

## Chapter 7

# Arenas for Critical Multicultural Practice

Social workers who are committed to social justice must join the struggle against oppression in all its forms and at all levels at which it occurs.

Bob Mullaly, *Challenging Oppression*

History is filled with calculated and sometimes brutal instances of exclusions of people of color, women, people who are GLBT, and people who are disabled. Systemized sexism, racism, homophobia and heterosexism, ableism, transphobia, and classism continue to be a problem in society. These conditions affect communities, the lives of clients, the daily practice of social work, and social workers on multiple levels. The barriers are structural, limiting access to education, employment, housing, and health care. Social and economic policies maintain this limited access, and social systems reinforce the inequality by failing to recognize or acknowledge oppressive structures and assumptions of normality. As a result, individuals, families, and communities face roadblocks that can forestall growth and create stress in relationships. This unequal access to opportunities has an intergenerational impact because future generations cannot build on the successes of their parents and grandparents.

Oppressive social patterns permeate our communities, organizations, and interpersonal relationships. Failure to disrupt these mechanisms is to lose one's basic humanity (Mullaly, 2002). In growing to understand our own culture and community and its impact upon our experiences of oppression and privilege, we can begin the process of change. This is a change that begins at the individual and global levels simultaneously.

Critical multicultural practice is anti-oppression practice. It is a form of practice that is grounded in "issues of representation and democratic inclusiveness with its roots in the relationship between politics and power, within the context of a historical past and a living present" (Van Soest, 2003, p. 345), and the hope of a more inclusive future. The development and implementation of social and economic policies have consequences that affect individuals.

Societal values underlie policy decisions. In the United States, poverty rates are high, individualism and competition are valued, and individuals experiencing poverty are viewed negatively. In a society such as Norway, on the other hand, collectivity and cooperation are valued and poverty rates are low. The Norwegian value base supports "(1) egalitarianism and the collective ideal, (2) trust in the social system, and (3) kindness toward the weak and vulnerable"

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(van Wormer, 1994, p. 325). The value base underlying the development of policy in the United States can be recast to support a commitment to the collective well-being and egalitarianism. The interplay between social and economic policy, the communities in which we live, the media, the organizations in which we work, and our families demands a multilevel response. While working toward policies that are socially and economically just, we must also heal our communities, reorganize the organizations in which we work, and support the individuals and families that are wounded by unresponsive or ineffective systems.

Because people exist within environments, healing is contextual. A new narrative that recognizes the impact of oppression and sets the stage for healing internalized oppression must be constructed. Individual, family, and community characteristics can buffer the impact of adversity. In recognizing the similarities and differences between individuals, one values the uniqueness of each human being. "Certainly this attitude and approach to people as particular persons is the beginning of cultural competence" (Lum, 2003, p. 34).

Social work is a profession that acknowledges that "people should be perceived not only as individuals, but also as members of social groups and cultures affected by the social, economic, and political conditions in which they live" (Kahn, 1991, p. 2). This orientation becomes increasingly important as the diversity of the population in the United States grows. This means learning to listen, and listening to learn about how lives are shaped. It means learning how others view family, community, and themselves, and learning how people cope with adversity and success. Within this context social workers need to develop an appreciation for the interaction between resiliency and oppression (Long & Nelson, 1999).

### Intersecting Differences

Individuals, families, and communities do not exist in a vacuum or in isolation. Within each is a complex intersection of identities involving ethnoracial group, gender and sex, and sexual orientation as well as ability, economic resources, history, language, nationality, and religion. Just practice requires the worker to acknowledge and understand "the intersection and complex interaction of multiple social identities and a continuum of harm and privilege that confer these identities" (Van Soest, 2003, p. 345).

The multicultural mosaic is a constantly changing one. Contact between cultures, traditions, and beliefs has resulted in a blending of cultures, and the formation of new cultures. Traditional ways of being and knowing are honored while the elements of the dominant group that are necessary for survival are embraced. Conversely, members of the dominant culture adopt the traditions of marginalized communities, which gives them a glimpse of the world of the "other." Embracing traditional elements of the "other" alters one's worldview, creating opportunities to examine one's own values and beliefs. Some members

of communities of color hold steadfast to traditional ways that both support and nurture members; other members of communities of color embrace a more Eurocentric worldview and have been able to flourish and maintain a unique cultural identity. As one engages in practice, it is vital to honor the individual and her or his complexity, acknowledging the intricacies of community, culture, and history.

### Policy and Community

Social problems in the United States and the human misery they create continue to arise. Although it is the responsibility of the government to promote the well-being of all citizens, responses to these problems are increasingly inadequate as the growth of wealth becomes more and more concentrated among the few (Kahn, 1991). "The wealthiest 1 percent of the American population holds 38 percent of the total national wealth. . . . The richest 20 percent of Americans hold 83 percent of the total household wealth in the country. . . . Approximately 12 percent of the American population—one in every eight people in this country lives below the official poverty line. . . . Among the poor are over 2.3 million homeless, including nearly 1 million homeless children. Approximately one out of every five children in the United States under the age of six lives in poverty" (Mantsios, 2004, p. 195). As the division grows ever wider, we must ask not only who is left out, but also why.

Collective action can disrupt the negative impact of the social and economic policies confronting marginalized communities (Kahn, 1991). The process offers the potential for growth by providing an opportunity for people to find their voices, develop collectivity and skills, and create hope. As individuals work together toward community change, individual and relational dynamics are restructured. Individuals are empowered as they advocate change. In the process, worldviews, relationship patterns, and personal potential are altered.

Caring, compassion, and spiritual commitment produce powerful emotions for motivating change. A renewed sense of hope is engendered as collective action engages the social and political process through advocacy, organizing, and community building. Organizing creates an environment in which individuals and communities can learn to share power and work toward empowerment (Kahn, 1991). While this can be challenging, it can also lead to the development of comradeship and collective empowerment as social justice values are translated into practice.

Mullaly (2002) asserts that "If, in our personal lives and in our social work practice, we assist in making oppression acceptable by helping people to cope with it or adjust to it, we not only fail them, we fail ourselves and we become part of the problem" (p. 211). Effective practice with individuals and communities of color requires social workers to address macropractice issues (McPhatter, 1997). Likewise, macropractice techniques are effective with other oppressed communities. This involves the use of interventions with systems,

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organizations, and service providers. The ability to organize has always been empowering for women. WomanSpirit of St. Louis, Missouri, offers a model for organizing and mobilizing African American women to influence policies locally, nationally, and globally (Prince, 1999). They work across generations, providing resources and fostering empowerment at the individual and community levels. Organizations such as this exemplify the phrase “The personal is political.”

### **Practice with Individuals and Families: Understanding Community Context**

Culture, class, resources, and social context are critical elements that shape struggles and affect an individual’s ability to develop coping resources (Devore & Schlesinger, 1998). These interactions influence the development of individual, family, and community worldviews (Lum, 2003). Family and community class roots interact with the income, education, and lifestyle of an individual. The interchange is a complex one in which strengths frequently intermingle with fears and vulnerabilities. Situational interchanges, historical and cultural influences, and the interpretation of experiences affect the construction of meaning, vision, and perception.

A thorough assessment of individual, family, and community culture allows practitioners to begin to explore appropriate models of practice. Racism, classism, sexism, homophobia and heterosexism, transphobia, ableism, and other forms of discrimination and oppression are a part of our lives and therefore must be considered for their possible effects on people’s lives (Lum, 2003). The rise in nationalism in the United States is increasingly isolating for the country (Friedman, 2006). The accompanying anti-immigrant feelings create a negative environment that social workers need to be aware of when working with refugees and other immigrants.

An ethnoracial assessment involves a clarification of the client’s (and worker’s) interpretation of the significance of events and their meaning for the client, which decreases the possibility that the worker will miss vital information (Jenkins, 1988). This exploration of identity is key to understanding the multicultural context and environment of individual and familial functioning, group identity and membership, broad value perspectives, and sources of strength and stress. By acknowledging and understanding the historical and structural dimensions of racism, classism, and other forms of oppression, a practitioner can engage in the critical reflective process. Kondrat (1999) recommends two levels of questioning to assist in this process. First, ask global questions:

1. What are the structures of my society in particular that are related to power and inequality and marginalization?
2. On what basis are these structures rationalized by society?
3. What is my location in relation to each of these structures?

4. Who benefits from such structural arrangements, and who loses? How do I benefit or lose?
5. In what ways do my assumptions and activities contribute to the maintenance and/or transformation of such social structures?
6. What have I discovered about the extended structural consequences of my social activities and that of others? (p. 465)

Next, ask questions about your own cultural assumptions and worldviews. What are your values and beliefs and your interpretations of your world, and what are those of people who are different from you? How do these beliefs affect your actions and interactions between yourself and others? Social workers who engage in this reflective process are better equipped to help clients move through a similar process as one component of healing.

A process of self-assessment can assist clients in recognizing their own assumptions, beliefs, and values, along with the changes they desire (McMillen, 1999). The individual is the creator of the story that is told. The social worker only facilitates the telling of the story. Leigh's (1998) ethnographic interview is one tool that can be used to guide this process. The ethnographic interview supports an interactive process of learning about the individual within her or his context. It begins with a global exploration of culture and history and then comes to focus on the individual. Personal and family history, multilevel resilience factors, and experiences of abuse and trauma are evaluated. Individual, family, and community strengths and resources are assessed. The process of building rapport opens a window to the client's worldview and cultural interpretation of events.

The models of practice used must be congruent with the client's dimensions of difference, community values, and worldview. For instance, individualistic models of practice are incompatible with the focus on extended family and community connections in many indigenous cultures (Weaver, 1999). Interventions that build from systems theory, emphasize the social environment, and embrace the strengths perspective often are a better fit for oppressed populations (see Lum, 2003, for a presentation of treatment models).

Feminist models and other critical models of practice incorporate an awareness of the types of oppression faced by women and other communities (Appleby et al., 2001). These models support practice that assists clients in understanding the role of both social constraints and opportunities in shaping their lives (Garnets & Peplau, 2001). Social workers must be aware of and sensitive to the issues faced by the different groups with whom they work. These issues have an effect on daily living, personal adjustment, access to resources, and coping mechanisms.

People who are members of oppressed groups are affected by societal and professional attitudes, biases, and actions. For example, transgender individuals may be coping with feelings of guilt, shame, fear, anxiety, low self-esteem, anger, and isolation as a result of societal intolerance. They bring with them

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family history (positive and negative), personal trauma, interactions with social networks, adjustment issues, and possibly depression and addictive behaviors. A social worker's comfort with and knowledge of the issues faced by transgender clients are significant determinants of the quality of interaction. The issues are exaggerated for people of color who are transgender (Gainor, 2000).

Working with refugees and other immigrants means recognizing the multi-layered loss experienced by refugees and other immigrants of friends, family, language, and general comfort. For refugees, this is often compounded by a history of terror and multiple displacements (Devore & Schlesinger, 1998; Schmitz, Vazquez Jacobus, Stakeman, Valenzuela, & Sprankel, 2003). The loss is exacerbated further for refugees and other immigrants who are women, particularly those of color (Lie & Lowery, 2003). These women must redefine themselves within a Eurocentric context. This involves negotiating new surroundings with unfamiliar sights and sounds, interactional patterns, social relationships, structural forces, and language patterns. Refugee women have the "added burdens of issues emanating from the horrors of war, forced migration, and relocation" (Lie & Lowery, 2003, p. 299). Families from immigrant and refugee communities entering new lives in the United States are at risk of traumatic adjustment. Federal policies impact them directly and indirectly, privileging some while challenging others. "It is incumbent upon social workers, as professionals committed to social and economic justice, to comprehensively understand the range of obstacles facing immigrants and refugees and empower them in their struggle to make a healthy adjustment" (Schmitz et al., 2003, p. 135). At the same time, immigrant and refugee women of color can find strength and rewards within the new cultural context. Women from some communities find that in the United States they have greater equality in gendered relations. This change has an impact on individuals as well as communities. Family relationships can change, and depression can follow as men lose their privilege.

The ableist attitudes of society also affect social workers. As a result of these attitudes, social workers may underestimate the capabilities of individuals with disabilities, which may limit the options workers envision for their clients (Mackelprang & Salsgiver, 1999).

### Assessment and Practice from a Critical Perspective

Critical assessment and practice involves building knowledge regarding historical and social policy views, ecological as well as ethnoracial and class contexts, and feminist and other anti-oppression perspectives. Ecological assessment sets the stage for informed response, providing an outline for evaluation of the dimensions of personal and structural oppression experienced by clients. Through anti-oppression practice, clients are engaged in tasks that help them remediate the damage created by oppression while also creating solidarity by building community (Mullaly, 2002). The triumph experienced by the client engaged in the social change process builds strength.

Walters, Longres, Han, and Icard (2003) state, "A key skill [in culturally competent practice] is the ability to take the role of others, that is, to see the world from the standpoint of one's clients, and from that position, to work with them and their communities to improve their lives and their social and economic conditions" (pp. 329–330). Social constructivist theory supports this model of practice by framing analysis around how clients make sense of the activities and events in their world. The interchange between people and their environmental, cultural, and historical contexts is emphasized by social constructivist theory. Understanding this interchange between a person and her or his environment, and the meanings she or he attaches to that interchange, is critical to a meaningful assessment (Mallon, 1999b). The strengths-based and narrative models of practice build from the social constructivist theory and enable this process.

### Strengths and Empowerment

The strengths-based model is recognized as suitable for practice with individuals, families, and communities of color (Devore & Schlesinger, 1998). This model provides an opportunity to view individuals, situations, and environments from a perspective of possibility and resilience (Saleebey, 2002). The impact of adversity is heavily influenced by a person's resilience. Multiple factors on the individual, family, and community levels support the development of resilience. This knowledge is critical in work with marginalized populations. Cultural connections and positive racial pride are dimensions of resilience (Lafromboise, Coleman, & Gerton, 1993; Miller & MacIntosh, 1999). For instance, "resiliency in Native American communities involves an interdependence of factors that are relational rather than linear" (Long & Nelson, 1999, p. 104). In indigenous communities, positive cultural identification and participation in traditional events buffer the impact of adversity (Waller & Yellow Bird, 2002). Similarly, positive identity development in lesbians and gay men of color can buffer the stresses of heterosexism and homophobia, sexism, and racism (Walters et al., 2003). Identifying resilience and survival strategies in individuals, families, and communities of reference facilitates the development of coping strategies and supports growth.

Strengths-based practice is focused on exploring opportunities, capabilities, capacities, and possibilities (Mackelprang & Salsgiver, 1999). It is an affirming model of practice that fosters discovery and growth. Workers help clients engage in the exploration and reinforcement of strengths with the goal of developing and realizing dreams (Saleebey, 2002). For instance, models of strength combined with supportive practice environments are vital in work with transgender children and youths (Mallon, 1999b). These lessons are significant for work with the broader lesbian, gay, bisexual, and transgender communities, as well as other marginalized and stigmatized communities. When working with persons with disabilities, the social worker might work individually and collectively, empowering individuals by encouraging involvement in

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community and policy change (Mackelprang & Salsgiver, 1999). Individual strengths are nurtured, while environmental resources and community responsiveness are increased.

Through the empowerment process, individuals and groups that previously saw themselves as powerless are supported as they engage in collaborative change. The expansion of supportive environments, identification of resources, provision of training, and development of mechanisms for addressing social stigmatization and oppression are components of empowerment practice (Mallon, 1999c). Assessment, as well as intervention, is grounded in multi-level knowledge about the personal and systemic/structural issues. Stories are retold from a position of strength and resistance, rather than from a position of isolation and assimilation (Walters et al., 2003).

Increased awareness regarding the forces of oppression fuels the process of growth (Appleby et al., 2001). Personal narratives become a tool for supporting the development of the skills needed to acquire control (Tully, 2000). This is a visioning approach that incorporates individual, community, and neighborhood resources and strengths (Mackelprang & Salsgiver, 1999). The provision of advocacy and the alleviation of isolation and depression through community action empower individuals and communities. This dual focus on the individual and issues of social and economic justice strengthens marginalized communities (Appleby et al., 2001).

### Narrative and Story

Narrative practice builds from the theory of social construction (Holland & Kilpatrick, 1993). Life stories are shared in interactions between the social worker and the client (Lum, 2003). Narrative and storying emphasize strengths, providing the base for a positive approach to practice (Saleebey, 1994). Stories can build bridges to connect communities, and therefore the use of stories in social work practice supports multicultural practice (Holland & Kilpatrick, 1993). Narrative practice occurs as the social worker and client explore the client's stories about cultural myths, rituals, and concerns from which people, families, and communities construct meaning.

Stories and storytelling are methods for creating, sustaining, and transmitting meaning (Holland & Kilpatrick, 1993). Because meaning is socially constructed through exchange and interchange, storying provides a venue for the social worker to facilitate change. The collaborative exploration of stories offers individuals, families, and communities the possibility to restory, reframe, and reorganize the narrative so that it becomes one of empowerment. As Saleebey (1994) notes, "Meaning, whether manifested in story, narrative, vision, or language, affects intention and action, feeling and mood, relationships, interactions with the surrounding world, well-being, and possibility" (p. 355).

Reflection on the stories people tell allows workers to increase their understanding of the client's worldview and life experience (Holland & Kilpatrick,



1993). The highlighting of positive life experiences and supportive relationships and interactions helps the client focus on success and her or his potential. The practitioner assumes an interpretive role by listening, identifying themes, and reflecting on clients' reactions to events and their stories. Sensitivity facilitates the process of reconstructing the story (Holland & Kilpatrick, 1993).

Narrative and storying support a process that allows us to modify or broaden worldviews, acknowledge multiple perspectives, and alter interactions with others (McMillen, 1999). Because adversity can leave people with feelings of guilt and shame, supporting people in building more positive and empowering memories of negative events facilitates the process of growth. Positive associations allow people to view painful memories from a different perspective. Facing adversity, recognizing the potential for growth, building self-esteem, and viewing oneself as capable creates resilience. Recalling memories of successful coping helps people embrace the totality of their experience, not just the pain.

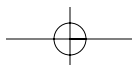
Through restorying, lesbian, gay, and bisexual individuals, as well as their families, can build self-esteem, an internal sense of worth and value, and a vision of a future with positive possibilities. Practice with lesbians and gay men involves learning the significance of the coming-out story and the impact of homophobia and heterosexism (Pearlmutter, 1999). It also means respecting individual and family choice regarding the process. Reframing is also empowering in helping lesbians and gay men of color stop feeling caught between four communities (the gay or lesbian community, the ethnoracial community, one's gender group, and the community of gay or lesbian people of color) and appreciate and take advantage of the opportunity to act as a cultural bridge (Walters et al., 2003).

### Organizational Context

Culturally effective practice must occur in all activities and at all levels of an organization (McPhatter & Ganaway, 2003). Key leaders within the organization set the tone, and their support is crucial as commitment to becoming critically multicultural is rallied. The process of transformation is supported through structural and environmental change, along with training and knowledge building. Spaces designed to be inclusive of marginalized populations tend to display an overall welcoming environment. These organizations are also likely to exhibit a commitment to advocacy and community change.

Culturally responsive supervisors are key to critical multicultural practice. A collaborative reflective process helps supervisors recognize cultural positions and biases, and collective learning through storytelling helps supervisors foster cultural competence among workers (Abt-Perkins, Hauschildt, & Dale, 2000). Through this process, supervisors and workers come to examine their blind spots, fears, and silences.

A knowledge of organizational dynamics and a multisystem process guide organizational transformation (McPhatter, 1997; Mallon, 1999a). McPhatter and



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Ganaway (2003) outline five stages in the change process: pre-contemplation, contemplation, preparation, action, and maintenance. The methods of engagement shift with each stage. Pre-contemplation requires education about the issues regarding different cultures and populations. In the contemplation stage, the problem is identified and dialogue regarding change begins; the plan for change is outlined and engaged in the preparation phase. In the action phase, the change begins in earnest. Finally, in the last stage, maintenance, the change is solidified.

#### Conclusion

The skills and knowledge essential for critical multicultural social work support enriched practice with all populations. Effective practice is holistic, taking into account the totality of context and identity. Social workers are charged with advocating the rights and needs of clients and promoting culturally competent practice (see National Association of Social Workers, 1996, 2003). In our work, at all levels and systems, we are obligated to identify human rights concerns, social inequities, instances of oppression, and other forms of injustice.

Oppressive social and economic forces must be acknowledged, and social justice-oriented policies and structures must be promoted in work at the micro, mezzo, and macro levels (Mackelprang & Salsgiver, 1999). The quest for social and economic justice is supported by practice models that engage the strengths perspective and theory of social construction (Devore & Schlesinger, 1998). To achieve justice as the world grows smaller through the process of globalization, the United States will have to change its commitment of resources to support education, health care, retraining, and Social Security/pension funds (Friedman, 2006). Unless we develop compassionate and responsive systems, we will continue to fall further behind in this quest each year.