

- The landscape of health and social care is changing.
- At the heart of the change is growing awareness among policy makers, health and social care practitioners, service users and their carers of the need for effectively integrated services.
- But such integration is confronted by multi-faceted challenges.
- For instance, synergy requires concerted thinking and activities from partners at the macro level of policy, meso levels of health and social care organisation and delivery, in addition to the micro levels of the user's family and other community linkages

(Carnwell and Buchanan, 2009)





The changing landscape of health and social care

- Consequently, in the UK, a body of legislation and policy documents highlights a duty to develop collaborative working arrangements for health and social care service delivery.
- In everyday practice this translates to multi-agency partnerships
- The Aspiration is a service that holistically addresses the health, social, legal and psychological aspects of any case, empowers individual users and is supportive to carers.
- This in turn requires a threefold solid understanding of the 'science' of working together; the 'art' of effective partnership working in this digital age; and the frequently forgotten issue of the internalization of the 'learning' that is generated so that new effective practices become embedded into the participating organizations, which will in turn ensure both the viability and durability of the effort.

(Carnwell and Buchanan, 2009)

Beveridge Harris
Dec 3rd
1942

17.



SOCIAL INSURANCE AND ALLIED SERVICES

Report by
SIR WILLIAM BEVERIDGE

*Presented to Parliament by Command of His Majesty
November 1942*

LONDON
PUBLISHED BY HIS MAJESTY'S STATIONERY OFFICE
To be purchased directly from H.M. STATIONERY OFFICE at the following addresses:
York House, Kingsway, London, W.C.2; 120, George Street, Edinburgh 2;
19-41, King Street, Manchester 2; 1, St. Andrew's Crescent, Cardiff;
80, Clifden Street, Belfast;
or through any bookseller

1942
Price 2s. 6d. net

Cmd. 6404

The Beveridge Report

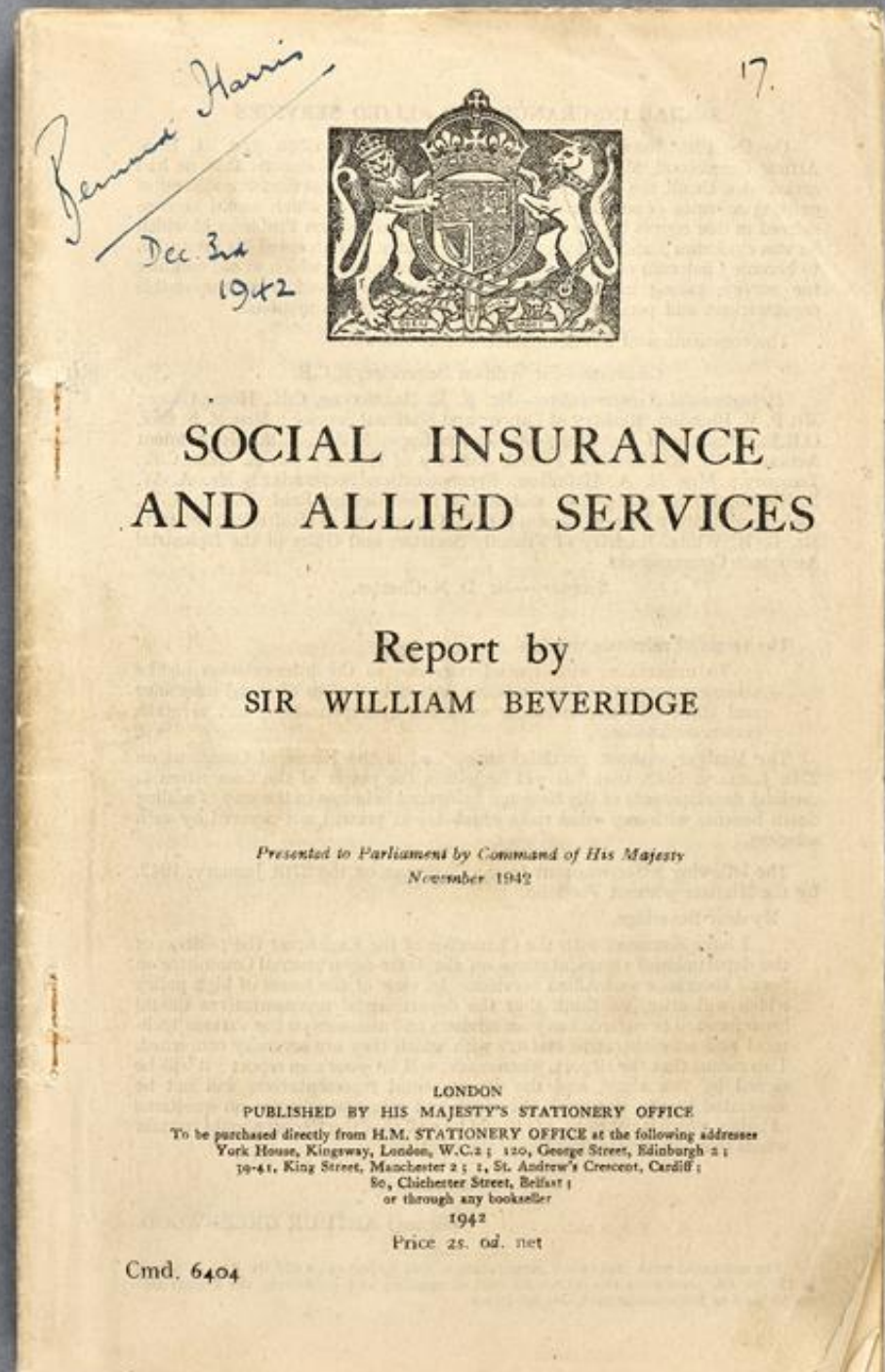
- William Beveridge (1879 – 1963) was a social economist who in November 1942 published a report entitled '*Social Insurance and Allied Services*' that would provide the blueprint for social policy in post-war Britain.
- Beveridge had been drawn to the idea of remedying social inequality while working for the Toynbee Hall Charitable organisation in East London.
- He saw that philanthropy was simply not sufficient in such circumstances and a coherent Government plan would be the only sufficient action.

(UK Parliament, 2023)

The Beveridge Report

- By the outbreak of war, Beveridge found himself working in Whitehall where he was commissioned to lead an inquiry into social services.
- His vision was to battle against what he called the five giants.
 - Idleness
 - Ignorance
 - Disease
 - Squalor
 - Want
- His 'Cradle to the grave' social programme that amongst other proposals called for a free national health service alienated some politicians but it struck a chord with the public and this would influence Clement Atlee's Labour Government to implement these ideas.

(UK Parliament, 2023)





Partnerships: Philosophy and Policy

- We live in what many commentators would refer to as a post-modern world (Lyotard, 1992).
- Philosophically or theoretically, post-modernism is a critique of the older 'modern' forms of social health and welfare, the 'one size fit's all' policy that characterised the post war creation of universal health and wellbeing provision.
- Lyotard argues that these huge national schemes or 'grand narratives' have failed to help the people they were created to help.
- Citing examples such as poor housing and poverty as social problems that have increased rather than decreased [in the now 80 years].
- Lyotard sees this attempt at social amelioration as more about helping the system rather than the people who need the help.

(Carnwell and Buchanan, 2009)

Advocacy in health and social care

- This critique of large scale attempts to solve people's problems has been reinforced by critiques outlining the disempowering effects of professional solutions to social problems.
- Beginning in Britain in the 1980's, both the system and the professionals within the system have been disempowering for clients and receivers of services, with terms used such as the 'nanny state' or the 'disabling state'.
- It is these critiques that have resulted in an increasing emphasis on service user or 'consumer' choice.
- Health and social care services have been encouraged to allow consumers to become more involved and to have more of a say in the design and provision of services.

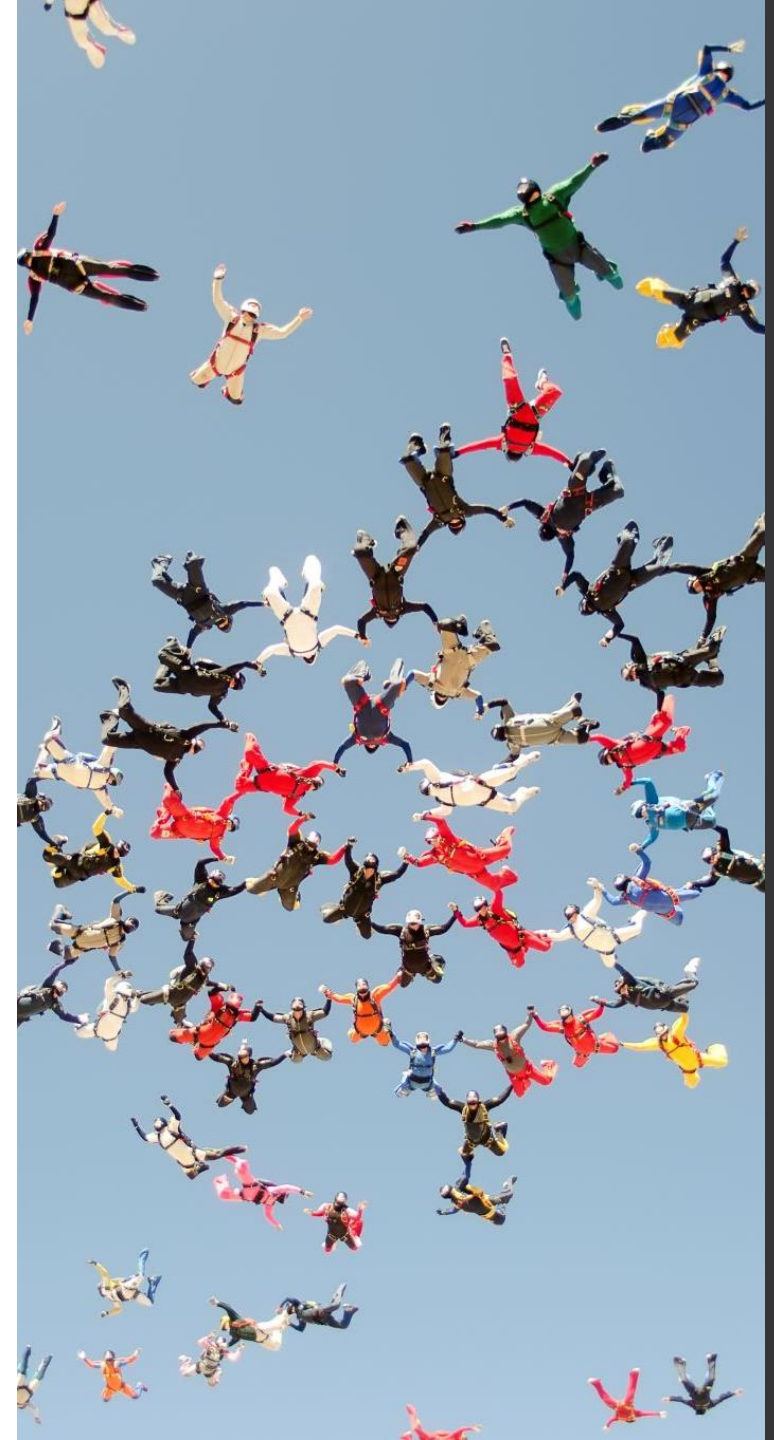
(Carnwell and Buchanan, 2009)



Ethical issues of working in partnership

- All professional groups, whether working in isolation or in fully integrated teams, face challenges in the delivery of their practical skills and services. These challenges may be located in many different areas including:
 - Increased consumer expectations, evolving cultural boundaries, advances in technology, political and legal norms.
 - Government policy Initiatives and changes
 - Financial considerations
 - Social norms
- Can you think of any other ethical challenges?

(Soothhill *et al.*, 1995)



A case study of Multi-disciplinary ethical care

Please read the Case Study Found on Moodle.



Case Study Questions

- Is it in the best interests of all concerned to make sure the mother remains well and within the family or to keep her on medication that she is not happy with, in effect using her as a means to an end?
- Who's frame of reference is being used to decide best interest?
- What personal qualities within the professional are demanded?



Group Discussion

- Can you identify the Positive aspects of integrated working and Advocacy within the system?
- Can you identify the Negative aspects of integrated working and Advocacy within the system?



References

- Conradie, I. Golding, T. (2013) *The short guide to working with children and young people*. Bristol: The Policy press.
- Dalrymple, J. Boylan, J. (2013) *Effective advocacy in social work*. London: SAGE Publications Ltd.
- Carnwell, R. & Buchanan, J. (2009) *Effective Practice in Health and Social Care and Criminal Justice* Berkshire: Open University Press
- Soothill, K., Mackay, L., and Webb, C (1995) Troubled Times: the Context for Interprofessional Collaboration? In K. Soothill, L, Mackay and C. Webb (eds) *Interprofessional relations in Health Care* London: Edward Arnold
- UK Parliament (2023) *1942 Beveridge Report* Available at: [1942 Beveridge Report - UK Parliament](#)