

## Anti-Oppressive Practice



Individual opportunities are largely determined by one's social location, including the social divisions of gender, class, and ethnicity. An anti-oppressive lens allows service providers to view perceived personal problems as social problems, and seeks to eliminate social problems by reducing the inequalities faced by minority groups. This involves providing those who face social exclusion with resources to increase their social power. Agencies that implement an anti-oppressive framework cease to recreate the structures of oppression they seek to dismantle at both the service and organizational level by being inclusive of all groups and reducing hierarchies.

Burke & Harrison (1998) describe five anti-oppressive principles for practice:

- *Social differences:* Arise because of power disparities between social groups. Social divisions include race, gender, class, sexual identity, disability, and age.
- *Linking personal and political:* The individual is placed in a wider social context, and their situation is viewed in relation to social systems, including the family, peer groups, organisations, and communities.
- *Power:* Power is socially generated, and operates at the personal and structural levels. It is influenced by social, cultural, economic, and psychological factors. Differential access to resources and positions of power are allotted to different combinations of factors.
- *Historical and geographical location:* Experiences are given meaning within the context of prevailing ideas, social facts, and cultural differences.
- *Reflexivity/mutual involvement:* Consideration of how values, social difference and power affect the interactions between people.

Further, Burke & Harrison (1998) recommend that service providers have a perspective that:

- is flexible without losing focus
- includes the views of oppressed individuals and groups
- is theoretically informed
- challenges and changes existing ideas and practice
- can analyse the oppressive nature of organisational culture and its impact on practice
- includes continuous reflection and evaluation of practice
- has multidimensional change strategies which incorporate the concepts of networking, user involvement, partnership and participation
- has a critical analysis of the issues of power, both personal and structural.

ECRC acknowledges that multiple forms of oppression interact to create varying circumstances of disadvantage for community members. Service providers understand that the social reality of participants is largely determined by their social location, and reflect on how their own location impacts their practice. ECRC programs are based on a commitment to combat various forms of oppression, including the legacy of colonization and discrimination based on gender, sexual identity, income, status, and ethnicity.

Through the development and implementation of accessible programs that emphasize strengths and bring minoritized groups together, personal growth and social change is mobilized.

Power is shared with participants. Groups are client-centered with encouragement and facilitation by staff. Autonomy is paramount; ECRC is non-mandated, meaning that all services and programming are completely voluntary. Programming and services are flexible, and can be modified with input from the community. For example, the drop-in area hours were extended later into the evening to meet the needs of community members.

Programming and services are holistic at ECRC. The goal is to meet participants where they are at both physiologically and psychologically. There are very few (if any) eligibility criteria that need to be met in order to access services.

Services are available for multiple levels of needs. To address physiological need, snacks, coffee, water, washroom, bus tokens, and a warm space to relax are provided. Community members can address their need for both emotional and physical safety while accessing services. The need for belonging can be helped along through the Centre; groups offer places to connect, and non-judgemental staff is available to lend a listening ear. Esteem and self-actualization can be nurtured through programming. Experiential gains can be harnessed through arranging to volunteer in the community, while individual and group counselling sessions offer opportunities to develop positive coping habits and mental wellness strategies.

Programs bridge social divisions and unite community on the basis of a shared experience without the assumption of homogeneity. Participants of all ages, cultures, etc. are provided with space to organize and encouraged to learn from each other's diverse experiences.

Programming is representative of the community and the diverse groups within it. Women's empowerment groups provide a space for empowerment and connection with a focus on self-esteem and emotional safety. Indigenous groups center on traditional cultural practices and teachings, and groups are facilitated by Indigenous peoples who share traditional knowledge. Newcomer conversation circles provide a space in the community to connect, eat, and learn English. Translation into Arabic is provided to make the educational content more accessible to Syrian newcomers.

Input from community members is valued, and staff implements strategies to remove obstacles identified as barriers to participation. Programs and services are designed to be accessible to ensure community members have equal access to resources. All programs and services offered by the Centre can be utilized at no cost to participants. Free child minding is provided for most programming to allow parents to attend groups. The building itself is equipped with buttons that open doors and a large bathroom that can fit a wheelchair. There are no stairs, and the location is close to bus routes. For people with physical limitations, these features can make the difference between whether they access services or are prevented from doing so.

ECRC is anti-oppressive at the agency organizational level. When gaps in service are identified, programs can be implemented from the bottom-up. Staff members are empowered and encouraged to curate programs that address a community need. The composition of staff is very diverse; it is comprised of women and men who come from various cultures, are a spectrum of ages, and speak different languages. Many staff members live in the Elmwood neighbourhood. Board members are representative of the community, and are comprised of diverse characteristics: there is a spectrum of age, gender, ethnicity, citizenship, family statuses, classes, and political affiliations among members.

## Strengths-Based Framework



Strengths-based practice does not deny that problems exist. Rather, the focus is shifted from the deficits of a situation to the identification of existing strengths and resources. Strengths-based practice places adversity in the context of resilience – instead of dwelling on adverse experiences, new narratives of resilience can surface where strengths and resources can be identified. Emphasizing the problem as the problem instead of the person as the problem externalizes and depersonalizes the issue (Hammond, 2010). This change in perception and recognition of resilience and resources empowers participants to harness their inherent power. They feel better equipped to manage future challenges on their own terms instead of developing a dependence on systems (Hammond, 2010).

Hammond (2010) identified the follow core principles of strength-based practice:

- *An absolute belief that every person has potential* and it is their unique strengths and capabilities that will determine their evolving story as well as define who they are - not their limitations (not, I will believe when I see – rather, I believe and I will see).
  - *What we focus on becomes one's reality* – focus on strength, not labels – seeing challenges as capacity fostering (not something to avoid) creates hope and optimism.
  - *The language we use creates our reality* – both for the care providers and the children, youth and their families.
  - *Belief that change is inevitable* – all individuals have the urge to succeed, to explore the world around them and to make themselves useful to others and their communities.
  - *Positive change occurs in the context of authentic relationships* - people need to know someone cares and will be there unconditionally for them. It is a transactional and facilitating process of supporting change and capacity building– not fixing.
  - *Person's perspective of reality is primary* (their story) – therefore, need to value and start the change process with what is important to the person - not the expert.
  - *People have more confidence and comfort to journey to the future (the unknown) when they are invited to start with what they already know.*
  - *Capacity building is a process and a goal* – a life long journey that is dynamic as opposed to static.
  - *It is important to value differences and the essential need to collaborate* – effective change is a collaborative, inclusive and participatory process – “it takes a village to raise a child”.
- Recognition that each person “holds the key to their own transformation”; facilitators merely walk alongside participants and offer support (Hammond & Zimmerman, u.d.)
  - Emphasis on potential instead of only risk factors.
  - Shift focus from problems and hopelessness to resources and opportunities.
  - Provision of mental wellness strategies instead of focusing on pathology or illness in groups and counselling.

## References

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- Hammond, W. & Zimmerman, R. (u.d.) *A Strength Based Perspective*. Retrieved from [https://www.esd.ca/Programs/Resiliency/Documents/RSL\\_STRENGTH\\_BASED\\_PERSPECTIVE.pdf](https://www.esd.ca/Programs/Resiliency/Documents/RSL_STRENGTH_BASED_PERSPECTIVE.pdf)