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## Advocacy in Action: Theory and Practice of Social Work

*Abstract:* This article aims to present social work as a practice protecting the rights of people suffering from the processes of marginalisation. It takes as its point of departure two models of advocacy structuring multiple types of activity in this field, ranging from work with particular individuals to political engagement at the macro level. The next part offers a discussion of the results of a quantitative study (CAWI and CATI interviews) conducted among social workers from local social welfare centres in the Wielkopolska region. In the light of analysis of the obtained data, the practice of advocacy in social work emerges as one focused on providing direct assistance in the form of financial and non-financial benefits. The declared level of acceptance to facilitating collective action and macro practice of social work was lower. The results also reveal the attitudes of social workers to social rights and social problems.

*Keywords:* advocacy, social worker, social rights, community practice.

### Introduction

At the most general level, advocacy in social work practice can be defined as activity for the social rights of other people. The inseparable connection between advocacy and rights has been noted by a number of researchers (Bateman 2000; Beckett 2006), who stress the significance of such intervention for improving the ability of individuals to cope with social risk. They also emphasise its role in fostering a sense of civic empowerment among particular groups and entire communities. However, advocacy is a concept with multiple meanings—which raises doubts about different interpretations—and is thus in need of clarification. The history of practical implementation of initiatives for social rights is much longer than that of theoretical reflection on such activity (Bateman 2000: 15). As a result, the place of advocacy in a broader framework of sociological concepts and in theory of social work remains a debated issue.

Difficulties concerning the development of a coherent conceptualisation of advocacy stem not only from the fact that theory of social work is still in its early stage. Another factor at play here is social work practice, where the term advocacy tends to be used for “external” purposes and is not part of everyday lexicon. In the Polish context, activity for social rights is known as “counselling” (*poradnictwo*), a term sanctioned by the Law on Social Assistance (*Ustawa o pomocy społecznej*), which makes a threefold distinction between legal, psychological and family counselling.<sup>1</sup> The Law in question defines counselling as

<sup>1</sup> The distinction between these three types of counselling is made in Article 46 of the Law on Social Assistance of 12 March 2004 (*Ustawa z dnia 12 marca 2004 roku o pomocy społecznej*, *Dziennik Ustaw* (Journal of Laws) 2004, no. 64, item 593).

a “non-financial social welfare benefit” (*świadczenie niepieniężne z pomocy społecznej*).<sup>2</sup> In fact, however, it is only one of many forms of advocacy practice and does not correspond to the full scope of the concept. This understanding overlooks a significant aspect of advocacy—the macro practice of social work (Netting, Kettner, McMurtry, Thomas 2012), where the social worker is supposed to be the agent of social change (Kamiński 2017: 33).

This peculiar “external” nature of advocacy in social work practice also stems from the fact that until recently the function of advocate has not been regarded as part of professional roles in this field. Based on the conviction that inadequate access to justice is one of the principal causes of poverty and social exclusion (see e.g. Meene van de, Rooij van 2008; Jong de, Rizvi 2008), the term advocate is sometimes limited to those who have specialist legal knowledge. In this approach, advocates are identified as members of legal professions performing the following tasks: counselling, mediation, negotiation and other forms of non-judicial representation; litigation; legal education (e.g. through training and public education); enhancing legal empowerment of the poor in the context of legal, regulatory and policy reforms (Golub 2003: 26). However, Stephen Gollub stresses that enhancing legal empowerment of those socially excluded should be viewed as part of broader social work aiming to foster their empowerment as such (Golub 2003: 26).

On the other hand, it was already in the 1970s that Wolf Wolfensberger identified the unjustified extension of the concept of advocacy as a problem preventing its coherent definition. Writing about the “bandwagon phenomenon” whereby practically any type of social service can be referred to as some kind of advocacy, he observes:

Today, it is possible to find almost anything labeled advocacy, including some highly traditional and even highly dehumanizing services. Thus, placing a person in an institution might very well be called “institutional advocacy”; providing a person with very traditional case work counseling might be called “case work advocacy” or “counseling advocacy”; submitting a news release regarding a devalued group of people to the media might be called “public advocacy”; etc. In fact, this bandwagon phenomenon has almost the effect of perverting and undermining a genuine advocacy approach, people would like to continue doing what they have always done, but add the word advocacy to it. (Wolfensberger 2003 [1970]: 122)

The opposite tendencies outlined above—to limit advocacy to improving access to justice or, conversely, to expand it to include any social service—result in a terminological impasse that needs addressing.

This article aims to provide some answers concerning the status of advocacy in social work in two different dimensions. Firstly, I discuss theoretical models that adequately capture the variety of advocacy practices: one proposed by Paul Freddolino and his collaborators (Freddolino et al. 2004), who classify them according to the pattern of control over the ends and the means of such intervention, and the other—by Jack Rothman (2007), who considers their nature in community and community practice. Secondly, the status of advocacy in social work can also be captured by providing a summary review of attitudes of social workers to its nature and functions, and presenting their opinions on these issues. The study which I conducted for the purpose used a bottom-up perspective focusing on the experiences of social workers in Poland. In other words, frontline workers described what

<sup>2</sup> Article 36.2 of the Law on Social Assistance of 12 March 2004 (Ustawa z dnia 12 marca 2004 roku o pomocy społecznej, *Dziennik Ustaw* (Journal of Laws) 2004, no. 64, item 593).

they saw as the main areas of their support to the needs/rights of individuals, especially those on the social margins.

### **A Model of Control over the Means and Ends of Advocacy**

Paul Freddolino and his collaborators propose a model of advocacy in which they take into consideration the responsiveness of social workers to various symptoms of social injustice on the one hand, and the ability of people facing social risks to cope with marginalisation on the other (Freddolino et al. 2004: 120). Their model rests on the distinction between the ends of advocacy and the means to achieve them. Although the authors do not expand on the operationalisation of these categories, it should be assumed that the former can be identified with the protection of social rights, and the latter—with the resources that serve to achieve particular needs. Depending on the context, the ends and the means of advocacy can be controlled by professionals or by people suffering from marginalisation. In view of these distinctions, the model includes four different traditions of advocacy in social work practice: protecting the vulnerable (the means and the ends of advocacy controlled by the professional), creating supports to enhance functioning (the ends controlled by the professional, the means—by the recipient), protecting or advancing claims or appeals (the means controlled by the professional, the ends—by the recipient), fostering identity and control (the means and the ends controlled by the recipient). The section below provides general observations concerning these attitudes and the respective advocacy practices they underlie.

Protecting the vulnerable is a practice tradition observed in the case of a relatively small category of recipients: those who are characterised by deficits in personal and environmental resources, the former identified as ability to cope with problem situations, and the latter—as family, friends and institutions of social welfare in the community (Freddolino et al. 2004: 121). In this form of advocacy, not only goods and services, i.e. resources, but also the aims of the intervention are controlled by the professional. Freddolino et al. aptly stress that this pattern should only be limited to the recipients whose disabilities impede their ability to act and live independently (Freddolino et al. 2004: 121). The tradition of protecting the vulnerable involves the practice referred to as best interest advocacy, whereby the social worker not only provides immediate assistance, but also operationalises its aims, which makes him/her fully responsible for the protection of fundamental rights of the recipient. This requires independence of the social worker, the best advocate, from institutions providing assistance (Freddolino et al. 2004: 126): acting in the best interest of his/her client, and not that of the institutional provider, he/she needs to withstand potential political or institutional pressure. On the other hand, in this pattern the advocate is also autonomous when it comes to the preferences of the recipient, which he/she can disregard on the grounds of best interest.

The tradition of creating supports to enhance functioning, in turn, is identified as developing high-quality services to tackle the processes of social marginalisation. In this pattern, advocacy aims to provide effective services to people facing social risks rather than perform the protective function. The key task of the professional is to manage the resources

of social welfare by providing access to active forms of support. Importantly, however, the decision about the choice of the form of support and the extent of assistance rests with those who experience particular social problems. Freddolino et al. refer to this type of action as client-centred advocacy, which is not only focused on organising particular services answering the needs of particular recipients, but also involves the macro practice of social work—alerting decision makers to deficiencies in the system of support to people in need and lobbying for particular social reforms.

Another tradition of advocacy distinguished by Freddolino et al. is that of protecting or advancing claims or appeals, which in practical terms means citizen's and legal advice. The social worker has knowledge on the rules of access to socially valued goods and services, hence he/she has control over the means to achieve the ends. In this type of practice, advocacy is about the transfer of theoretical and practical aspects of this knowledge to the recipient who lacks it and is thus subject to marginalisation. In this way, the attendant enabling advocacy is focused the process of civic education.

Finally, the fourth tradition shaping advocacy is one of fostering identity and control, implementing the idea of empowerment. In practical terms, it involves attempts to achieve a balance in relations between the professional and the recipient. This balance is created by engaging in continuous dialogue—both between partners within the system and with the social environment—concerning the quality of the system and the services it provides as well as the needs and challenges in this respect (Brye, Preston-Shoot 1995: 176). In consumer-controlled advocacy, which stems from this approach, both the ends of action that is taken and the means to achieve them are controlled by the recipient. This pattern of advocacy requires the professional to adopt the perspective of the recipient, which, after Hubert Kaszyński, can be viewed as one adopted in clinical social work (Kaszyński 2016: 63).

The value of the model proposed by Freddolino and his collaborators is that it goes beyond the institutional perspective. In this approach, advocacy as such is not essentially limited to the engagement of professionals applying standardised instruments, although this type of practice is certainly included. Rather, the model stresses engaging those who experience social problems in activity aiming to improve their situation in terms of social rights. It is also important that different types of advocacy practices are not mutually exclusive, as they can be applied by the same institution, depending on the context. The choice of practice to be implemented in a particular case mainly depends on such factors as the category of recipient (the level of his/her independence and ability to cope), the type of needs which are reported or the nature of rights which are pursued, and the availability of particular resources in terms of institutional support and staff.

### **A Model of Community Practice**

The other framework considered in this article is one proposed by Jack Rothman, who interprets the nature of advocacy somewhat differently. Rothman has been studying issues of community social work and community organisation since the 1960s. His classic typology of advocacy practices from almost half a century ago was based on a distinction between three types of engagement referred to as *locality development*, *social planning* and *social*

action (Rothman 1983). In 2007 Rothman modified his model and accordingly changed the terms for the three intervention approaches, which he decided to rename as *community capacity development*, *planning/policy* and *social advocacy*, respectively (Rothman 2007).

Although this article focuses on social advocacy, the other two approaches also require consideration. For while advocacy can function as a “pure” form of intervention, it is far more often the case that it appears in conjunction with the other two basic types (community capacity development, planning/policy), which has a great impact on the nature of support that is provided. What needs to be added is that although those other basic types can also form hybrid combinations, they are beyond the scope of this study and are not discussed here.

Let us, then, proceed to the description of the three basic patterns of community practice in order to make it possible to capture their hybrid forms which include social advocacy as their component. As distinguished by Rodman, the first one is planning/policy, a type of practice based on analysis of empirical data in order to diagnose facts, propose reforms and introduce particular solutions (Rothman 2007: 12). Secondly, community capacity development, which stems from the assumption that people affected by similar problems can become agents of social change if they are empowered with skills and knowledge to overcome them by way of cooperation and solidarity (Rothman 2007: 12). Thirdly, there is social advocacy, which Rothman sums up as follows:

Social advocacy deems the application of pressure as the best course of action to take against people or institutions that may have induced the problem or that stand in the way of its solution—which frequently involves promoting equity or social justice. When interests clash in this way, conflict is a given. (Rothman 2007: 12)

Although Rothman claims that advocacy as community intervention is more often encountered and more effective in a hybrid form (Rothman 2007: 30), it can also manifest itself in public space in the “pure” form of social action. It is interpreted as intervention against oppressive institutional structures whose decision makers are not ready or willing to introduce changes and thus petrify an unjust social system. In its basic formula, advocacy is an offensive rather than defensive strategy, with preference given to active tactics and making demands rather than to mediation or, as Rothman puts it, “pleading” with political decision makers. This type of activity is often pursued by minority groups who cannot make their discourse heard in the space of public debate: their representatives have limited possibilities when it comes to conventional methods of publicising their message—providing alternative expert reports, building advocacy alliances or funding campaigns. Consequently, they resort to confrontational tactics, such as marches, picketing, mass meetings and various forms of civil disobedience (Rothman 2007: 29).

The origins of advocacy in the form of social action go back to the rise of American activist organisations in the 1960s, including the welfare rights movement, demanding better access to social welfare for people facing social risks (Pyles 2008: 45), and the disability rights movement, demanding opportunities for independent life for the disabled (Fleischer, Zames 2001: 33–48). One pioneer of social action was Saul Alinsky, an American social activist of the 1960s, who not only created mass organisations of people suffering from poverty or members of ethnic minority groups, but also authored a handbook of sorts for organisers of protests and demonstrations (Alinsky 1989).

Table 1

**Basic Strategies of Community Intervention**

	1 Planning/Policy	2 Community Capacity Development	3 Social advocacy
1 Planning/Policy	1.1. Predominant Planning/Policy <i>Rationalistic Planning</i>	2.1. Capacity Development with Planning/Policy <i>Planned Capacity Development</i>	3.1. Social Advocacy with Planning/Policy <b><i>Social Reform</i></b>
2 Community Capacity Development	1.2. Planning/Policy with Capacity Development <i>Participatory Planning</i>	2.2. Predominant Capacity Development <i>Capacity Centered Development</i>	3.2. Social Advocacy with Capacity Development <b><i>Solidarity Organizing</i></b>
3 Social advocacy	1.3. Planning/Policy with Advocacy <b><i>Policy Advocacy</i></b>	2.3. Capacity Development with Social Advocacy <b><i>Identity Activism</i></b>	3.3. Predominant Social Advocacy <b><i>Social Action</i></b>

Source: Jack Rothman (2007) Multi Modes of Intervention at the Macro Level, *Journal of Community Practice* 15: 4.

As mentioned above, advocacy is most often encountered as a component of hybrid strategies of community intervention. Table 1 presents the nine modes distinguished by Rothman, with four hybrid ones involving advocacy (3.1, 3.2, 1.3, 2.3, marked in bold).

In view of the focus of this article, the following section describes mixed types of community intervention in which advocacy is the dominant or, conversely, secondary component. Considering the former, they include two possible hybrids: social reform, a combination of social advocacy and planning/policy; and solidarity organising, i.e. social advocacy in conjunction with community capacity development. Rothman does not devote particular attention to theoretical reflection on these practices and tends to focus on their examples in the American social context. In doing so, he stresses that they are viewed with more sympathy in broader society than the “pure” form of social advocacy (i.e. social action). They are also more effective owing to their non-militant nature (Rothman 2007: 30).

The social reform practice of advocacy mainly involves providing expert knowledge in the process of social planning. Rothman aptly observes that “some militants have come to realize that they need to take a tactical turn, which involves an approach continuing a deep commitment to social justice, but combining it now with the measured use of data-infused planning methods” (Rothman 2007: 31). Indeed, reliable information based on facts and statistics can not only support better public policy planning, but also raise general awareness of existing problems and challenges for society they involve. As can be seen, then, although this kind of practice is offensive rather than defensive, which is typical of advocacy, it does not mean pursuing goals by engaging in direct confrontation, as is the case of social action, but by alerting public opinion to deficiencies in the system of support or to violation of social rights.

Advocacy combined with community capacity development, in turn, is referred to as solidarity organising. Rothman provides some examples of this practice, including trade unions and feminist movements. All such interventions share the same feature: they ap-

proach solidarity as a resource that can be effectively employed to tackle the problem of social marginalisation. This type of advocacy aims to build a community which will be able to solve social problems experienced by its members. Practice of this kind is analogical to what Freddolino and his collaborators describe as consumer-controlled advocacy, in which the professional is required to adopt the perspective of the recipient when it comes to the identification of both the ends and the means to achieve them (Freddolino et al. 2004: 127).

Having presented advocacy in its “pure” form as well as hybrid types in which it plays the dominant role, it is also worth noting the varieties of community intervention that stress their advocacy function, but at the same time have a different key component: planning/policy and community capacity development. Planning/policy, which is mainly based on analysis of empirical data, combined with social advocacy makes up a practice of intervention that Rothman calls policy advocacy. It aims to provide support to groups which are subject to the process of marginalisation, such as women, children, poor people, ethnic minorities, gays and lesbians, people with disabilities (Rothman 2007: 20). This type of intervention involves action at the macrostructural level: making efforts to introduce legislative, organisational and political changes protecting the rights and interests of the most powerless categories of citizens. Consequently, it is a form of exercising political and legislative power (Pyles 2008: 127) with a view to ensuring an equitable redistribution of goods and services, and counteracting all forms of discrimination. Among the agents involved in this type of practice are people working for institutions of social welfare and staff members of agencies planning development policies at the local or regional level. Their engagement not only requires a high level of organisational and political skills (Jansson 2008: 14), but often also entails going beyond the established practices of the institutions they represent (Rothman 2007: 21).

Finally, the last type of community intervention to be considered here is a combination of community capacity development and social advocacy as a secondary component. The hybrid practice thus formed is identity activism (Rothman 2007: 28), which is particularly important in the case of heterogeneous communities, where groups with a relatively smaller discursive, organisational, political or, simply speaking, financial potential have more limited opportunities to articulate their rights and interests. This practice involves developing community potential by stressing the identity of particular groups which make it up, their specific needs and the practices of social exclusion. One example of such activism mentioned by Rothman are some gay movements, where the principal aim is to develop a sense of pride in gay identity, with attempts to achieve particular group interests only in the background (Rothman 2007: 28). In spite of similarities between identity activism and the practice of solidarity activism presented above, they differ in terms of their aims. In the case of the latter, a sense of community is a valuable resource in the fight for equal rights of marginalised groups. In identity activism, however, developing in-group solidarity is an autotelic value, a key factor in building strong communities based on diversity of different groups that function within them, and does not necessarily translate into pursuit of particular political aims.

An outline of different patterns of advocacy presented above makes it possible to observe a multitude of practices aiming to protect the social rights of citizens. However, it is worth considering to what extent advocacy is part of everyday practice of frontline social

workers. The choice of this professional category for a research study has been motivated by the fact that it is social workers who represent the rights and interests of citizens—particularly those facing social risks—in their everyday practice. Social workers can thus be viewed as part of a broader category, which Neil Bateman refers to as “welfare rights specialists” (Bateman 2006: 2). Social work focused on advocacy, in turn, may be described as inclusive civic practice which helps to empower those who often live on the margins of the community (Kaźmierczak 2006: 189).

## Methods

The following part of this article presents the results of a quantitative study of social workers employed at local social welfare centres (*ośrodek pomocy społecznej*), conducted on a regional sample in the Wielkopolska region, the second largest first-level administrative unit in Poland in terms of area, and the third one in terms of population. The respondents were “frontline workers” (Rymsza 2012: 12) performing their duties in the field. Considering that the study only aimed to capture opinions of those professionals who are in direct contact with recipients, it excluded consultants, supervisors, administrative staff and so on. Aiming for the highest possible representativeness, the study was originally planned to include staff members of all 226 such centres operating in the region. As it turned out, however, the survey was conducted in 218 of them. The centres which refused to participate included both those located in urban centres (with the population of about 100,000) and rural areas.

The data was collected using a mixed-mode survey design, a procedure whereby the same information is obtained from different respondents by means of different techniques. In this case, 100 interviews were conducted over the telephone using the computer-assisted telephone interview (CATI) technique. Those who refused to take part in the telephone survey were offered an opportunity to complete the questionnaire online (computer-assisted web interview, CAWI), which brought answers from representatives 118 local social welfare centres. Bearing in mind all the weaknesses of such a procedure, the decision to use it was motivated by the ease of access to the population under study offered by CATI and CAWI techniques. Most importantly, the design of the tool—a limited number of survey questions, mainly phrased as statements rather than interrogatives, no open-ended questions—also favoured the choice of CATI and CAWI interviews as particularly suitable in the case of this project.

Before proceeding to the main analysis of empirical material, I examined the level of differences between CATI and CAWI interviews as regards the correlation of particular observed variables. In the case of statements concerning attitudes to, and opinions on, advocacy, the maximum difference was between 2 and 3 percentage points. In the case of statements on the types of rights which social work needs to protect, in turn, it did not exceed 4 percentage points.<sup>3</sup> It is worth noting, however, that in spite of those differences

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<sup>3</sup> In CAWI interviews the respondents more often indicated the rights of elderly people as ones that social work particularly needs to protect in the current Polish context. In this case, the difference was the largest: 4 percentage points.

between CATI and CAWI interview data the distribution of answers in the subsamples did not differ from the overall sample.

### **Advocacy in Social Work: Opinions of Professional Helpers**

What needs to be clarified at this point is how advocacy was defined for the purposes of the quantitative study under discussion. Based on the models outlined above, it was approached in the context of tasks of social work apparent in the dimensions listed below; they were phrased as the following sentences presented to the respondents:

- (a) Social work<sup>4</sup> means helping people in need to gain more control over their lives by facilitating access to services and benefits (e.g. helping them to write applications, informing them about the rights they have),
- (b) Social work means alerting decision makers to deficiencies in the system of support to people in need,
- (c) Social work means lobbying for changes in social welfare legislation in the interest of people in need,
- (d) Social work means helping people in need to contact groups fighting for their rights,
- (e) Social work means helping to create groups/organisations fighting for the rights of people in need,
- (f) Social work means providing (financial/organisational) support to groups fighting for the rights of people in need.

In view of the data collected in the survey, it is possible to conclude that social workers accept advocacy as a function of social work. On the other hand, however, the results indicate a considerable diversity of opinions as regards their acceptance of particular types of advocacy. **Table 2** presents the distribution of answers to statements concerning social work in the context of tasks important from the point of view of advocacy.

First of all, it needs to be noted that the respondents were required to make a choice between binary replies to those statements (“I agree”/“I disagree”), and that some of them found it impossible to make such a clear-cut choice.

In terms of the threefold classification of the basic dimensions of advocacy provided above, the overwhelming majority of the respondents viewed it as helping people in need to gain more control over their lives by facilitating access to services and benefits. Assistance of this kind can be referred to as direct advocacy at the micro level. It reflects the idea of empowerment, which in most general terms can be summed up as raising the awareness of disadvantaged people and strengthening their voice in the support process. This vision of advocacy was shared by 85.3% of those surveyed, with 11.5% expressing the opposite view. Considering the overall results of the study, this perception of social work in terms of advocacy was the dominant one.

The declared level of acceptance to the macro practice as a function of social work was lower. This type of function includes alerting decision makers to deficiencies in the system

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<sup>4</sup> The pilot survey indicated that the overwhelming majority of social workers were not familiar with the term “advocacy” (*rzecznictwo*). Consequently, the statements used in the survey employed a broader term “social work” (*praca socjalna*), with a particular aspect of advocacy it involves specified further in the sentence.

Table 2

**Social Workers' Opinions on the Functions of Social Work in Protecting the Rights of Marginalised People**

Social work means helping people in need to gain more control over their lives by facilitating access to services and benefits (e.g. helping them to write applications, informing them about the rights they have)	I disagree	25	11,5%
	I agree	186	85,3%
	No answer	7	3,2%
	Total	218	100,0%
Social work means alerting decision makers to deficiencies in the system of support to people in need	I disagree	54	24,8%
	I agree	129	59,2%
	No answer	35	16%
	Total	218	100,0%
Social work means lobbying for changes in social welfare legislation in the interest of people in need	I disagree	62	28,4%
	I agree	104	47,7%
	No answer	52	23,8%
	Total	218	100,0%
Social work means helping people in need to contact groups fighting for their rights	I disagree	46	21,1%
	I agree	134	61,5%
	No answer	38	17,4%
	Total	218	100,0%
Social work means helping to create groups/organisations fighting for the rights of people in need	I disagree	71	32,6%
	I agree	101	46,3%
	No answer	46	21,1%
	Total	218	100,0%
Social work means providing (financial/organisational) support to groups fighting for the rights of people in need	I disagree	86	39,4%
	I agree	90	41,3%
	No answer	42	19,3%
	Total	218	100,0%

Source: The author's own study, N = 218.

of support to those in need, a task accepted by 59.2% and excluded by 24.8% of the respondents. Lobbying for changes in social welfare legislation in the interest of disadvantaged people, in turn, was identified as part of the role of the social worker only by 47.7%, with those who disagreed counting about a quarter (23.8%).

In the third block of statements presented to the respondents advocacy was interpreted as facilitating collective action by lending support to community and organisational involvement. On the one hand, the survey participants displayed a rather high level of acceptance to facilitating contact between the disadvantaged and groups fighting for their rights: 61.5% viewed this as part of social work. On the other hand, they were more reserved about involvement of social workers in such initiatives in the organisational sense. Only 46.3% agreed with the statement that social work also means forming groups/organisations fighting for the social rights of people in need; those who disagreed counted 32.6%. Even lower level of acceptance was recorded in the case of financial/organisational support of such organisations—with 41.3% in favour and 39.4% against.

At this point, it is worth noting a relatively high percentage of those who did not give their opinion on some statements. This is particularly noticeable in the case of statements according to which social work involves lobbying for changes or providing support to groups fighting for their rights. A tentative interpretation of this finding could suggest that

some social workers have a low level of awareness when it comes to their tasks related to facilitating collective action or social lobbying. This hypothesis, however, would require verification in the course of in-depth quantitative studies.

An analysis of correlations between different variables indicates that attitudes to particular types of advocacy are only correlated with the age of the respondents. As observed, the conviction that advocacy involves facilitating as well as financial and organisational support to organisations fighting for social rights is progressively higher in older age groups. What should be noted, however, is that these correlations have a relatively low level of significance: 0.17 (*probability value* < 0.05) and 0.15 (*probability value* < 0.05), respectively. Correlation analysis did not reveal any other variables (such as the size or type of the centre) that would have a significant impact on the perception of different advocacy practices.

### Between Policy and Community Engagement

The opinions on advocacy practices listed above reveal certain more general attitudes to the role of social work in the protection of social rights of citizens. A factor analysis of statements made it possible to distinguish three major approaches to social work as advocacy practice, presented in [Table 3](#).

Table 3  
Social Workers' Approaches to Social Work as Advocacy Practice

	Type	
	Community support	Monitoring/political
Social work means alerting decision makers to deficiencies in the system of support to people in need		-.836
Social work means lobbying for changes in social welfare legislation in the interest of people in need		-.812
Social work means helping people in need to contact groups fighting for their rights	.746	
Social work means helping to create groups/organisations fighting for the rights of people in need	.849	
Social work means providing (financial/organisational) support to groups fighting for the rights of people in need	.820	

Source: The author's own study, N = 218.

Extraction method: Principal Component Analysis.

Rotation method: Oblimin with Kaiser Normalisation.

As can be seen, the empirical study under discussion revealed three general patterns. Firstly, the monitoring/political approach, whereby social workers are convinced that their role involves monitoring the system of social welfare and alerting decision makers when the needs of people it serves are not adequately addressed. The approach in question also involves readiness for political engagement—lobbying for changes in social welfare legislation, which can be referred to as legislative advocacy. This type of practice focuses on the strategies of making an impact on the legislative process and budget negotiations with

a view to protecting the interests of people, both individuals and groups, who are excluded from power structures<sup>5</sup>.

The factor analysis under discussion also revealed the second type, which I refer to as the community support approach—some social workers identify advocacy as lending support to grass-roots civic initiatives. This approach is apparent in the perception of social work as a practice that includes providing financial and organisational assistance to groups fighting for the rights of broadly interpreted minority and disadvantaged populations. It also includes facilitating contact between people in need of support and such groups.

It is worth stressing, however, that the two types identified above (and presented in [Table 3](#)) only explain 60% of the variance. The remaining 40% is explained by the statement that social work means helping people to gain more control over their lives. Consequently, it can be considered the third, and dominant, type of approach to the functions of social work, as confirmed by the percentage distribution presented above.

### Attitudes to Social Rights

The key element of advocacy is sensitivity to social issues, manifested as attentiveness to social rights and social problems. It is therefore quite natural to consider the opinion of social workers on what rights come as their priority, as their efforts in these areas become the basis of their civic engagement.

The study relied on the conceptualisation of social rights employed in the document known as the European Pillar of Social Rights ([European Commission 2017](#)).<sup>6</sup> As phrased in the questionnaire, then, the names given to those rights or their categorisation do not come from the author of the study but follow the pattern adopted by EU agencies, which is based on a compromise made by member states in a particular economic, social and political context.

The respondents were asked to give their opinion on the rights from the third category listed in the document—social protection and inclusion—as they best fit in with the nature of tasks performed by social welfare agencies. The survey question concerning this issue was as follows: “Please indicate three rights which in your opinion social work particularly needs to protect in the current Polish context.” The distribution of answers to this question is presented in [Table 4](#).

According to over 80% of the respondents, the main task of social work is to guarantee elderly people access to resources that ensure living in dignity. This choice was followed by childcare and support to children (57.5%), and minimum income benefits to people lacking sufficient resources and thus facing poverty (53.9%), which was ranked as the third (and the last with the proportion of over 50%).

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<sup>5</sup> Legislative advocacy includes such principal tasks as: drafting budget and legislative proposals and monitoring their progress, informing public opinion about the legislative process concerning regulations which have a direct impact on their rights and interests, and engaging legal circles in important social issues ([Reisch 2015: 921–922](#)).

<sup>6</sup> This document proclaims the rights of EU citizens and classifies them into three categories: equal opportunities and access to the labour market, fair working conditions, social protection and inclusion.

Table 4

**Social Workers' Opinions on the Types of Rights Which Social Work Needs to Protect**

Type of right	% of answers
Old age income and pensions	80.8%
Childcare and support to children	57.5%
Minimum income	53.9%
Inclusion of people with disabilities	20.1%
Health care	20.1%
Housing and assistance for the homeless	16.9%
Long-term care	15.1%
Unemployment benefits	5.9%
Access to essential services	5.0%
Total	100.0%

Source: The author's own study, N = 218.

Protection of other rights was identified as a key task of social work far less frequently. The right of people with disabilities to be included in society was selected only by one in five of the respondents (20.1%), just like the general right of timely access to quality health care. Only 16.9% of those asked prioritised protection of the rights of the homeless, and 15.1%—community-based long-term care services.

In view of the results of this empirical study, what can be clearly noticed is the conviction that the principal task of social work is to guarantee the minimum standard of living to elderly people. This is followed by childcare and support to children, and minimum income benefits. Such issues as inclusion of people with disabilities or the homeless came much lower on the list of priorities.

## Conclusion

The aim of this article was to discuss social work as a practice protecting the rights of people suffering from the processes of marginalisation. The two theoretical frameworks presented in the first part indicate a variety of different types of intervention that make up what can be referred to as advocacy: Paul Freddolino and his collaborators classify them according to the pattern of control over the ends and the means of such intervention, and Jack Rothman considers their nature in community and community practice. The aim of this article, however, was not only to present the models of advocacy as an ideal theoretical framework (Race 2003: 126), but also to confront them with the opinions and attitudes of Polish social workers as helping professionals (Rymsza 2012).

The study discussed in this article was conducted among representatives of local social welfare centres, which in the Polish context are bureaucratic institutions providing social services to local communities. In this way, it presents civic involvement of local administration staff performing public tasks. This stream of empirical research goes against the current sociological trend of looking for social activism mainly in grass-roots social movements (Raciborski 2011: 38).

By way of conclusion, it is worth making some general observations on how social workers in Poland perceive the nature of advocacy in social work. The majority of the respondents view advocacy involvement in terms of micro practice—helping people in need to gain more control over their lives. Accordingly, they also identify facilitating access to services and benefits as their principal task. They are reluctant to take on political roles and publicly articulate the interests of groups which are marginalised in society. Advocacy interpreted as organisational or financial support to groups which pursue the interests of minority and disadvantaged populations is even less popular. Another question is social workers' attitude to social rights and their opinion as to which of them require particular protection. What comes as their priority is old-age care and childcare as well as minimum income benefits, particularly to elderly people. The rights concerning social integration and involvement of marginalised groups are far from the top of the list.

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