

# Changing teaching practices in challenging oppression in social work practice

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# *What is anti-oppressive social work practice*

“Minimising the power differences in society. Such practice ‘works with a model of empowerment and liberation’ and requires a fundamental rethinking of values, institutions and relationships”.

(Phillipson, 1992 in Dalrymple and Burke 1995, *Anti Oppressive Practice: Social Care and the Law* p.3)

# *Focal areas of AOP*

Racism

Sexism

Classism

Homophobia

Disabilism

Poverty

Power

Religion

HIV and AIDS

Access to services

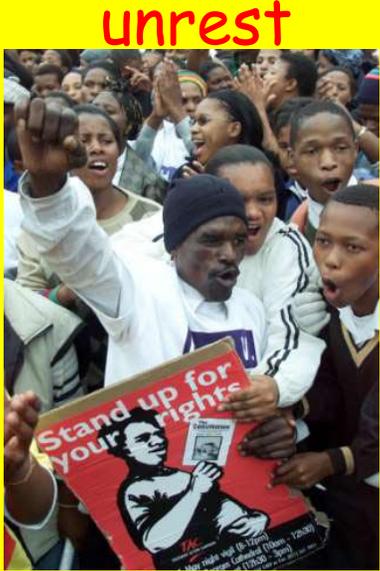
*Evolutionary development  
of AOP in South Africa*

In an effort to describe its intrinsic diversity, South Africa is commonly referred to as

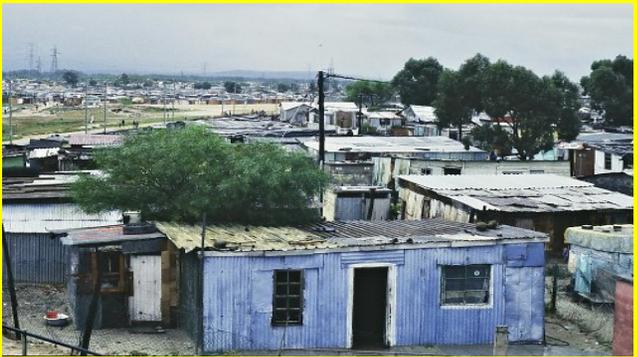
# THE RAINBOW NATION



tourism



unrest



poverty

THERE SHALL  
BE HOUSES  
AND SECURITY  
FOR ALL



peace



disappointment

# HISTORICAL OVERVIEW

## Legislating Apartheid (1948)

The National Party won the election (1948) and implemented apartheid, which was forced segregation based solely on race. Accomplished through legislation such as: Prohibition of Mixed marriages Act, Population Registration Act, and the Group Areas Act. In 1961 South Africa became a republic and withdrew from the Commonwealth.

## Soweto Rights (1976)

June 16, 1976, black youth of Soweto protested against Afrikaans being the official language for education. This was a turning point in the anti-apartheid struggle.

# HISTORICAL OVERVIEW (cont)



Release of Nelson Mandela  
(1990)

First democratic elections  
(1994)

The greatest victory for a nation so besieged by intolerance, bigotry, and ignorance. The birth of the Rainbow nation and a new multi-cultural, racially inclusive society.



# HISTORICAL OVERVIEW (cont)

## **New South African Constitution (1996)**

The evidence of our new beginning. A legal mandate celebrating, rather than negating, our rich diversity and inclusivity, and a time of truth and reconciliation. It is the most liberal and morally inclusive constitution in our free world - an example for the world to follow [e.g. the only constitution which protects individuals against discrimination on the grounds of sexual orientation].

## **A decade post Apartheid (2003)**

# *South Africa in present context*

Issues of racial oppression still predominate

There is a shift towards empowering historically disadvantaged communities

While changes have occurred still significant tension

Affirmative action

Sexism and gender inequality gradually getting more focus

Still embedded in patriarchal cultural norms and values

# *South Africa in present context (contd)*

Homophobia - although protected in the new constitution - continues unabated

Disabilism still low on national agenda

Power inequality and poverty still remain

HIV/AIDS crisis exacerbated the power differential and discriminatory attitudes

## WAR ON HIV/AIDS (cont)

Truth: Facts don't lie -  
*"The New South African Apartheid"*  
(Africa at the Crossroads, 23 August, 2000)

1997: 3 million South African's living with HIV/AIDS

2005: Predicted to rise to 4.5 million

Young people most at risk: 15-25 yr age group - 60% of HIV infections (IPPF, 2003).

34.3 million people worldwide living with HIV (end of 1999)

Sub Sahara Africa accounts for 24.5 million of the total

One in ten people aged 15-49 are already living with HIV / AIDS

South Africa - 25% of pregnant women test HIV positive.



# WAR ON HIV/AIDS (cont)

UNAIDS report (2002) stated that:

1700 new infections per day.



In 1990 HIV infection rate in South Africa was under 1%, now it is 25% of total population.

2010: Life expectancy in South Africa will drop to 40 yrs old.

50% of current 15 yr olds in South Africa, Namibia, Zimbabwe and Botswana will not reach 50.

12% of students in tertiary institutions in South Africa are HIV positive.

10% of teachers are HIV positive.

# WAR ON HIV/AIDS (cont)

## Prevention and treatment

We have failed in the area of primary prevention e.g the national education department has failed to place AIDS firmly within the school curriculum.

Preventing HIV has proven to be particularly difficult - it means forging new links between sex, illness and death and encouraging the belief that solidarity, compassion and understanding are more appropriate to HIV disease prevention than discrimination and ostracisation (Africa at the Crossroads, 2000).

AIDS is having dramatic and unimaginable repercussions for educational, social welfare and health care provision in South Africa - but are we doing enough?

# CHANGING SOCIAL WORK PARADIGMS

## Paternalism to Self Empowerment

SW historically embedded in a paternalistic, charitable service provision paradigm. Post 1994, with a new culture of self empowerment, SW has gradually shifted towards an ecological, systems, strengths-based paradigm of intervention.



Case management to  
community empowerment  
and grass roots  
intervention

# CHANGING SOCIAL WORK PARADIGMS (cont)

**Inclusivity:** Shift from segregated to multi-racial education, training, policy development, practise modalities, and service provision



**Changing roles in the NGO field:** Government pressure to address previously disadvantaged populations. Forced to address and change policies.

**Significant change in roles:** From autonomy/external international funding to more government intervention and accountability.

**Funding policies:** Shift from government/statutory to NGO's

# CHANGING SOCIAL WORK PARADIGMS (cont)

- ❖ From racial disadvantage to reflective racial representation
- ❖ Broker and facilitator roles to advocate and activist
- ❖ Professionalism: South African Social Work Council (1970's) to South African Council for Social Service Professions (2001)

We are at the crossroads - social workers can take the initiative and demonstrate courage, leadership and great vision. But it is the only road to take - or the effect on our people will be decisive and catastrophic.



“By denying the simple facts about AIDS we recreate the mystique, the horror, and the shame and stigma.

The struggle against AIDS is essentially a struggle for basic human rights.”

(Judge Edwin Cameron, August 2002).

Are the poor entitled to the same HIV/AIDS medicines as the rich?  
Will economic, social and health apartheid around HIV/AIDS result in another uprising in South Africa?

Social workers, arm yourselves with your knowledge, your skills and your compassion. You are commissioned to serve the weak and vulnerable, the disempowered and the poor. People living and dying from HIV and AIDS are demanding your advocacy, your voice, your commitment to ending the War on AIDS.

# *Evolution of AOP in United Kingdom*

**Grew out of black and feminist civil rights movement in 1980's**

**Previously AOP had been viewed from a class analysis perspective**

**This resulted in users rights movement – late 80's**

**Empowerment theory gained momentum**

**Early 90's – new social work qual (DiPSW) – had to include AOP in curriculum**

**Backlash from the media (including Steve Lawrence investigation/commission)**

# ***Evolution of AOP in United Kingdom (present)***

**Institutional racism and gender equality began to hit forefront**

**AOP became integral part of curriculum and new social work validation of degree (2003)**

**Mental health (2003) guidelines – analyse cultural changes in modern society (multicultural Britain)**

**Gender as "private domain"**

**Still controversial**

**Balance between listening and challenging stereotypes and mythical attitudes and biases**

# Changing our teaching paradigms and pedagogy re: AOP

How do we teach, train and educate reality of service users life experiences?

How do we use innovative and creative teaching methods?

What about risk taking?

What about challenging prior methods of training?

# *New methods of AOP education and training*

Action based learning

Personal and professional growth and development

Continuous reflective practise

Scenario/case study based education

# ***New methods of AOP education and training***

Skills training and knowledge generation  
(experiential learning)

Practice based learning

Confront personal bias and prejudice

Changing roles of social work practice

## CRITICAL EDUCATION

“We are strongly motivated to work towards critical education in the belief that it is empowering education. We believe that education should involve students in efforts to identify their own problems, to critically analyse the historical, cultural and socio-economic roots of these and to develop strategies to create positive change in their lives and communities”.

Humphries 1996, Critical Perspectives on Empowerment. Pg.117)

## REFLECTIVE PRACTITIONER

“By a competent reflective practitioner I mean someone who has the knowledge and skills to ‘do the job’. Can draw on their own theoretical perspectives to contextualise what they are doing, that is, place it in its socio-economic and political context, can evaluate their interventions; and can critically reflect upon their own and others' work”.