## SOCIAL WORK AND COMMUNITY DEVELOPMENT



19th April 2023











#### **Foreword**

We probably all experience community in different ways. For me, I find community in my singing group, in my book club, with my friends, with my sea swimming buddies and when I go back to my hometown of Armagh. All of those experiences give me an important sense of rootedness, connection and belonging.



The purpose of social work is to improve and safeguard social wellbeing and a key aspect of social wellbeing is the relationships we have with each other, a sense of belonging and a home where we feel safe. Supportive communities can foster all of those and contributing to the development and connectedness of such communities is an important aspect of social work.

It's understandable that in the midst of all the pressures that social workers face, we can feel that we don't have time or space to do anything more than individual, often quite transactional, interventions. However, this Reflections edition will describe how community development can belong in everyone's practice. It will also encourage you to discover the transformative impact on the lives of the people we support when we work in this way. This Reflections edition assesses the relationship between social work and community development in Northern Ireland. The first section looks briefly at community development and social work and then sets out the context in which this move towards the promotion of a community social work approach is occurring. Against this backdrop, a number of creative and inspiring case studies are offered which illustrate the diversity of community development approaches and how social workers are already getting involved. Lessons learnt from the experience of those involved are highlighted, together with some practical tips about how you can embrace a community development approach to your practice.

The range of voices captured in this edition reflects the commitment to community development in social work practice across Northern Ireland. I encourage you to read it and apply the knowledge and experience of others to your everyday practice.

Arie Marrison

Aine Morrison
Chief Social Worker



Community development supports people within their communities to collectively identify issues and support the achievement of citizen lead initiatives. Community participation is emphasised to find local solutions to local problems, ensuring people can join in and influence decision making processes. Community development does not view a community as a blank page that needs to be filled, but acknowledges a range of skills, strengths, knowledge, experiences, and previous successes that are present and can be drawn upon to find local sustainable solutions to the challenges faced.

"This long-term process starts from people's own experience and enables communities to work together to:



- ✓ Identify their own needs and actions
- ✓ Take collective action using their strengths and resources
- ✓ Develop their confidence, skills, and knowledge
- ✓ Challenge unequal power relationships
- ✓ Promote social justice, equality, and inclusion

in order to improve the quality of their own lives, the communities in which they live and societies of which they are a part." (Federation of Community Development Learning, 2015, p.5).

Often referred to as "For the people by the people," community development is a bottom-up approach. The role of a social worker, therefore, is not as a leader or director, but as a facilitator or assistant, enabling and supporting communities to engage in collective action to shape their own future.

Ultimately it is the role of the community, not the worker, to identify and prioritise issues and determine their own goals. The differences between community-based work and community development are distinguished by who holds the decision-



making power, how issues are identified, expected timelines, and intended outcomes as summarised in the table below.



### **Community-based work**

An issue or problem is defined by agencies and professionals who develop strategies to solve the problem and then involve community members in these strategies. Ongoing responsibility for the problem may be handed over to community members and community groups

### **Community development**

Community groups are supported to identify important concerns and issues, and to plan and implement strategies to mitigate their concerns and solve their issues.

### **Characteristics:**

- Decision-making power rests with the agency
- The problem or issue is defined by the agency
- There are defined timelines
- Outcomes are pre-specified, often as changes in specific behaviours and knowledge levels.

#### **Characteristics:**

- Power relationships between agency and community members are constantly negotiated
- The problem or issue is first named by the community, then defined in a way that advances the shared interests of the community and the agency
- Work is longer term in duration
- The desired outcome is an increase in the community members' capacities
- The desired long-term outcomes usually include change at the neighbourhood or community level.

(Table adapted from Labonte, 1999; as cited in DoH, 2018a, p. 8).

Community-based work and community development, however, can occur on a continuum and practice can move across this spectrum as a result of training. funding, roles, responsibilities and capacity. The values, attitudes and approaches which underpin community development can still influence community-based work, but practical constraints such as resources, time, skills, and opportunity may prevent a pure community development approach being employed.





The definition of community is not limited to geographical location nor restricted to a physical space such as a neighbourhood, school, workplace, or sports ground (Community Development Learning, 2015). Changing perceptions of time, space, and place have influenced the ways in which people interact with an increased role of technology and the use of the internet in our everyday lives (Yerbury, 2011). In response to the global COVID-19 pandemic, widespread lockdowns, social distancing measures, and restrictions to in-person gatherings, our understanding of community has been extended through the growing use of online platforms and technology to enable continued connections and meaningful contact with friends. family, colleagues, and peers.

Community, therefore, should be understood as a group who share common interests, experiences, identity, or a sense of solidarity, whether this be face-to-face or virtually (Yerbury, 2011). For example, this could include an online support forum for parents of looked after children, a walking group for individuals living with multiple sclerosis, a monthly coffee catch-up for people living with dementia, or an afterschool club for young people with additional learning needs. Members of communities, however, are diverse. Just like in a family, a book club, a study group, or a sports team, perspectives can differ, values can shift, and disagreements can occur, while each member has their own strengths and lived experiences.



"THERE IS NO BLUEPRINT,
OR ONE SIZE FITS ALL APPROACH TO
COMMUNITY DEVELOPMENT, AS COMMUNITIES ARE
DYNAMIC, DIVERSE, AND CONTINUOUSLY BEING
RECREATED. TO UNDERSTAND THE MEANING
OF COMMUNITY DEVELOPMENT ONE MUST FIRST
UNDERSTAND THE MEANING OF COMMUNITY."

(Phillips and Pittman, 2009).







Although social work and community development are both established professions and academic disciplines with their own codes and practice standards, there is a similar value base between the two. As seen in the international professional definitions, the shared values of social justice, human rights, and empowerment highlights

the close relationship between social work and community development (IACD, 2018; IFSW, 2014). The International Federation of Social Workers promotes engagement with people and structures to improve wellbeing and address individual and social issues at a local, regional, or international level. Similarly, the International Association of



Community Development promotes engagement with people and structures through communities "whether these be of locality, identity or interest, in urban and rural settings" (IACD, 2018).

The international social work definition identifies social change as a key purpose of the profession, and the community development definition goes further to incorporate participative democracy, sustainability, and economic opportunity. The professional connection to community development is further evident in the British Association of Social Worker's Code of Ethics which highlights the principles of human rights and social justice, expanded through a responsibility to challenge all forms of oppression, and enhance participation and empowerment by focusing "on the capacity and strengths of all individuals, groups and communities" (BASW, 2021). These principles map closely with the UK Community Development National Occupation Standards (Federation of Community Development Learning, 2015; due to be updated in 2023) and the All of Ireland **Endorsement Body for Community Work Education** and Training Standards (AIEB, 2016) where social justice, equality, anti-discrimination, empowerment, collective action, and learning and working together are explicitly stated as the values which underpin practice.

Celebrating strengths, challenging injustices, promoting human rights, respecting diversity, and working collectively are central to both professions, all be it applied at different scales and in different contexts.

Despite these similarities between the professions, the impact of austerity, bureaucracy, and managerialism since the 1990s has constrained social work, with an increased focus on paperwork, risk management, and standardisation (British Association of Social Workers, Irish Association of Social Worker, Northern Ireland Social Care Council & Coru, 2020; Munro, 2011; Northern Ireland Association of Social Work, 2012; Pascoe, McGinn & Waterhouse-Bradley, 2022). Pulling social work away from community development approaches, a one-to-one case work model has pre-dominated practice for more than two decades.

Turbett (2020) argues that mainstreaming community development in social work requires the promotion of methods based on relationships, partnerships, early intervention, and bottom-up collective action to tackle inequality and disadvantage. The COVID-19 pandemic has created new opportunities for the profession to reconnect with community development, with social workers engaging in local capacity building initiatives, establishing new systems to support volunteer run projects, assisting with the distribution of essential items including food parcels, and facilitating community solidarity (Truell & Crompton, 2020).

This is not limited to the pandemic, as on-going global challenges including natural disasters, conflict, and poverty continue to effect social work practice, creating further opportunities to strengthen the connection to community development.

"SOCIAL WORKERS SHOULD
PROMOTE THE FULL INVOLVEMENT AND
PARTICIPATION OF PEOPLE USING THEIR
SERVICES IN WAYS THAT ENABLE THEM TO BE
EMPOWERED IN ALL ASPECTS OF DECISIONS
AND ACTIONS AFFECTING THEIR LIVES."

(BASW, 2021)

"SOCIAL WORKERS SHOULD FOCUS ON THE CAPACITY AND STRENGTHS OF ALL INDIVIDUALS, GROUPS AND COMMUNITIES AND THUS AIM TO CHALLENGE STIGMA AND PROMOTE EMPOWERMENT."

(BASW, 2021)



Innovative community development approaches were established during 'The Troubles' where social workers were required to navigate complex relationships between their practice, the contested State and civil society groups, engaging in challenging, risky, and abnormal spaces (Heenan, 2004; Heenan & Birrell, 2011). In contrast, however, the impact of the 'The Troubles' also led some social workers and teams to form a detachment from communities, creating distance from civil society to avoid associations with sectarian divisions and depoliticising their positions by focusing more on client-based work (Pinkerton & Campbell, 2002). Much has been written on community development during this period, and we recommend exploring the work of Das, O'Neill, and Pinkerton (2016) and Duffy, Campbell and Tosone (2019) for a more comprehensive review.

In the current context of Northern Ireland, the relevance of community development in social work can be seen through the adoption of the international definition of social work in the Northern Ireland Social Care Council (Social Care Council) Standards of Conduct and Practice (2015). The Social Care Council has further promoted community development through the professional accreditation of the Social Work and Community Development Approaches postgraduate programme delivered in partnership with Ulster University and the Department of Health (Northern Ireland Social Care Council 2022a), and the showcasing of a range of community development projects engaged in by social workers participating in the course through an on-line lunchtime seminar and the creation of a Community Development Resource on the Social Care Council Learning Zone (Northern Ireland Social Care Council 2022b).

In recent years, a resurgence and mainstreaming of community development approaches can be seen through the actions of the Department of Health (DoH). In the Social Work Strategy for Northern

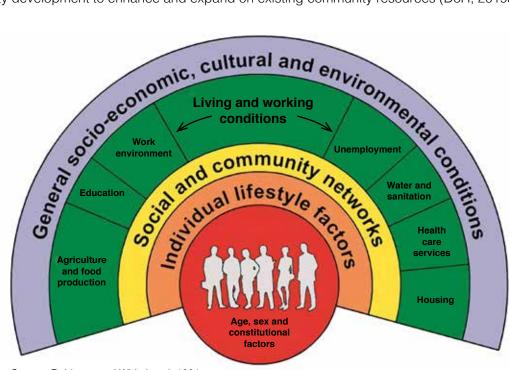


Ireland, *Improving and Safeguarding Social Wellbeing*, the Department emphasised that "Social workers need to develop and strengthen partnership and community development approaches to practice with individuals, families and communities," while highlighting that the social work profession has a role in reforming health and social care to promote community based and person-centred practice (DoH, 2012, pg. 6). This 10 year plan recognised how effective partnership requires community development approaches to facilitate and strengthen integration and collaboration to meet the multi-faceted nature of need and to improve wellbeing.

Published in 2017, Power to People promotes community approaches in adult social care to enhance cohesion, engagement, and empowerment. This is demonstrated under proposal four, section five which positions neighbourhood-based, preventative and citizenfocused community support models as the way forward for improving wellbeing and social care (Kelly & Kennedy, 2017). By highlighting several existing community-based networks, the report argues for a scaling up of community approaches to enhance community planning, strengthen collaboration, and improve services, ultimately advocating for a system of prevention and early intervention for the benefit of the people. Alongside an extension of community approaches, the report endorses the role of social workers as 'navigators' to ensure people get assistance in accessing the care and support needed in the community.



Furthermore, the *Delivering Together* policy released in 2016 established a community development workstream to help tackle inequalities in health (DoH, 2016). This work stream places the strengths, skills, knowledge, and experiences of communities at the heart of all processes for addressing need, social exclusion, and inequality. *Delivering Together* demonstrates the DoH is commitment to investing in community development to enhance and expand on existing community resources (DoH, 2019a).



Source: Dahlgren and Whitehead, 1991

As illustrated in this diagram, health and wellbeing are not limited to health care services alone. Social, economic, environmental, and behavioural factors have a significant impact, re-emphasising the importance of social workers engaging with community development approaches to address inequalities, strengthen partnerships, promote empowerment and advocate for social justice.

As outlined in strategic priority 1 of the *Social Work Learning and Improvement Strategy*, community development approaches are also highlighted as a means of addressing inequalities, promoting social justice and building upon people's capacities and enable "stronger, self-reliant communities." (DoH, 2019b, p.18).

"TACKLING INEQUALITIES AND
PROMOTING SOCIAL JUSTICE USING COMMUNITY
DEVELOPMENT APPROACHES CAN ALSO ENHANCE SOCIAL
WORK AND SOCIAL CARE PRACTICE BY EMPOWERING AND
BRINGING ABOUT POSITIVE CHANGES IN THE LIVES OF
INDIVIDUALS AND COMMUNITIES. IT ENCOURAGES PEOPLE
TO TAKE PERSONAL AND COLLECTIVE RESPONSIBILITY AND
HELPS THEM TO ORGANISE AND WORK TOGETHER TO IMPROVE
THEIR OWN AND OTHERS' HEALTH AND WELLBEING."

(DoH, 2019, p. 18)

The Department of Health released a consultation document on the Reform of Adult Social Care (DoH, 2022). This work builds on *Power to People* and demonstrates a strengthened commitment to the integration of community development in social work practice. Most notably, the Department of Health has proposed including community development in Health and Social Care Trusts' adult social worker job descriptions, evidencing a renewed emphasis on community-focused practice in social work (Strategic priority 4: Prevention and early intervention).

This summary illustrates how the policy context that shapes social work in Northern Ireland aligns closely with the regional community development strategy (DoH, 2018a), further evidencing opportunities to mainstream community development in social work practice. Although community development approaches have been taught in social work programmes at both an undergraduate and postgraduate level and are evidenced in core policy documents as outlined above, there remain challenges for integrating learning into practice, for example a lack of time and resources, organisational prioritisation of statutory functions, or a predominant casework model of service delivery. These factors can infringe on the ability to enact community development approaches and are illustrated further in the case studies which follow.







#### **Power**

Power is present in all social relationships and is multifaceted, operating at many sites and from multiple directions (Pettit, 2013). Power can be oppressive and marginalising such as systemic racism and micro aggressions or excluding the needs of people with physical disabilities when designing a playground and maintaining pathways.

The expression of power, however, is not always negative (see Pettit, 2013 and Vene Klasen & Miller, 2007). Power can be used to protect the rights and wellbeing of individuals and groups in society such as the role of the government in establishing legislation to mandate equal pay in the workplace or to provide free primary school education. The use of power can also be productive, such as the establishment of scholarship programmes or internships to support young people in their career development. Engaging in community development requires attention to the nuances of power to unpack how members in your community both experience and harness power, rather than assuming everyone interprets social relationships in the same way. This will help to uncover why some groups may have been able to challenge systems in the past and others have not, while identifying systems, policies, and discourses that require transformation.

"ONE OF THE KEY
FOUNDATIONS OF COMMUNITY DEVELOPMENT IS
ACKNOWLEDGING THAT POWER RELATIONS DO EXIST AND
THAT A KEY ROLE OF COMMUNITY WORKERS IS TO IDENTIFY
THE NATURE OF THESE RELATIONS. AN IMPORTANT ELEMENT
OF UNDERSTANDING THE NATURE OF POWER RELATIONS
IS EXPLORING WHO BENEFITS FROM THE EXISTENCE OF
THESE, WHO IS DISADVANTAGED BY THESE, HOW THEY ARE
MAINTAINED AND HOW THEY CAN BE TRANSFORMED."

(Munford & Walsh-Tapiata, 2005, p. 102) Building on the work of Freire's (1970) Pedagogy of the Oppressed, Ledwith (2016) highlights how community development is not about making conditions more tolerable for individuals who are disadvantaged and marginalised, rather, community development is about creating a more just society by challenging power structures in the pursuit of progressive social and political change. Harnessing education as a key tool in building a critical awareness of power, it is argued that education processes which do not address disadvantage and exclusion will inevitably privilege the privileged and marginalise those most powerless (Ledwith, 2016).

Social workers must also be critically self-aware of the power they hold in social engagements and reflect on how their position, responsibilities, and language can influence the behaviours and attitudes of the people they work with. For example, jargon, terms and labels used in everyday communication can produce power dynamics within the helping relationships (see McLaughlin, 2009 and Shannon, 2019). Additionally, social workers are guided by social policy and may hold statutory authority which can determine who has access to services, how funding is distributed, and what interventions are available. Recognising the power you hold as a social worker is vital for enhancing critical thinking in anti-oppressive practice, developing meaningful relationships with communities, and identifying the boundaries of your role.

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WORKER CAN ASSIST GROUPS TO UNDERSTAND
THE OPERATION OF POWER, IN ORDER TO MOVE FROM
POSITIONS OF IMMOBILISATION AND PASSIVITY TO A
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NATURE OF POWER AND HOW IT CAN BE CHALLENGED."
(Munford & Walsh-Tapiata,
2005, p 103).

### **Asset-based approaches**

Asset-based approaches to community development are about identifying, mobilising, and enhancing local resources and community capabilities to promote resilience (Social Care Institute of Excellence, 2018). These may include but are not limited to:



Asset-based approaches seek to strengthen people's sense of confidence and self-worth, enabling the independence, health, and wellbeing of the collective. Asset-based approaches, therefore, recognise that the sum is greater than the individual parts.

"WHEN YOU ENTER A

COMMUNITY WITH A COMMITMENT TO
SUPPORT LOCAL RESIDENTS TO MAKE THE
INVISIBLE VISIBLE, YOU DISCOVER A
SIGNIFICANT UNTAPPED RESERVOIR OF HUMAN
AND ASSOCIATIONAL POTENTIAL JUST WAITING
TO BE IDENTIFIED, CONNECTED AND MOBILISED
BY THE RESIDENTS OF THAT PLACE."

(Russell, 2020, p. 199).

Aligning with anti-oppressive practice, rather than focusing on deficits asset-based approaches start by looking at what the community already has and what they can achieve through connecting and mobilizing their resources before citizens identify what external support they want or need (McKnight

& Russell, 2018). This process empowers community members to participate meaningfully and raise awareness of their strengths, unlock potential, and identify collective goals to initiate change. Asset-based approaches are a purposeful move away from a poverty focused mindset and problem-based assessment to a collective process which aims to "empower people to take ownership of their own development and by doing so, enable communities to have the necessary skills to manage their own development endeavours" (Nel, 2017, p.43).

In contrast, a deficit-based or needs-based approach to community development is typically led by external funders or organisations who identify gaps and propose projects, often with limited engagement from the community. Many people may benefit in the short term from such interventions; however, research has identified ongoing challenges with sustainability and a growing sense of dependency due to insufficient meaningful inclusion of community members and a lack of ownership over their own development (Nel, 2017). Asset-based approaches, however, do not remove the responsibility for appropriate resourcing and funding. To understand these different approaches, as social workers we must ask; Who is setting the agenda?

### **Co-production**

Central to community development is the concept of co-production which embraces the principle of working in collaboration with, not working on communities. As highlighted by Hamilton (cited in Sansome et al., 2021, p. 9) co-production "involves people right from the very start and right through the whole process to the end." Co-production is not about selecting specific individuals to contribute at certain stages of a project, nor is it widening participation when it is most convenient for the social worker or organisation. Rather, co-production is a fully inclusive approach where power is shared in design, delivery, and evaluation to find shared solutions (Social Care Institute of Excellence, 2015).

To ensure co-production can be achieved, accessibility is foundational. Accessibility extends beyond addressing the limitations of physical spaces and time barriers to participation; accessibility also requires an evaluation of language to ensure that communication is effective and appropriate for the diverse groups and individuals we work with. For example, the use of acronyms may be commonplace with colleagues in the office, however, these terms can exclude service users, carers, and communities from actively participating in discussions and creates barriers to accessing information and sharing knowledge. Connected to the concept of power, a critical awareness of the language used in social work is central to anti-oppressive practice, and essential for achieving effective co-production in community development. For further discussion on co-production and how to apply this concept in practice, the Department of Health has released a publication in the Reflections series, 'Social Work and Co-Production' (2021).





### Relationships, networks, and partnerships

A further connection between social work and community development is evident in the importance placed on developing trusting, honest, and respectful relationships. Commonly recognised as being at the heart of social work practice (Ward, Ruch & Turney, 2018), relationships similarly remain central in community development. Relationships are the foundation to meaningful engagement when developing an understanding of the social injustices and inequalities that impact communities, and interpersonal skills are the foundation for advocacy efforts. Furthermore, the vital role of relationships has a particular relevance to social work in Northern Ireland where historical perceptions of distrust and suspicion of authority or statutory services has created complex barriers to working with individuals and communities both during the Troubles and throughout conflict resolution (Duffy et al., 2019). Without relationships built on trust and respect, there is a risk that community development becomes top-down, oppressive, or detached from lived realities

Additionally, networks and partnerships with groups, organisations, and influential individuals help to facilitate change by enabling access to resources, funding, and knowledge of existing systems. The social worker is not expected to provide all the answers, or resources directly; however, they can utilise their networks to link people or groups together to share experience, skills and knowledge that can support the community in achieving their aspirations. For example, a social worker may support a community-based organisation in contract negotiations for funding, however, a partnership approach is essential to enable individuals within

the community to build their negotiation skills and understand contractual systems to ensure the community can lead on such tasks in the future. Connected to the concept of sustainability, social workers must remain conscious of how they can facilitate and benefit from skill sharing through relationships, networks, and partnerships to further enhance the collective knowledge of a community without becoming gatekeepers.

It should also be recognised that partnerships can come in all shapes and sizes depending on the purpose and parties involved. They may be formal or informal arrangements, at a one-to-one level or between groups, with other grassroots organisations or with public institutions. Partnerships may still experience tensions or conflicting interests, and differences in power can continue to exist (Pitchford and Henderson, 2008), therefore it is important to question whether the community continues to set the agenda and define the challenges faced which is essential to support the longevity and sustainability of community development (summarised in table one, also see Mackintosh, 1992 and Scottish Executive, 2004 for further discussion on partnership models and challenges).

Although this section has highlighted the core concepts of power, asset-based community development, co-production, and relationships, networks and partnerships, further concepts for consideration should include sustainability, capacity building, cultural competence, cultural humility and intersectionality.

The table opposite describes both cultural competence and cultural humility and how these can be used in practice.

	Cultural competence	Cultural humility
Goals	To build an understanding of minority cultures to better and more appropriately provide services	To encourage personal reflection and growth around culture in order to increase service providers' awareness
Values	Knowledge     Training	Introspection     Co-learning
Shortcomings	<ul> <li>Enforces the idea that there can be 'competence' in a culture other than one's own.</li> <li>Supports the myth that cultures are monolithic.</li> <li>Based upon academic knowledge rather than lived experience. Believes professionals can be "certified" in culture.</li> </ul>	<ul> <li>Challenging for professionals to grasp the idea of learning with and from clients.</li> <li>No end result, which those in academia and medical fields can struggle with.</li> </ul>
Strengths	<ul> <li>Allows for people to strive to obtain a goal.</li> <li>Promotes skill building.</li> </ul>	<ul> <li>Encourages lifelong learning with no end goal but rather an appreciation of the journey of growth and understanding.</li> <li>Puts professionals and clients in a mutually beneficial relationship and attempts to diminish damaging power dynamics.</li> </ul>







# Introduction

The CLARE model has a specific role for a Community Development Social Worker who is part of a small community-based team which includes a community development social worker, community health and wellbeing worker, volunteer coordinator, and operations manager. The team works across all communities in North Belfast. Referrals are received from statutory social services, GPs, families, neighbours, and self-referral. People referred have a combination of social isolation. and physical and mental health challenges related to ageing. There is a strong correlation between the impact and legacy of the Troubles and the social determinants of health in North Belfast, an area which has experienced multiple challenges of deprivation (National Research and Statistics Agency, 2017) but offers an established network of community assets.

CLARE's aim is to support people to achieve a better quality of life through relationship building, connecting the person to effective sources of support, recruiting and developing local volunteers, and co-producing new supports in partnership with the community if they do not already exist. CLARE recognises the capabilities and assets that people possess within communities and promotes the potential of networking, positive engagement, and collaboration for innovative community grown solutions.

### 숙우 Community Development 아면 Project: One to One Getting 명한 Better

CLARE have supported and developed a wide range of projects in partnership with older people including inter-generational work with 'Wee Chicks' afterschool's club, musical reminiscence podcasts with the Oh Yeah Music Centre, and collaboration with a journalist to publish 'Lockdown Life in North Belfast.\*'

This case study will focus on the *One to One Getting Better* project as an example of how CLARE initiatives are developed from the ground up: Concerns about isolation and loneliness were shared with CLARE staff when community members highlighted how certain older people



were no longer seen out and about, despite COVID-19 restrictions being lifted. CLARE staff were conscious of the impact of the pandemic on physical deconditioning, mobility, anxiety, loneliness, and social isolation, and recognised that for many people the ending of restrictions would not necessarily result in an immediate reconnection with their community and previous activities outside of the home. Routines such as walking to a shop or attending a social group were now unfamiliar and lockdowns had contributed to a vicious cycle of reduced physical condition and a loss of confidence.

A pilot collaborative intervention between CLARE CIC and New Lodge and Duncairn Community Health Partnership (NLDCHP) was developed which drew on the skills and assets of both community organisations to deliver a personalised 8-week home-based activity and wellbeing programme to support physical conditioning and increase confidence. The project received funding from the Public Health Agency/CLEAR and Mount Vernon Community Development Forum.



Utilising an asset-based community development approach, the Getting Better project combined the skills of social work with the skills and knowledge of NLDCHP staff to enhance community capacity and build on existing resources. NLDCHP were able to offer the knowledge and experience in delivering group exercise and wellbeing programmes in the community but engaging people within their own homes was a new experience for their facilitators. Partnering with the CLARE social worker, Shane Coulter, assisted in bridging this knowledge gap.

The social worker carried out home visits to build the relationship and develop a comprehensive, personalised assessment, balancing both risks and individual goals informed by a strengths-based approach to practice. The aspirations, capabilities, and goals of individuals were then discussed in partnership with NLDCHP to develop an effective, personalised, in-home programme to help the person re-connect with the community.



Knowledge of the community and skills in developing and maintaining networks were central to identifying and enabling creative solutions with community partners. Collaborative working relationships were essential when sourcing funding, screening referrals, measuring outcomes, and planning for future sustainable opportunities.



## Benefits and challenges

The sum is greater than the parts! By pooling the resources and knowledge of staff from the NLDCHP and CLARE CIC a new responsive resource was created to address an urgent need and prevent further health decline for the targeted group. Developing new approaches can be a challenge when they involve risk and necessitates sound risk assessment, however, positive risk taking can result in innovative solutions. The CLARE CIC social worker drew upon risk assessment models from previous multi-disciplinary experience, NLDCHP processes, and current COVID-19 guidance to develop a comprehensive risk assessment for use with participants.

Demonstrating the effectiveness of the CLARE model and justifying the role of social workers to potential funders increases the requirement for evaluation and evidence of outcomes. At times, this has meant that CLARE service users and staff are asked to complete a range of outcome scales and measures. This can be time consuming and detract from core work without guaranteeing further investment. However, evaluation is important to drive innovation and quality in services. Outcome measures must reflect what is important to the individual as well as demonstrate system savings.



# Lessons learned: Proactive instead of reactive

Preventative intervention delivered on a small, local scale can have a positive impact for individuals but can seem too expensive or labour intensive for funders to commission further cycles. Utilising a preventative approach such as the *One to One Getting Better* project can slow down further decline and mean that older people are less likely to experience increased frailty or develop chronic levels of loneliness, making the approach a cost-effective strategy.

CLARE has recognised the potential and benefits of positioning social work in a community development role; the challenge is how we can enable more community development social work and early intervention to be proactive instead of re-active. As argued by Russell (2020, p. 87) "Providing better ambulances at the bottom of the cliff to intervene when people are chronically ill instead of setting up fences at the top to promote a preventative approach (...) is a half-baked and wasteful endeavour for policy makers and practitioners alike." Social work leaders need to embrace community development roles for staff and provide space and opportunities for community partnerships to flourish. Sign posting to a community resource is not in itself community development and it is important to get to know the community you work in and the people who are its assets.

The future of CLARE and its staff, like most community organisations, is not secure. Further consideration of how the social work profession and community-based organisations can advocate for sustainable funding and continue to promote the value of preventative community-based intervention is needed.



## **Project feedback**

The two NLDCHP facilitators who worked on this project were initially apprehensive about adopting a home-based individual model of engagement, but by the end both were stating it had been a very enjoyable and rewarding experience that they would love to participate in again if funding could be found to repeat or expand it.



"IT HAS BEEN A
GREAT EXPERIENCE - I HAVE LOVED THE
CONTACT AND SUPPORT AND FEEL A LOT MORE
CONFIDENT MOVING ABOUT."

"IT WASN'T JUST ABOUT THE ACTIVITIES - IT WAS SOMETHING TO LOOK FORWARD TO EACH WEEK WITH SUGGESTIONS AND ADVICE FOR IMPROVING BOTH MY PHYSICAL AND MENTAL HEALTH."

Participants' feedback







Originally a horticultural centre, the Finnegan sisters transformed the land into a wellness centre which includes a social farm with nature and heritage trails.

According to Di Lacovo (2009, p.5) social farming (also known as care farming) includes activities that use agricultural resources, both from plants and animals, to promote or to generate therapy, rehabilitation, social inclusion, education, and social services. It is related to farm activities where small groups of people can stay and work together with family farmers and social practitioners. It addresses diverse needs for different groups of less empowered people including intellectual disability, physical disability, mental ill-health, drugs and alcohol recovery needs, children, youth, prisoners, ex-offenders, terminal patients, and older people.

An Tobar is an excellent example of community development where local people undertook collective action to improve community health and social wellbeing. It has been led by the community from the start, with social worker engaging through a community-based approach (DoH 2018, p.8) to meet the day opportunity needs.





# The community development project: What led to the develop of An Tobar?

A sense of passion and purpose in the Finnegan sisters is at the heart of this project. One describes herself as the operational lead and one the lead for funding and strategic direction. During the pandemic, society rediscovered the importance of nature, culture, history, and heritage. Harnessing their 30 years of horticultural experience, the Finnegan sisters combined their own sense of social purpose with a wide range of statutory, voluntary and community agendas to transform much of their land into an interactive trail where the community learn about trees, plants, fairies, poetry, history, horticulture, farming, and geography.

Prior to An Tobar, people with diverse abilities, complex needs and mental ill-health had limited options for day opportunities in South Armagh. Now constituted as a Community Interest Company, An Tobar remains deeply connected with the local community, including relationships with statutory agencies and voluntary groups in the area, and is offering educational, social and recreational opportunities for schools, adults with different abilities, and specific interest groups e.g. women's groups and an LGBT cafe. Community pharmacy projects are also offered, and adults with diverse abilities can work on the farm and in a horticultural centre to develop a range of practical and applied skills.





## Practice approaches: The role of the Social Worker

This case illustrates that often it is not the job of a social worker to create a new community resource but to build on existing community resources to meet the needs of service users and carers. Harnessing an asset-based approach to community development, the role of the social worker was that of a facilitator and networker. Tasks have included:

- Identifying An Tobar as a suitable day-time opportunity for service users
- Promoting the social farm concept to the Southern Health and Social Care Trust
- Completing annual reviews to gather information on service user and carer satisfaction

- Liaising with service users, carers, and providers throughout the year to ensure a partnership and co-production approach for addressing any emerging issues such as accessibility
- Collaborative cross sectorial working by harnessing multi-disciplinary support when required, such as facilitating relationships with occupational therapy to resolve environmental or practical barriers to active participation
- Promoting and supporting effective relationships between communities and public bodies
- Enabling sustainability through the brokering of financial support and service level agreements.
   While community development was driven by the community, social work management have been key in establishing contracts for continuity.





### **Benefits and Outcomes**

The Southern Health and Social Care Trust now has service level agreements to enable adults with learning disabilities and mental ill-health to avail of the social farm 5 days a week. The following feedback shows how meaningful opportunities in the community offered through An Tobar has supported the wellbeing and social connections of service users.

The social worker interviewed for this case study reported significant improvement in one of their service users, Martin (anonymised name). Martin is an adult with a learning disability who was referred to An Tobar after a period of significant loss and bereavement. He had been diagnosed as clinically depressed but wanted to explore day opportunities in the community. Martin adapted immediately to the new surroundings of An Tobar, developing a deep sense of belonging and positively engaging in the social farming and horticultural activities on offer.

"I LOVE AN TOBAR.

IT'S MY FAVOURITE PLACE
TO GO. I ENJOY HELPING ON THE
FARM AND FEEDING THE COWS."

**Service User** 



The social worker also reported on feedback from a carer whose adult son with learning disabilities accesses An Tobar two days a week. The carer felt the experiences made an extremely positive contribution to her son's quality of life, outlining improvements to his health and wellbeing.

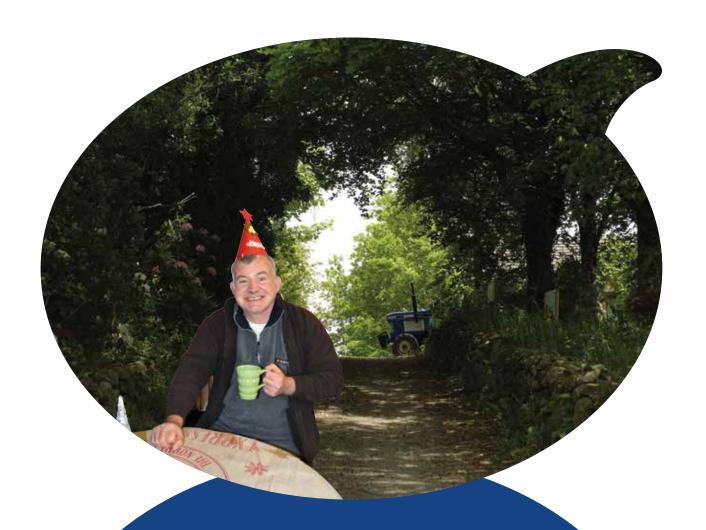
Lastly, the social worker highlighted how 'the biggest percentage of mental wellbeing comes from a sense of purpose.' They said that the adults who had availed of opportunities at An Tobar know the difference between 'real work' and 'made up' work, and An Tobar is considered a way of life where you get your hands dirty.



# Lessons learned: *Project* development and sustainability

A broad knowledge of community networks and organisations is essential when sourcing funding, exploring training opportunities, and accessing resources. Kathleen and Margaret received early support from Rural Support NI who provided networking and training opportunities to learn about social farming. Links with the Southern Trust Learning Disability Specialist Manager were also forged, who later offered a contract for day opportunities for six adults with learning disabilities.

The role of the social worker has been vital in monitoring the service level agreement, and they have been able to avail of places at An Tobar for Trust clients. Links have been made with a range of other funders to help sustain and develop other aspects of the social farm and support with business planning was accessed from Newry and Mourne Enterprise Agency. These relationships and connections were essential for the development and sustainability of the project.



"THE SUSTAINABLE AND COMMUNITY-DRIVEN WORK THAT WE TAKE PART IN ON THIS FARMING LAND CANNOT BE UNDERSTATED."

**Margaret Finnegan** 

"HUGE THANKS TO THE SHSCT AND RURAL SUPPORT NI FOR THEIR SUPPORT WITH SOCIAL FARMING AND FOR BEING INCLUDED IN THIS PUBLICATION."

**Kathleen Agnew** 







### Introducing the team

The South Down Primary Care Multi-Disciplinary Team (PCMDT) was established in March 2019 and consists of fifteen social workers employed in primary care settings across South Down. The Ardglass GP practice consists of a social worker, social work assistant, mental health practitioner, advanced nurse practitioner, pharmacist, physiotherapist, and health visitor. Aine and Una are employed by the Trust as the practice social worker and social work assistant, working across the Ardglass and Struell GP surgeries. Everyone else in the PCMDT are employed by the GP Federation.



Ruth Curran (Ardglass GAA Wellbeing Officer), Una Bentham (Social Work Assistant) and Aine Brannigan (Senior Social Work Practitioner) PCMDT.

### へや。 The community ぐょり development project

Shortly after the appointment of Senior Social Worker, Aine Brannigan, Una Bentham was employed as a Social Work Assistant, and began working with Aine in implementing community development plans. One of the first community development tasks for the new Ardglass PCMDT was to conduct a community profile of their area. During the community profile exercise, local Parish Priest, Father McCloskey, mentioned some difficult conditions in boats and recommended Aine and Una link with the seafarers, Harbour Master and the Fishermen's Mission based in Ardglass Harbour to explore the needs of the local Ghanaian economic migrant community who operate fishing boats in the area.

Aine and Una introduced themselves to a group of Ghanaian seafarers at the Fishermen's Mission prior to the outbreak of COVID-19. While some men spoke English and engaged more easily, others were slower to engage. Aine and Una, however, were able to return with food parcels for the seafarers and met with the Harbour Master were confirmed difficult conditions was an issue on some of the boats. Following the closure of the Fisherman's Mission during the COVID-19 pandemic, the lack of laundry and shower facilities was highlighted as the most pressing concern by the seafarers, alongside access to healthcare and opportunities for social and physical exercise.





# Practice approaches: The role of the Social Worker

As the men were working on the boats when the GP surgery was open, accessing health care often meant visiting a GP out of hours or going to A & E. Harnessing values of social justice, anti-discrimination, and equity, the social worker acted as a liaison between the seafarers and the surgery, helping to identify, communicate, and advocate for the unmet health and social care needs. As a result, the men were provided with clear information on opening hours and additional advice on what healthcare services were available to them.

The social worker and social work assistant also engaged in asset-based community development through community asset mapping- identifying local resources, skills, and knowledge to meet the needs of the seafarers. Networking, collaboration, and building partnerships were essential during this process. Connecting with the local GAA Wellbeing Officer, the Club enabled access to shower and laundry facilities, and offered social exercise opportunities through football coaching, resulting in a few of the men being invited onto their senior reserves team.

Core skills of facilitation, active listening, and empathy were vital for establishing respectful working relationships with the seafarers, parish priest, harbour master, GAA Club, and other professionals in the multi-disciplinary team. Trust was built through the provision of food parcels during the pandemic and making links to the GAA Club for exercise. Initially, the food offered was sometimes not used due to unfamiliarity, however, the GAA Wellbeing Officer was able to draw upon their own networks to connect with the iAssistNI Charity and Beyond Skin who collaborated to make more culturally appropriate food available. Over time, there has been reduced social work involvement as community links have become firmly established and self-sustaining.





## **Benefits and challenges**

As a result of the engagement with the men, local groups, and community networks, the seafarers have been able to access shower and laundry facilities, football coaching, and culturally appropriate food, developing a sense of social inclusion and belonging in the local community. Participation in the local GAA has supported the wellbeing of the seafarers as well as enriched the local community, encouraging recognition of the value of cultural diversity. This has been extended through local media attention in Northern Ireland and the Republic of Ireland, and subsequently outdoor washing machines have been fitted outside the Fishermen's Mission which was still closed at time of writing.

As a social worker, it is important to critically reflect on your role and recognise that other groups or individuals may be better placed to meet needs around social inclusion and access to facilities. When one community organisation progresses to meet unmet community needs, however, other organisations can feel undermined. Sensitivity is required when managing relationships between organisations to maintain community cohesion and promote collaboration.

It is important to identify power dynamics to ensure steps are taken to mitigate against potential tensions, for example how to navigate relationships to prevent the seafarers being placed in a difficult position with their employers and recognising that individuals or groups may feel excluded if access to services is restricted. Social workers must be prepared to challenge marginalisation and discrimination in the pursuit of social justice, embodying anti-oppressive practice to promote social cohesion, integration, and equity.

Lastly, knowledge of legislation is important for understanding statutory powers. In this case, the seafarers were deemed as migrant men under UK law, and therefore don't have same rights as asylum seekers or citizens. Being classed as transitionary due to the nature of their work, access to services, financial supports and rights can be limited, and this is an ongoing issue being debated in parliament.



Relationships between social work and a wide range of stakeholders are important to meet health and social care needs. As this case study has shown, it is important for social workers to know the local community groups and build networks through trusting relationships. Reaching out to community groups, schools, and businesses can offer extensive support and knowledge of resources, and the local community shouldn't be underestimated.

It is also important to be aware of cultural practices and diversity. For example, with the provision of food parcels, it was quickly identified how different faiths on boats allow different foods and cooking practices, therefore it is important not to generalise or assume homogeneity within a community. Similarly, not all of the men could speak English, and a range of communication methods were needed, including providing information on local faith services and health care in the individual's language of choice.



# Feedback from people accessing the service and from other professionals/partners.

Speaking to Charles, one of the Ghanaian fishermen, he welcomed the role of the social worker and social work assistant in helping him access health care, medication, and food, and social exercise and laundry facilities through the local GAA Club. Feeling a warm welcome from the Ardglass community, Charles was delighted at the opportunities given to the men by local GAA coach Paul O'Shea to learn a new type of football. Charles spoke of how good he felt after he and a fellow seafarer Eddie scored goals in a local match.

Additionally, the harbour master outlined the very valuable contribution that the seafarers make to the local fishing economy, welcoming the reduction in social isolation which the GAA has made.





"IT IS ALSO IMPORTANT TO BE AWARE OF CULTURAL PRACTICES AND DIVERSITY. FOR EXAMPLE, WITH THE PROVISION OF FOOD PARCELS, IT WAS QUICKLY IDENTIFIED HOW DIFFERENT FAITHS ON BOATS ALLOW DIFFERENT FOODS AND COOKING PRACTICES, THEREFORE IT IS IMPORTANT NOT TO GENERALISE OR ASSUME HOMOGENEITY WITHIN A COMMUNITY."



The Western Health and Social Care Trust (WHSCT) *Together as One Parents' Forum* was launched on 19th December 2018 by Dr Anne Kilgallen (WHSCT CEO at the time).





The Parents' Forum consists of parents who are service users of children services, social workers, and managers from the WHSCT. There are three social workers involved in the Forum; Nicky Fallon, Shantallow Family Centre Manager, and Grania Jackson and Helena Shiels.



## Community development project

The Parents' Forum has its roots in the "Parenting your Teen" programme based in Shantallow Family Centre in Derry. Those who attended the programme were referred by their Family Intervention or Looked-After Children Team social workers. During each ten-week cycle of the programme, parents shared their experiences of raising teenagers and their unique experience as parents known to social services and whose families are involved in social work processes. This resulted in staff gaining extensive information on "what works" for parents and families involved in the service and what areas could be improved.

Recognising the potential for wider learning from the lived experiences, facilitators invited senior staff to meet the parents and engage in dialogue. Proving highly popular with managers and social work staff, the process evolved into the *Together As One Parents' Forum*.

#### Core role of the Forum

The Parents' Forum effectively bridges the gap between service delivery and service user needs by ensuring the voice of parents is heard at a frontline, management, training, and governance level. Supporting service improvement, the Parents' Forum is actively approached for consultation on sector developments including the Department of Health and Social Services Stormont review of the UNOCINI and creation of leaflets for childcare services to enhance the communication of essential information for parents and caregivers. The valuable contributions of the Forum have also been recognised by other Trusts, with the Northern Trust seeking advice and guidance on the development of a Forum in their area.



## Practice approaches: The role of the social worker

Relationships have been at the centre of the Parents' Forum to ensure that a community development rather than a community-based approach was developed. Time, however, was vital to build genuine relationships and regular, open, and honest engagement takes effort and commitment from both parties. Responding nonjudgementally to a parent's concerns, providing meaningful support, and following through on promises paved the way for trust to be built and relationships to be developed and maintained.

Strongly linked to co-production, parents have been meaningfully involved at every step of the project. Partnerships have been fostered with parents to identify the concerns and issues most important to them, and to work collaboratively with the social workers to plan and implement strategies for improvement. With approximately thirty-five parents involved to date, participation is voluntary, and any parent, grandparent or care giver currently or previously engaged with children's services is welcome to join. The social workers do not seek out specific individuals to join the forum, rather it is an inclusive approach and parents' voices are prioritised at all stages. This has been evident in their involvement in social work training in Northern Ireland and visits to social work teams across the region. The co-production approach has also supported parents' confidence to participate in policy reviews.





#### Sharing the Learning

The Forum believes in the importance of sharing good social work experiences and assisting in improving involvement for service users. The group have met over 100 social workers across the WHSCT area to share their lived experiences. The feedback from parents is balanced and underpinned by the hope that fear can be reduced for families using services, and positive working relationships will be at the centre of all social work involvement.

#### **Training**

Contributing to the training of social workers has developed considerably over the years and the Forum is currently involved in the following programs to ensure the voice of service users is considered and person-centred anti-oppressive practice is promoted:

- Training for undergraduate student social workers in Northern Ireland Universities (2020-2022)
- Training of postgraduate students on the Social Work and Community Development Approaches programme (2019 -2022)
- Induction training for social work students WHSCT (Ongoing)

The outcomes of these experiences have increased the confidence of group members and has provided unique opportunities for service users to meet leaders in the field of Social Work.

Together as One Parents' Forum was established in a policy climate of Personal and Public Involvement (PPI) and one of the challenges has been ensuring that involvement of service users in projects was never tokenistic or superficial. To avoid this, every effort has been made to make the Forum fully participative and inclusive with high levels of partnership between staff and parents, and genuine buy in from senior management.



Another challenge in developing the group was working towards greater partnership, equity and understanding. Recognising and navigating power imbalances within relationships and taking active steps to building a safe learning environment between social workers and service users was essential. It was agreed that everyone was on a learning journey together, recognising that no one will get it right all the time!

Open and honest discussion on issues raised by parents and the role of social workers was essential for developing relationships, expanding understanding, and maintaining group cohesion. Transparent and respectful lines of communication have increased parents' confidence in sharing their messages and they have gained a greater awareness of the role of a social worker, the statutory functions they operate within, and the wider pressures facing Trusts.

Sharing the information respectfully and ensuring the messages are heard by a workforce under pressure with high workloads is a challenge for the Forum as social workers often expect service user feedback to be negative and critical. Social workers have often presented as more anxious than the parents at meetings, however, as the lived experience is both positive and negative, feedback has been balanced which increases the potential for the messages to be heard. Parents remain steadfast in their desire to help improve services for other service users and have developed a real empathy and understanding for social workers trying to help families amid serious organisational pressures.





# Lessons learned: From developing a group for people with lived experience

Working in partnership with people who are service users and providing a space for experiences to be shared presents a unique learning opportunity for all those involved in supporting families and can be a catalyst for change. Lessons include:

- Connecting professionals with service users through meaningful dialogue can help social workers and managers better understand what helps service users benefit the most from intervention,
- Involving service users in training provides depth to the knowledge and theory being taught and students can be introduced to service users in a safe learning environment where healthy

- A two-way dialogue supports service users to also learn about social work and develop a better understanding of the purpose and role.
- Good social work practice in line with the Children (NI) Order 1995 is founded on the community development ethos of partnership working, and the Parents' Forum has encouraged professionals to see families within a community perspective, providing practitioners with timely reminders of core partnership skills and values.





"WE CAN WORK TOGETHER TO HELP OUR CHILDREN."

"PLEASE DON'T JUDGE."







With the COVID-19 pandemic, it was evident that school closures, limited access to healthcare services, reduced public transport, and increased waiting times for assessments impacted on the overall pressure experienced by families in the community and new thinking was needed to organise alternative ways to engage with the families referred to social work services from the GP practice.



## Development of the Garvagh People's Forest Project

As a community development worker from Garvagh People's Forest, Karin Eyben has extensive knowledge about the forest, and actively promotes its creative healing powers as an asset to the community. Building on research evidencing how nature can improve physical and mental wellbeing Karin approached the Garvagh Health Centre to explore opportunities to connect health and wellbeing with the benefits of the natural world.



"SOCIAL WORKERS
SHOULD NOT BE AFRAID TO WORK
WITH UNCERTAINTY OR DEVELOP
RELATIONSHIPS WITH PEOPLE THEY
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Shortly before the pandemic, Carla McLaughlin was hired as the primary care social worker in Garvagh Health Centre, a role which engages with people along the life continuum, 'from the cradle to the grave.' In response to Karin's offer of collaboration, Carla and Karin worked together to establish the Forest Families' Project, a joint initiative between Garvagh People's Forest and Garvagh Health Centre Primary Care Social Work Multi-disciplinary Team.

The Project utilises the natural resource of the Garvagh Forest as a space to work with families under pressure while adhering to social distancing rules and lockdown measures. Each family defines their own goals for their sessions, and Karin and Carla work in partnership with the families to co-produce unique activities that draw upon the forest resources including physical and sensory experiences, games, history, conversation, relaxation, and play. Over 30 families have been supported through the project to date, with a range of life challenges including learning disabilities, educational needs, autism spectrum disorder, resettlement difficulties, separation, and newly formed families. Having started in the summer of 2020 and continuing until summer 2021, project plans are currently being developed to establish new programmes to support the wellbeing and resilience of parents and carers.





### Practice approaches and benefits.

Promoting a holistic approach to practice, the whole family is supported to engage in the three-hour sessions. Highlighting how relationships are at the centre of social work practice, Carla noted that working in the forest has supported this process, helping to make difficult conversations easier by creating a safe space for communication, collaboration, and growth. Additionally, the forest has enabled children and their parents to be observed in a natural environment, often providing more knowledge and insight than focusing on an assessment tool or an office-based intervention.

The project has utilised a strengths-based approach and co-production design, developing partnerships with the community organisation and families to build on the existing assets and knowledge present. For example, Karin discussed working with a person who had literacy issues but an excellent understanding and appreciation of nature and fishing. Identifying these talents, the individual was encouraged to share these with others through the People's Forest Project.



#### **Challenges**

Karin worried that her established relationships with local people might change when working with a social worker and Carla was aware that some people might be put off joining a session. Reflecting on the project and relationships that have been built with families over time, this challenge is no longer relevant as evidenced by families returning to the Primary Care Social Work Multi-disciplinary Team when they have needed support throughout the year.

Similar to other community development initiatives, funding remains a core challenge. 'As a primary care social worker, I can help promote community based and preventative approaches in social work. The feedback from the MDT and the families shows how this project has been valued and is effective. The funding for the project is not secure and we need to find ways of promoting the service to try and assist with securing future funding'.







# Lessons learned

Increasing the accessibility of social work and offering an alternative safe space has strengthened relationships with individuals, families, and communities. For Carla, being involved in the Project has helped break down barriers and the stigma sometimes attached with families becoming involved with social work. As acceptance of these more creative, community development approaches to working widens within the medical practice, moving away from a risk assessment to a risk benefit model is needed and Carla's advice to other social workers is to 'be brave, suggest ideas, and try projects out jointly with the community.'

It is important to keep encouraging line managers to appreciate the value of community development approaches. Community development approaches do not have to come in the form of large projects as work can start on a small scale to improve wellbeing. Social workers should not be afraid to work with uncertainty or develop relationships with people they have not worked with before.

Overall, the project has promoted the importance of linking systems and has illustrated how making connections between the natural world, the home environment, education, school, and local events in one area can have a rippling affect to improve the health and wellbeing of families and the community.



Families gave positive feedback about the forest sessions- 'we had a fantastic time, kids always talking about it,' you and Karin were great with the children, enjoyable for the mummies and we would recommend to others. One young person said he thought all social workers were witches but not Carla!

The health visitor and the MDT have given positive feedback, expressing that they are glad to be able to refer families to a service which will help improve their health and wellbeing. This has been especially important for children on waiting lists for services, identifying the need for immediate support before they reach crisis point.





"BE BRAVE, SUGGEST IDEAS,
AND TRY PROJECTS OUT JOINTLY
WITH THE COMMUNITY."



"WE HAD A FANTASTIC TIME, KIDS ALWAYS
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ONE YOUNG PERSON SAID HE THOUGHT ALL SOCIAL
WORKERS WERE WITCHES BUT NOT CARLA!."

Key take home messages and top tips







Community development approaches in social work promote a return to **early intervention and preventative work** to enhance the social wellbeing of individuals, families, and communities, aligning with the purpose, values, and principles of the profession (IFSW, 2014; DoH, 2017). This shift in focus has the potential to reduce the current crisis driven nature of social work and enhance the role of social workers along the continuum of practice. The benefits and successes of these case studies are extensive, however, it is important for all social workers to **advocate for sustainable funding** and to promote the value of preventative community development approaches and advocate for sustained investment.





Co-production and relationship building are at the heart of social work and community development as illustrated in all the case studies included in this Reflections document. Investing time in establishing relationships built on **trust, respect and honesty** will enhance connections with communities and a broader understanding of the inequalities, needs and challenges faced. In turn, relationships and partnerships will support a more approachable, accessible, and visible reputation of social workers. Engage with your community, meet organisations in your region and introduce yourself to local groups. This might be through accompanying a person on their first visit following a referral or inviting an agency to present their work at a staff meeting. **By getting to know the people, connections and collaboration will grow.** 





As demonstrated in case study one, two and five, social workers can be effective in helping to link resources, groups, and community members to bridge gaps in provision and to ensure communities are able to enhance their own capabilities and resilience. **Identifying assets** helps to build networks and genuine partnerships with local groups and organisations and link community resources to emerging needs. Although the social worker's role may extend to nurturing relationships between groups and organisations initially, the case studies show there is a natural community dynamic when people connect with each other, sparking innovation. This reiterates how the whole is more than the sum of the parts. Social workers should work in partnership with local community groups and community development practitioners to share knowledge, resources and support. A good idea is to work together to co-produce a community profile identifying community assets. The community profile should be reviewed regularly so that it reflects the changing and evolving nature of mapping communities' assets.





It is important to understand the broader legislative frameworks we work within to identify the opportunities and limitations of practice. This was highlighted in case study three where immigration status impacts on recourse to public funds. Continued professional development is an essential activity for social workers and is linked to professional registration. Scheduling time to read policy reviews, attend webinars, or participate in local training events will support your knowledge of current policy and increase opportunities to share your learning with colleagues, communities and individuals who use services.





Social justice is a guiding principle for community development and social work practice. Challenging inequalities, discrimination and marginalisation is at the core of our work. As demonstrated in case study four, there is extensive potential for learning and service improvement when the voices of our communities are heard and respected, assisting practitioners to better understand the lived experiences of individuals who use services and the oppression or marginalisation they face. Social workers must consider existing channels for and barriers to hearing the voice of individuals using services and actively seek ways to promote inclusion and equality.





Community development does not happen in isolation; it may take the form of a wide range of interventions and can occur on a continuum. This document has highlighted how community development is about the attitude, value base and approaches used, while recognising there may be practical constraints to social work roles and within practice contexts. Despite such challenges, it is important to start conversations in supervision, team meetings, and training sessions about community development approaches and how these can be integrated into practice. Sharing this document, for example, can promote dialogue and reflection. Furthermore, discussing best practice examples with colleagues and management will further support your team and organisation to consider opportunities to integrate community development across social work.



All of Ireland Endorsement Body for Community Work Education and Training. (2016) All Ireland standards for community work. Galway: Community Work Ireland.

British Association of Social Workers. (2021) Code of Ethics. Available from https://www.basw.co.uk/about-basw/code-ethics [Accessed 16th December 2022].

British Association of Social Workers, Irish Association of Social Worker, Northern Ireland Social Care Council and Coru. (2020) Shaping social workers' identity: An all-Ireland study. Belfast: British Association of Social Workers.

CLARE CIC. (2022) Lockdown life in North Belfast: The stories of older people supported by Clare CIC. Available from http://clare-cic.org/wp-content/uploads/2022/12/LifeinLockdown2022.pdf [Accessed 16th December 2022].

Das, C., O'Neill, M., and Pinkerton, J. (2016) Re-engaging with community work as a method of practice in social work: A view from Northern Ireland. *Journal of Social Work*, 16(2), 196-215.

Department of Health. (2012) Improving and safeguarding social wellbeing: A strategy for social work in Northern Ireland, 2012-2022. Available from https://www.health-ni.gov.uk/sites/default/files/publications/dhssps/social-work-strategy.pdf [Accessed 16th December 2022].

Department of Health. (2016) Health and Wellbeing 2026-Delivering Together. Available from https://www.health-ni.gov.uk/sites/default/files/publications/health/health-and-wellbeing-2026-delivering-together.pdf [Accessed 16th December 2022].

Department of Health. (2017) *The purpose of social work: Improving and safeguarding social wellbeing*. Available from https://www.health-ni.gov.uk/publications/purpose-social-work-improving-and-safeguarding-social-wellbeing [Accessed 16th December 2022].

Department of Health. (2018a) Expansion of Community Development Approaches: Report to Transformation Implementation Group. Available from https://www.publichealth.hscni.net/publications/expansion-community-development-approaches

Department of Health. (2018b) Co-Production Guide for Northern Ireland: Connecting and Realising Value Through People. Belfast: Department of Health.

Department of Health. (2019a) Health and Wellbeing 2026 - Delivering Together progress report. Available from https://www.health-ni.gov.uk/sites/default/files/publications/health/progress-report-full-document.pdf [Accessed 16th December 2022].

Department of Health. (2019b) A learning and improvement strategy for social workers and social care workers 2019-2027. Available from https://niscc.info/app/uploads/2020/12/003232-DOH-Learning-Strategy-v12.pdf [Accessed 16th December 2022].

Department of Health. (2022) Consultation on The Reform of Adult Social Care. Available from https://www.health-ni.gov.uk/consultations/consultation-reform-adult-social-care [Accessed 16th December 2022].

Di Lacovo, F. (2009). Social farming: Re-connecting economy with social needs in rural areas, Combating poverty and social exclusion in rural areas Budapest. 11-12 June 2009 Contribution of Rural Development policies to social inclusion. Available from https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=&ved=2ahUKEwiJ36\_iq-z6AhVKZ8AKHZsvDn4QFnoECA8QAQ&url=https%3A%2F%2Fec.europa. eu%2Fsocial%2FBlobServlet%3FdocId%3D3034%26langId%3Den&usg=AOvVaw3UPD4Gq\_Hp0A22lxhTEVuw [Accessed 16th December 2022].

Duffy, J., Campbell, C. and Tosone, C. (2019) Voices of social work through the Troubles. Belfast: British Association of Social Workers and the Northern Ireland Social Care Council.

Federation of Community Development Learning (2015) The Community Development National Occupational Standards. Available from https://www.fcdl.org.uk/learning-qualifications/community-development-national-occupational-standards/ [Accessed 16th December 2022].

Freire, P. (1970) Pedagogy of the Oppressed. Herder and Herder.

Heenan, D. (2004) Learning Lessons from the Past or Revisiting Old Mistakes: Social Work and Community Development in Northern Ireland, *The British Journal of Social Work*, 34(6), 793–809.

Heenan, D., and Birrell, D. (2011) Social Work in Northern Ireland: Conflict and change. Bristol: Policy Press.

International Association of Community Development. (2018) *Towards shared international standards for community development practice*. Available from https://www.iacdglobal.org/international-standards-accreditation/standards/ [Accessed 16th December 2022].

International Federation of Social Work. (2014) *Global definition of social work*. Available from www.ifsw.org/what-is-social-work/global-definition-of-social-work [Accessed 16th December 2022].

Kelly, D., and Kennedy, J. (2017) Power to people: Proposals to reboot adult care and support in N.I. Available from https://www.health-ni.gov.uk/sites/default/files/publications/health/power-to-people-full-report.PDF

Ledwith, M. (2016) Community development in action: Putting Freire into practice. Bristol: Policy Press.

Mackintosh, M. (1992) Partnership: Issues of policy and negotiation, Local Economy, 7(3), 210-224

McKnight, J., and Russell, C. (2018) Four essential elements of asset-based community development process. DePaul University: ABCD institute. Available from https://www.nurturedevelopment.org/wp-content/uploads/2018/09/4\_Essential\_Elements\_of\_ABCD\_Process.pdf [Accessed 16th December 2022].

McLaughlin, H. (2009) What's in a name: 'Client', 'Patient', 'Customer', 'Expert by Experience', 'Service User', - What's next? *British Journal of Social Work*, 39(6), 1101-1117.

Munford, R., and Walsh-Tapiata, W. (2005). Community development: Principles into practice. In M. Nash, R. Munford, and K. O'Donoghue (Eds.). *Social work theories in action* (p 97-112). Jessica Kingsley Publishers.

Munro, E. (2011) *The Munro review of child protection: Final report (pp. 1–175)*. Department of Education. Available from https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_data/file/175391/Munro-Review.pdf [Accessed 16th December 2022].

National Research and Statistics Agency (2017) Northern Ireland Multiple Deprivation Measure 2017 Local Government District results. Department of Finance. Available from https://www.nisra.gov.uk/publications/nimdm-2017-lgd-2014-results [Accessed 16th December 2022].

Nel, H. (2018) A comparison between the asset-oriented and needs based community development approaches in terms of systems changes. *Practice*, 30(1), 33-52.

Northern Ireland Association of Social Workers. (2012) Social work not paperwork. Cutting bureaucracy in childcare social work. Birmingham: British Association of Social Workers.

Northern Ireland Social Care Council. (NISCC) (2015). Standards of Conduct and Practice for Social Workers. Belfast: NISCC. https://niscc.info/standards-and-quidance

Northern Ireland Social Care Council (NISCC) (2022a) Professional in Practice approved programmes. Available from https://learningzone.niscc.info/file/professional-in-practice-pip-framework-3/module#/id/6099472d9411de1ed781f7bc [Accessed 16th December 2022].

Northern Ireland Social Care Council (NISCC) (2022b). *Mainstreaming community development in social work*. Available from https://learningzone.niscc.info/file/mainstreaming-community-development-in-social-work-presentations-2/module [Accessed 16th December 2022].

Pascoe, K.M., Waterhouse-Bradley, B., and McGinn, T. (2022) Social workers' experiences of bureaucracy: A systematic synthesis of qualitative studies. *British Journal of Social Work* https://doi.org/10.1093/bjsw/bcac106

Pettit, J. (2013) Power analysis, a practical guide. Sida

Pinkerton, J., and Campbell, J. (2002) Social work and social justice in Northern Ireland: Towards a new occupational space. British Journal of Social Work, 32(6), 723 – 737.

Pitchford, M., and Henderson, P. (2008) Making spaces for community development. Bristol: Policy Press.

Pittman, R., and Phillips, R. (2009) An introduction to community development. London: Routledge.

Russell, C. (2020) Rekindling democracy: A professional's guide to working in citizens' space. Wipf and Stock Publishers.

Sansome, J., Hamilton, R., Reynolds, J., and McKeever, B. (2021) *Reflections: Social Work and Co-production*. Department of Health, Belfast. Available from https://www.scie.org.uk/northern-ireland/reflections/social-work-co-production [Accessed 16th December 2022].

Scottish Executive. (2004) Partnership working research report: Social and economic partnership project. Edinburgh, Scotland. ISBN 075594139X Available from https://www.gov.scot/publications/partnership-working-research-report-social-economic-partnership-project/pages/1/ [Accessed 16th December 2022].

Shannon, B. (2019, August 9th) Why language matters. Rewriting social care. Available from https://rewritingsocialcare.blog/2019/08/09/why-language-matters/[Accessed 16th December 2022].

Social Care Institute of Excellence. (2018) What are asset-based approaches? Available from https://www.scie.org.uk/integrated-care/research-practice/enablers/asset-based-places [Accessed 16th December 2022].

Social Care Institute of Excellence. (2015). Co-production in social care: What is it and how to do it. Available from https://www.scie.org.uk/publications/guides/guide51/ [Accessed 16th December 2022].

Truell, R., and Crompton, S. (2020) To the top of the cliff: How social work changed with COVID-19. Rheinfelden: International Federation of Social Workers.

Turbett, C. (2020) Rediscovering and mainstreaming community social work in Scotland. IRISS Insight 57. Available from https://www.iriss.org.uk/resources/insights/rediscovering-and-mainstreaming-community-social-work-scotland [Accessed 16th December 2022].

Vene Klasen, L. and Miller, V. (2007) *A new weave of power, people and politics: The action guide for advocacy and citizen participation.* Oklahoma City, OK: World Neighbours https://justassociates.org/all-resources/a-new-weave-of-power-people-politics-the-action-guide-for-advocacy-and-citizen-participation/ [Accessed 16th December 2022].

Ward, A., Ruch, G., and Turney, D. (2018) Introduction. In G. Ruch, D. Turney and A. Ward (Eds.), Relationship-based social work (2nd ed., pp. 13-16).

Yerbury, H. (2011) Vocabularies of community. Community Development Journal, 47(2), 184-198.



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