Social Justice WANTED

Our response to
COVID-19
Racism
Injustice &
Exploitation

2020-2021
# Table of Contents

**Social Justice Wanted | 2020 – 2021**

<table>
<thead>
<tr>
<th>Introduction, Anna Scheyett</th>
<th>1</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Faculty Statement on Social Justice</strong></td>
<td>3</td>
</tr>
<tr>
<td><strong>The School of Social Work Responds To:</strong></td>
<td></td>
</tr>
<tr>
<td>COVID-19</td>
<td>5</td>
</tr>
<tr>
<td>Care, Social Justice and Compassion in Response to COVID-19, <em>Llewellyn J. Cornelius</em></td>
<td>5</td>
</tr>
<tr>
<td>Clinical Response to COVID-19, <em>Kate Morrissey Stahl</em></td>
<td>7</td>
</tr>
<tr>
<td>The Intersection of Ageism and Racism in a COVID-19 Era, <em>Tiffany Washington</em></td>
<td>15</td>
</tr>
<tr>
<td><strong>Racism</strong></td>
<td>17</td>
</tr>
<tr>
<td>School of Social Work Statement on Racism and Social Justice</td>
<td>17</td>
</tr>
<tr>
<td>Addressing the Policing Crisis: Michael Robinson Looks at the Lethal Use of Force and Needed Changes, <em>Laurie Anderson</em></td>
<td>18</td>
</tr>
<tr>
<td>A Personal (Re) Dedication to Social Justice Efforts in Black/African American Mental Health, <em>Rosalyn Denise Campbell</em></td>
<td>21</td>
</tr>
<tr>
<td><strong>Racism continued</strong></td>
<td></td>
</tr>
<tr>
<td>Historical Trauma, Social Work and Social Justice, <em>Jennifer Elkins</em></td>
<td>23</td>
</tr>
<tr>
<td>Parham Policy Day Highlights the Impact on Social Policy on Society, <em>Laurie Anderson</em></td>
<td>29</td>
</tr>
<tr>
<td><strong>Injustice and Exploitation</strong></td>
<td>31</td>
</tr>
<tr>
<td>Human Trafficking, Social Justice and Social Work, <em>David Okech</em></td>
<td>31</td>
</tr>
<tr>
<td>Social Justice and Gender-Based Violence on College Campuses, <em>Adrienne Baldwin-White</em></td>
<td>33</td>
</tr>
<tr>
<td>To Build a Better World: Now is the Time for a Rights-Based Approach to Social Work Practice, <em>Jane McPherson</em></td>
<td>35</td>
</tr>
<tr>
<td>The Social Worker Engaged in Social Policy, <em>Yosha Dotson</em></td>
<td>39</td>
</tr>
<tr>
<td><strong>ProSEAD™ Syllabus</strong></td>
<td>42</td>
</tr>
<tr>
<td><strong>Social Justice Relevant Faculty Publications (By Topic)</strong></td>
<td>44</td>
</tr>
<tr>
<td><strong>Call for Papers, Journal of Poverty</strong></td>
<td>57</td>
</tr>
</tbody>
</table>

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**Social Justice Wanted | 2020–2021**

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A core commitment at the University of Georgia School of Social Work is to promote social justice and oppose injustice in all its forms. Our roots in social justice work go deep. Founded in the 1960s during the civil rights movement, our commitment to social justice began with the School’s inception and continues to this day. Among our most notable social justice endeavors are the longstanding Foot Soldiers of the Civil Rights project, led by Maurice Daniels, and the establishment of the Center for Social Justice, Human and Civil Rights, led by Lee Cornelius.

Over the past four years, the faculty of the School of Social Work have been impelled to action by the strife and injustice in our communities, and particularly by the recent crises of racial violence, pandemic, and economic downturn. We have engaged deeply with the construct of social justice, working together to create a clear vision of what social justice means to us. This reflection and co-construction created great energy and resulted in significant change. Several notable efforts come to mind. First was the revision of the MSW curriculum, re-grounding our teaching in our social justice mission. The foundation of this curriculum is a course entitled Addressing the Bases of Power, Oppression, Social Justice, Evidence-Informed Practice, Advocacy, and Diversity (affectionately known as PrOSEAD). The description and learning objectives for this course are found later in this document.

A second effort was the creation of the Faculty Social Justice Statement. This statement was crafted over many months. It began with an open discussion of social justice, where we raised the question “How can we work for social justice if we don’t have a common understanding from which to build?” This was followed by facilitated card-storming and concept-sorting sessions. Faculty worked in groups to complete the sentence “At the UGA School of Social Work, social justice is...” and sorted the resultant phrases into conceptual categories. Later, each
category of phrases was given to a group of faculty, who integrated the concepts into a statement sentence. These sentences were then gathered and synthesized into a draft statement on social justice. Three iterations of this statement were revised, amended, and enriched by faculty until a final version was completed. Faculty voted unanimously in support of the statement at our faculty meeting of September 15, 2017. The Faculty Social Justice Statement is found on the next page of this document.

Last year we launched a new project, the Social Justice Common Book Initiative, reading *We Need to Talk: How to Have Conversations That Matter* by Celeste Headlee. During orientation, we held small group discussions where students made connections between the book’s content and social work’s mission, and used the book’s ideas to discuss difficult topics in the classroom throughout the year. This year, incoming students across all of our programs are reading *Give Us the Ballot* by Ari Berman, looking at voting rights and issues—particularly important in an election year. More about the Social Justice Common Book Initiative can be found later in this document.

The dual crises of the COVID-19 pandemic and the ubiquitous violence against Black people have spurred us to ever-growing action. We have focused our service and research on work in the community, on addressing disparities and racial injustice, on antiracist activities. We have just begun—there is so much more work to do to dismantle social and racial injustice. Our faculty are committed to the ongoing work, and you will be hearing more in the months to come. Some of our faculty have reflected on their work as it relates to COVID-19, to racism, and to other forms of injustice and exploitation. These essays as well as citations for articles, chapters, and books, are also included in this document for your information. They are not simply a compendium of the past, but a guidepost for the way forward. We share these resources with you and hope they will help us all in our ongoing work for social justice.

Peace,

Anna Scheyett, PhD, MSW
Dean and Professor
University of Georgia School of Social Work

FACULTY STATEMENT ON SOCIAL JUSTICE

Developed through a collaborative and synthetic faculty discussion process.

At the UGA School of Social Work, we believe social justice occurs when systems of all sizes (individuals, families, communities) are able, safely and dependably, to obtain the civil and human rights and resources they need to thrive. These include but are not limited to health, economic growth, social rights, equity, inclusion, safety, freedom to move about the world; social support, food security, a clean environment, education, employment, childcare and housing. Eliminating social injustice is central to our work as social workers, requires brave and assertive action and effort, and must be present in all we do and say. The School of Social Work advocates for social justice by fighting for the rights of people and communities, particularly those who have experienced marginalization, stigma, discrimination, and oppression of any form. We partner with communities in Georgia and around the world to embrace and speak truth to power and privilege and to promote change for social justice in our classrooms, our research, and our service.

Approved unanimously by the faculty of the School of Social Work, September 15, 2017
Social Work Responds to COVID-19
I write this essay in honor of the spirit of Langston Hughes' character Jesse B Semple (also known as Simple), who spoke plainly in the 1940s Chicago Defender—an African American newspaper—about what was on the everyday persons’ mind. In that vein, this essay focuses on what everyday people are crying out to us about, what they need from us NOW as they are coping with COVID-19 as well as what all of us can do to help.

What am I hearing from everyday people? Or to quote Chris Tucker, "Do you hear the words that are coming out of my mouth?" This is what I recently heard from someone living in a small low resource rural community that is highly impacted by the coronavirus. “What are you doing right now to help me eat, help me keep my job and help me not get evicted from my apartment?” In the same conversation, they said that they were “afraid to answer their phone because of COVID.” Because they are afraid, they will hear that “yet another person they personally know of” has just died from the coronavirus. At the same time, “they can’t go to that funeral” and “will never get to see their body.” When I asked further, they responded by saying that they and others in their community "feel awful that they can’t be with their loved ones who are isolated by themselves in hospitals or a quarantine site."

During the same week, I heard another cry for help. I was on a 90 minute regularly scheduled monthly conference call with more than 50 mostly older adults across the U.S. that focused on planning cultural activities in their communities. After 83 minutes passed on this Zoom call, without a single question or comment from the leadership team about how individuals on the call were dealing with COVID-19, an upset community partner interjected: “I just had five people die in my community, and I can't believe we are on this call carrying on like business as usual.” What ensued was 10 minutes of defensive responses from the leadership team about how individuals on the call were dealing with COVID-19, an upset community partner interjected: “I just had five people die in my community, and I can't believe we are on this call carrying on like business as usual.” What ensued was 10 minutes of defensive responses from the leadership team, followed by deflecting from the issue presented by the upset caller, which clearly showed that the leadership team was far more concerned about their organizational planning activity then they were about the pain that everyday people were feeling then.

I know these observations are not unique to me as we hear these same cries for help...
In our work, on the TV media, and on social media. The underlying message being conveyed is this is NOT business as usual.

In effect, we are ALL being asked by these everyday people: Are we listening with our hearts instead of our heads??? What appears to be coming out of these cries for help is that people are afraid, overwhelmed, and stressed out, and worried about their basic human needs. They are worried about going hungry. They are worried about being evicted or worried about getting sick. They are overwhelmed by the loss of those dear to them or being hindered from being with them in the hospital or nursing home and overwhelmed by the loss of many of the priceless things that we all take for granted like simple hugs, real live three-dimensional encounters, like simply being able to congregate anywhere.

In response to these cries, maybe we need to ask ourselves as helping professionals, are we balancing basic mindfulness/self-nurturance with being “present” for others? Are we also telling other everyday people that WE all need to take care of ourselves and each other? When someone is being evicted, they do not want to hear about our next project, peer review article, grant, or presentation. Around the world, WE are being tested to “do” as opposed to “theorize, conceptualize and talk.” Yes, while social justice is about empowerment, liberation, advocacy, agitation and so on, it is also about being emotionally present and compassionate in response to the tidal wave of requests for our compassion and concrete basic assistance that we are experiencing.
We began to appreciate the array of specialties in our community, how we might learn from one another, and how each could be mobilized to serve the wider community. Clinical social work is my specialty, so I will share some of the work we did in this capacity.

COVID–19 made even more obvious deep disparities in healthcare access and challenges for well-being. In Athens, the behavioral health community rallied around three groups: medical workers, small business owners, and vulnerable populations. Early efforts on a local clinical therapist listserv included gathering a list of providers to support healthcare workers on a sliding scale as needed.

As the pandemic wore on, there was increasing need for clinical referrals and Employee Assistance Program referrals. In my clinical life, I made time to expand support for vulnerable populations, including healthcare providers. In the field, clinical work shifted by moving online. This shift happened quickly even at larger clinics and at a training clinic that I supervise. This shift to online was especially important for providing support to another group I serve extensively: the LGBTQ population. Suddenly, my clients receiving gender affirmation treatment were slowing down the treatment as some services were considered elective. Clients who had moved away from home or had
tenuous relationships with their families were considering whether and how to connect. On the other side, people who had been single for years were seeking out sex therapy services during the pause provided by the pandemic as the isolation they experienced in social distancing made them realize they did want sexual relationships in their lives. COVID-19 impacted different groups differently, shifting life in both welcome and unwelcome directions.

Students also have been worried about the job market. I explored the question of hiring students after graduation and hired a graduate to provide sliding scale therapy under my supervision at the clinic I own. In addition, we offer donation-based yoga in this space, and spent time as a group becoming more educated on trauma-informed approaches to yoga, including active anti-oppressive approaches in the definition of trauma-informed. A current MSW student interested in trauma and yoga joined the book club after he expressed his overall interest to me. The yoga side of the clinic works primarily by donation, so as we worked to decide about when to safely open, we also considered how to continue our mission to share valuable mindfulness practices in affordable and safe ways with the community. We also listed our clinic on a design site shared by Associate Professor Kristina Jaskyte. Thanks to our diverse faculty, we received much helpful advice about how to pivot in response to the pandemic.

With all of these upheavals, I considered and discussed with colleagues how to expand questions of healthcare disparities and cultural trauma in the class on behavioral methods. If clinicians are offering services that do not situate the individual in their social context in meaningful ways, including addressing the problem of white supremacy with white clients, they are missing out on a crucial element of addressing human suffering.

It is also an ethical responsibility of social workers to respond to social justice issues in our communities and countries. For that reason, clinical social workers in Athens and faculty members circulated petitions and spoke at a town hall in support of a proposal by two commissioners in Athens to increase social service options and decrease police interventions so that relatively minor infractions would be less likely to escalate to violence. The School of Social Work provides a clinical education that emphasizes the impact of social oppression and need for social responsibility while also understanding the individual manifestations of these forces.

As protests move through the country; as the drumbeat of violence against people of color grows louder; as a white woman threatens a Black man in Central Park with calling the police and emphasizing his race; as police suffocate George Floyd in full view; as Rayshard Brooks is killed by police in Atlanta: the need for change is obvious. We see a unique opportunity and responsibility to provide support and community as we work toward that change.
A sizable body of literature now exists that highlights the relationship between social capital resources and health status as a result of the positive health returns associated with social ties. These studies have established that increased levels of social capital are essential determinants of better health. We refer to social capital as the notion of social growth being cultivated through relationship building.\textsuperscript{1,2} Given that health differences among racial and ethnic populations are tied to economic and social conditions, which are potential byproducts of social capital, it is essential that consideration is given to the impact the coronavirus disease 2019 (COVID-19) has had on the undocumented Latino day laborer (LDLs) community. This paper addresses how this virus has eroded the social capital resources on which LDLs rely on for better health and health outcomes.

The development of social capital has to be placed within the context of social class, power struggles, and positionality,\textsuperscript{1} which is why we maintain that the loss of social capital for LDLs has occurred as a result of social policies and a politically hostile environment. Policies and ordinances enacted during this pandemic have reduced social capital levels that may lead to inadequate resources that promote and sustain a better health condition. Social capital resources influence health outcomes through four health-related pathways: social support, social influence, social engagement, and access to resources and material goods.\textsuperscript{3,4} These pathways have been diminished in several ways. For example, stay-at-home orders have shut...
down the most valuable asset for LDLs—the street corners and parking lots of home improvement big box stores. That is a significant loss given that the physical spaces provide LDLs valuable fellowship, support, engagement, and access to critical job-related information. In the process of interacting with one another, LDLs have the potential to combine and utilize resources to help each other. However, this is not possible given that shelter-in-place orders discourage LDLs from going outdoors. Some have interpreted social distancing and self-quarantine orders as social isolation and avoiding socializing with others outside of their immediate social circles. Closing this physical space has also diminished LDLs’ ability to share their personal narratives, which is how they typically foster a stronger sense of community.

The pandemic has hurt LDLs socially; however, it has also diminished their economic opportunities. The corner is where jobs are secured but also where LDLs exchange valuable information about which jefes (employers) are hiring, which jefes have exploited workers, and which ones are notorious for wage theft. Typically, day labor is negotiated outside in public spaces where day laborers congregate to look for work. Due to COVID-19, many of the industries in which LDLs work, such as landscaping, renovation, gardening, roofing, and construction, have been closed or temporarily suspended. Only the construction industry is considered an essential business in many U.S. regions, which is where LDLs have found some financial reprieve. However, they have really been hurt economically by the absence of

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Latino day laborers wear face masks donated by the women of #MujersLiderando, a group of immigrant women that are part of La Colmena, a community nonprofit organization working with day laborers, domestic workers and other low wage workers in Staten Island, New York. Photo retrieved from https://bit.ly/38FRbEB.
homeowners, who constitute the largest group that hires LDLs. Many homeowners have avoided taking on projects around the house that require the assistance of a day laborer because of shelter-in-place, social distancing, and quarantine orders. Homeowners do not want to risk having someone enter their home without really knowing that person’s COVID-19 status.

Policies passed to combat COVID-19 have further exacerbated the loss of social capital. Many of the LDLs who are undocumented are also uninsured. They, along with other undocumented persons, were not included in the virus-response aid package passed by Congress. For LDLs, not having health insurance coverage will be a barrier in terms of being tested for the virus, which can hurt the communities in which they live. They will be a segment of the population that remains undetected and unchecked, thus potentially increasing the risk of transmission as the communities across the country begin to reopen. LDLs will stay undetected and unchecked because they are not likely to seek testing because of fear of deportation. The U.S. president has not eased this fear. He has yet to publicly denounce deporting undocumented persons should they interface with the healthcare system for testing.

COVID-19 shut down the economy, and economic relief was needed by many in the U.S., including LDLs. However, the Coronavirus Aid, Relief, and Economic Security (CARES) Act of 2020 excluded undocumented persons from receiving federal stimulus checks. Further intensifying being excluded from receiving stimulus funds, undocumented LDLs do not qualify for unemployment benefits. Thus, during a time when the economy in the U.S. has come to a standstill, they do not have anywhere to turn to for financial reprieve.

The omission of LDLs in policies that could have supported their health and economic condition is directly tied to the current political climate.

**Political Climate**

While the toxicity of the current political climate directed towards documented immigrants and undocumented persons in the country is attributed primarily to President Trump, past administrations are also to blame. President Obama authorized deportations for more persons than all previous presidents combined. The Affordable Care Act, “Obama Care,” failed to include coverage for undocumented persons. When the COVID-19 arrived in early 2020, 50% of undocumented persons lacked any health insurance coverage. Economic impacts also arose as an estimated seven million workers were without legal status, one million of whom were farmworkers and the rest in the health care, food and construction industries. Thousands of “Dreamers,” were also in societal and political limbo. As President Obama prepared to leave office in 2016, the unemployment rate, which peaked at 10% in 2010 and stayed high for months, had receded to 4.8%. Disdain for undocumented persons was a bit diminished with these economic gains, but did not disappear.

But it would fall to President Trump and his associates, particularly Attorney General Jeff Sessions, and Mr. Stephen Miller, to create a toxic political climate for recent documented immigrants and millions of undocumented persons. Even as the unemployment rate held steady at 3.5% and set record lows for particular populations, the assault on immigration and refugee populations was swift and comprehensive. President Trump actualized
an anti-immigrant sentiment that rivaled the bigotry of the 1920’s. Rather than southern and eastern Europeans, the Chinese, and members of the Jewish and Catholic faiths, this time the bigotry was focused on persons from Central and South America, Africa, and Asia.\textsuperscript{11}

Policy changes under the Trump administration demonstrated little, if any, concern for children and families. The criminalization of immigration policy via zero tolerance, family separation, abandoning the Flores Settlement, draconian reductions in the country’s refugee and asylum programs, and possible abolition of the diversity lottery program were devastating.\textsuperscript{12} The Trump presidency has been characterized by a rise in white nationalism, neo-Nazism, and the use of hateful speech. A “Camp of the Saints,” mentality, one that trumpets the demise of Western Civilization due to the entrance and presence of immigrants and refugees, now fully permeates the U.S. White House.\textsuperscript{13}

\textbf{Conclusion}

Health and health outcomes among undocumented LDLs have likely suffered from the social divide created by COVID-19. Social capital is a variable of extreme importance to health promotion among this vulnerable subpopulation. It indicates both the ability of an individual to reach out to a group of like-minded persons for support and the degree of solidarity within a marginalized community. This is important because undocumented LDLs suffer from a lack of social capital at the structural level but are generally more abundant at the individual level.\textsuperscript{2,14} Historically, forging and fostering social capital, at the personal level, has been a necessary mechanism through which LDLs have overcome social inequality and stressful life conditions. However, we underscore that social capital as a tool for anticipated success by undocumented day laborers is greatly diminished, if not completely eradicated, by the current policies and toxic political climate.

\textbf{References}

History has shown that in times of societal crisis, such as natural disasters and financial downturns, intimate partner violence (IPV) tends to rise. Recent events, such as Hurricanes Katrina and Harvey and the Australian Black Saturday fires, elucidated this phenomenon by demonstrating increased IPV incidences up to four years after the natural disaster (Schumacher, 2010; Serrata & Hurtado Alvarado, 2019; Parkinson & Zara, 2013). Other studies have found that rapid increases in the unemployment rate and unstable economic conditions, as seen in the Great Recession of 2008, increased abusive partners’ controlling behaviors (Schneider, Harknett, & McLanahan, 2016; Lucero, & Santiago, 2016). The COVID-19 pandemic created distinctive conditions that overlap the increased risk factors of both a natural disaster and an unstable economy for increased IPV while also further isolating survivors through social distancing practices. The United Nations estimates suggest that three months of quarantine could increase global domestic violence by 20% (United Nations Population Fund, 2020). In Georgia, domestic violence calls during the pandemic, including calls from first-time reporters, have increased 42–79% (Braverman, 2020; Burns, 2020; Evans, 2020).

Domestic violence shelters represent a foundational service intervention that fulfills IPV survivor needs that cannot be met with other services (Lyon, Lane, & Menard, 2008). These residential programs provide 24/7 housing assistance for survivors fleeing IPV while providing additional wraparound supports such as therapy, legal advocacy, and case management. Shelters typically seek to
create safe and healthy environments for survivors, and the COVID–19 pandemic has caused unprecedented changes to those standard operating procedures. Shelter environments are communal by nature, with survivors often sharing rooms and common spaces, which increases the risk of spreading the virus. Additionally, survivors typically exit shelter services when they can be financially independent. With mass unemployment and reduction of income for many Americans, the impact on survivors currently living in domestic violence shelters can be monumental. This creates a bottleneck effect where survivors are unable to exit shelter services into a safe and stable environment, preventing new residents from entering. The intersections of increased need for shelter services with an increased risk in housing people communally and decreased economic options for survivors exiting shelters creates an unprecedented challenge for these programs.

Our current research study seeks to understand how shelters are responding to the COVID–19 pandemic, given these constraints and an initial vacuum of information. The study targets both domestic violence shelter staff and shelter leadership to obtain a multi-pronged picture of how policies and decisions were enacted. This study utilizes an online survey with questions surrounding changes in everyday operations of domestic violence shelters. Specifically, it inquires how domestic violence shelter leadership made decisions affecting survivors and shelter staff during the pandemic and subsequent shelter–in–place policies. It also examines domestic violence shelter staff’s perceptions of how particular policies affected their ability to respond to survivor needs and how their health concerns impacted their work. The ultimate goal of the study is to identify gaps and best practices in shelter service to inform future infectious disease response planning for domestic violence agencies. The COVID–19 pandemic represents an unprecedented challenge in providing residential services. This study will shed light on how domestic violence agencies can continue to deliver life-saving services in these exceptional times and further their commitment to equitable access for all survivors.

References


Ageism represents biased beliefs or attitudes toward an individual or a group of people based on age. As cases of coronavirus in the U.S. first emerged, so did a very concerning narrative that only “old people” were the at-risk group of COVID-19. Indeed, the CDC reports “Older adults and people of any age who have serious underlying medical conditions may be at higher risk for more serious complications from COVID-19.” We also know that “8 out of 10 deaths reported in the U.S. have been in adults 65 years old and older.” However, the problem was the narrative gave people the impression that just older adults were susceptible to coronavirus. Such a narrative likely influenced the behaviors of younger people who did not see themselves at risk for the disease (i.e., largely influenced by early reports on the fatality rate of the virus in China). The fact that “boomer remover” as a COVID-19 moniker was trending on social media is a reflection of ageist beliefs people hold toward older adults.

But there was also ageist language toward younger adults. For several days, headlining the media were reports of younger adults hanging out on beaches and enjoying their spring breaks totally oblivious to the COVID-19 risks. Indeed, their behaviors went against stay-at-home and social distancing recommendations, and it’s unfortunate that some college students tested positive after going on spring break. However, younger adults were not the only individuals defying those recommendations, and they expressed their frustration against older adults on social media for weeks. Meanwhile, media reports are capitalized on this contention by pitting Millennials against Baby Boomers and vice versa.

Further complicating risk-related myths is what scholar and law professor Kimberlé Crenshaw referred to as the “fatal intersection of racism and ageism” in a coronavirus era. African Americans and older adults began to represent a disproportionate number of coronavirus cases. Instead of acknowledging the social determinants that relate to health disparities, the narrative shifted once again to older African Americans as the sole at-risk group.

The COVID-19 pandemic has underscored two issues that social workers must address with urgency: ageism and racism.
Ageism and racism are injustices. Exposing society’s ageist and racist beliefs is an important call to action for social workers. As a starting point, social workers must examine their own age- and race-related biases, and consider how these biases are barriers to equity in health care. Also, social workers are positioned to shift conversations to focus on the many social determinants (i.e., the social and economic conditions of one’s environment) that exacerbate health-related disparities and injustices. I am currently examining these topics in a qualitative study with health care social workers about their scope of practice during COVID-19. Among the questions asked include their perspectives about observed injustices during the COVID-19 pandemic (e.g., the potential rationing of healthcare based on age).

Ageism and racism are not new issues. Still, the COVID-19 crisis has highlighted the tendency to make assumptions about one’s value based on age or race. Social workers play an important role in facilitating discussions and pursuing policies toward ending these pervasive issues.

References

Social Work Responds to Racism

SCHOOL OF SOCIAL WORK STATEMENT ON RACISM AND SOCIAL JUSTICE

The School of Social Work condemns racism and the callous acts of violence behind the killings of George Floyd, Breonna Taylor, Ahmaud Arbery and other African Americans. We mourn their deaths. We are committed to seeking racial justice and to actions that make positive change happen. We are committed to these actions with broad input and ongoing collaboration and dialogue. We are committed to ensuring that “social justice” is more than a phrase on our website. It is the focus of our mission.

We strongly support our professional organization, the National Association of Social Workers, and its condemnation of lethal police force against unarmed African Americans. We also strongly support our educational accreditation body, the Council on Social Work Education, and its Statement of Social Justice and the Society for Social Work and Research’s Call and Commitment to Ending Police Brutality, Racial Injustice, and White Supremacy.
Even after the Ferguson riots, it didn’t occur to Michael Robinson to research the frequency of police killings of unarmed Blacks. The African American academic was not studying law enforcement practices, but a brief encounter with a total stranger changed the direction of his research.

“A student who I’d never seen before, a young African American male, came up to me and said, ‘What are you doing about these police killings of Black men?’

“And I said, ‘What do you mean?’

“He said, ‘That’s what I thought.’ And then he walked away.”

Robinson never saw the man again, but the conversation bothered him so much that after he joined the faculty of the School of Social Work at the University of Georgia in 2015 he began a new line of inquiry.

Robinson wondered how the incidence of police killings of civilians compared across races. He started looking for statistics, but could not find a reliable database anywhere on the subject. Of 18,000 police agencies in the U.S. only 2%-3% reported to any type of database, and did so voluntarily.

“The only way to find out about it was through the newspapers,” he said.

Two newspapers – the Washington Post and the United Kingdom’s Guardian – were tracking police-involved deaths in the U.S., but their data differed for the same periods. It took Robinson and two student assistants months of comparing the data and combing through other news sources to get a reasonably reliable accounting for a single year – 2015.

The data showed that unarmed African American men were being killed by police at almost five times the rate of unarmed white men, despite being roughly 7% of the U.S. population.

“Then I started noticing a pattern,” said Robinson. The largest number of killings of unarmed Blacks by police were in former slave-holding states. The deaths were highest in Maryland and Virginia, states that originated restrictive laws known as
Black Codes. The laws were directed at newly freed Blacks after the Civil War and enforced by white police.

In the North, police historically focused on the impoverished communities of immigrants, but they also targeted Blacks. For more than a century in both regions, law agencies chose physical force first to maintain control over poor areas. Today’s law enforcement practices still reflect this mindset to various degrees, said Robinson.


Here Robinson explains his research-grounded recommendations for change.

**In your 2017 study, you recommended that police departments report any police-involved deaths to a national database. Why?**

A national database can shed light on racial bias in police use of lethal force and indicate where external reviews of police procedures may be needed. It shouldn’t take months to get accurate numbers.

**Is such reporting mandatory now?**

I am not aware of any national legislation to make mandatory reporting of deaths of citizens by police. This January the FBI launched the National Use-of-Force Data Collection program, which invites participation from all law enforcement agencies, but participation is voluntary.

**Should police departments be abolished?**

I don’t believe they should be abolished, but I do believe that instead of spending a lot of money on militarizing police departments, funding should go into social programming in the neighborhoods. Funding should be put into after-school programs for kids. There should be incentives to have companies build businesses in poor areas and hire residents. You need more community policing that puts police of color in neighborhoods of color, walking or biking a beat as opposed to driving, because then...
you’re forced to have conversations. If you get to know the community you’re policing, then maybe you’re less likely to mistreat someone.

You’ve recommended implicit bias training for officers. What is implicit bias?

Implicit bias is prejudice you may not be aware of. You may give more weight to what someone in a business suit says, or less weight to something that an adolescent tells you. Those are implicit biases. We all have them. In policing, they can affect impartial treatment under the law, and even adversely escalate situations. Some police agencies provide evidence-based training on strategies to recognize and reduce implicit bias. The training isn’t standard practice but it should be.

How does knowing about 19th century policing practices help today?

Current policing tactics reflect policing of the past. As with implicit bias, if we’re aware of that past we can better address problems related to it.

What other recommendations would you make?

Make body cameras mandatory.

More mental health services should be available to officers and their families. Basically it is a stressful job and assistance, if needed, should be available to the police officers and their families.

There should be a national “use of force” policy that has been heavily researched, instead of jurisdictions coming up with their own policies.

De-escalation training should be mandatory. Many situations can be de-escalated if police are properly trained. De-escalation basically gives the officers strategies to calm situations, especially folks who are experiencing mental health issues and also individuals who are armed and unarmed. Above all, unarmed citizens should not be given a death sentence on the street because they are experiencing a mental health crisis or resisting arrest.

These are just a few recommendations.
If I had to sum up why the fight for justice is so important, it would be through these words of Martin Luther King, Jr. Too many spaces in our society are rife with abuse, oppression, and unnecessary struggle. One place where these injustices are felt very strongly is in health and health care. We read stories daily about the precarious position of the marginalized, underserved, and/or under-resourced who receive few or substandard services if they are able to access services at all. My work in the area of Black/African American mental health focuses on these inequities and seeks to improve mental health and promote wellness among Black/African Americans. On this quest, I have conducted, published, and presented research aimed at better understanding the depression experiences of a diverse population of Black/African Americans. I have explored and shared innovative ways to engage Black/African Americans in mental health care, namely by exploring the role Black churches, historical sources of help in Black communities, can play in encouraging and administering this care, thereby making interventions more culturally-informed, responsive, and appropriate. I have also been very vocal, through my research, instruction, and outreach, about my own challenges with mental health, particularly as a Black woman, which simultaneously destigmatizes mental illness and offers hope to others who struggle.

While most of my work, to-date, has focused on informing clinical social work practice with Black/African Americans and destigmatizing mental illness in general, I will be adding a new dimension to my research where I investigate the impact race and racism have on the mental health of Black/African Americans. Now this is not a new area of research by any means. Scholars like Nancy Boyd-Franklin, James Jackson, and David R. Williams have built careers on examining the role race, racism, and discrimination play in the health and health outcomes of Black/African Americans. Now this is not a new area of research by any means. Scholars like Nancy Boyd-Franklin, James Jackson, and David R. Williams have built careers on examining the role race, racism, and discrimination play in the health and health outcomes of Black/African Americans. What is new is the reach (ie. audience) these incidents of racism and discrimination have and the distance and pace at which they can be disseminated. With the advent of the internet and social media platforms, and the inability to effectively filter and control this vitriol, people now experience and/or witness a greater volume of racist and discriminatory content. Whether it is by reading an anonymous comment on a post
or watching an individual be treated unfairly or violently due to their race, the extent to which someone can be victimized and/or traumatized is great.

What is equally troubling is that our social work curricula do not prepare students, nor do many training programs equip instructors and practitioners, to address the mental, emotional, physical and spiritual problems people of color experience as a result. We discuss how to adjust, amend or create interventions that address cultural differences, but we offer very little in the way of helping people deal with being culturally different. In other words, we know how to help clients combat the symptoms they may experience after racist encounters (the effect) but we know little about how to combat racism itself (the cause). I have tried to bring attention to this in some respects through a course I created entitled Direct Practice with African American Adults, Children, and Families. In this class, I name racism/discrimination as a social determinant of health, attempt to raise the consciousness of students around matters of race and intersectional identity, and instruct students around how they can best intervene with clients—namely through an intervention I call the "listen-validate-empathize" technique where they do these things to build rapport and trust with the client so that the client feels safe(r) to share, or vent, troubling racist experiences. I have also spoken out through a podcast with the UGA Center for Social Justice on how individuals can go about the work of social justice while attending to their own self-care. But these actions, helpful as they may be, do not attack the problem at its root. I, as well as all others who say they are committed to social justice, must (re)focus my efforts on not simply documenting, but better understanding the impact of racism and discrimination on health and designing, testing and implementing interventions that help individuals, communities and our society as a whole heal from racism while simultaneously eradicating it in all its forms.

By continuing to focus on the relationship between race, racism, health and wellness, I hope to contribute effectively to efforts that erase racism, help people heal and replace structures corrupted by injustice. Whether it is through my research, teaching, or service work, I will always be dedicated to rooting out and destroying any threats to wellness and justice.
Historical trauma is understood to be the collective trauma exposure within and across generations, including interpersonal losses and unresolved grief. Recognizing and responding to the intergenerational transmission of trauma is integral to facilitating the process of healing, reconciliation and restoration associated with historical and ongoing systemic racism, oppression and social injustice experienced by Indigenous peoples, African Americans, Latinxs and other historically marginalized populations.

Over the past decade, there has been a groundswell of federal, state, and local efforts to translate research on adverse childhood experiences (ACEs) into trauma-informed practices across multiple systems. ACEs are associated with enduring neurobiological, physiological, relational, behavioral and emotional consequences over the life course. Increasingly, grassroots organizations such as California’s RYSE Center have been a leader in pushing an interdisciplinary field of professionals to incorporate the centrality of historical trauma, structural racism and white supremacy into our understanding of ACEs and trauma-informed care. Building culturally responsive and trauma-informed healing systems requires a paradigm shift that uses what we know about trauma and its impact to do our work differently.

The social work profession is ideally poised to provide leadership in this area. It is imperative that the social work profession incorporate culturally responsive and trauma-informed strategies with(in) our classrooms, research and the populations we serve. This includes ensuring that our teaching, research and practice also emphasizes and nurtures a more culturally inclusive understanding of resilience and the culturally specific values, beliefs, traditions, practices and ways of knowing that may mitigate risk.

Reference
FROM SOCIAL APARtheid TO SOCIAL JUSTICE: SOCIAL WORK’S JOURNEY (OR STRUGGLE)

June Gary Hopps, PhD
Thomas M. “Jim” Parham Professor of Family and Children Studies

June Gary Hopps has dedicated her life to issues of race, inequality, social justice and human and civil rights. In 2017 she was awarded the Significant Lifetime Achievement in Social Work Education Award by the Council on Social Work Education (CSWE). The following is the address she delivered at the annual program meeting (APM).

My childhood was in a small, rural, central Florida town, Ocala, in Marion County. Plessy v. Ferguson was the law of the land, spewing a philosophy of "separate but equal," which was always “separate and unquestionably unequal.”1 During my first year at elementary school, there were six racially motivated lynchings nationally documented. There were also bombings, beatings, and other domestic terrorist acts. My elementary school secretary’s parents—Mr. & Mrs. Harry Moore—were killed by a bomb on Christmas night in 1951.2

In our home on Gary Farms, my grandfather’s place, the illegality of voter suppression and the positive force of voting rights were always discussed. There, we learned that Blacks stood up for their rights and drew on their historical knowledge and wisdom regarding survival strategies, including protest. Achieving a decent education was difficult or nearly impossible for most African Americans and much of my life, even into the latter half of the 20th century. In fact, our education in the South had once been criminalized.

My family was active in the push for social justice. Our parents knew and supported the key players in civil rights across central and other parts of Florida. At Spelman College in Atlanta, Georgia, my interest grew and I was taught by and associated with many who were in the Black vanguard, as well as White and Jewish faculty. More than anyone, Whitney M. Young, the first Black president of NASW, recruited me to social work, and specifically community practice, and he suggested that I consider a doctorate. My personal ambition at the time was to go to law school. While finishing college and continuing my graduate education at the Atlanta University School of Social Work, I remained active in the
Atlanta Student Movement. That is where I marched and was arrested with many others for protesting for our human rights and civil rights, as I prepared to enter professional social work.

Although social work might not have embraced social justice enthusiastically or completely, friendly assistance and social control, two contradictory stances that guided the nascent profession, were extended to the disadvantaged. The children of enslaved Blacks were not targeted recipients, neither were poor southern Whites. Two parallel systems of delivery emerged: one for Euro-Americans and one for others, indigenous people, Afro-Americans and Latinos. The profession engaged in service delivery apartheid. The separate but unequal pattern of social life in much of the country existed in our profession. It is the history that we deny since we sanitized the narrative; one that we are not necessarily proud of, especially now when we profess a commitment to justice driven values.

If social justice had been an implicit value, it did not become explicit until the 1983 CSWE Educational Policy Standard. There is still not a working definition of the subject; however, there are signs that the profession has moved toward greater consideration of the concept. Nonetheless, the profession
These principles were embedded in the Constitution when only White men were given the right to vote, and later own property; the origin of affirmative action. In their “community,” there was little if any inequality. Of course, their women, slaves, indentured servants and indigenous people were not viewed as equals. However, the ideals expressed were unique among constitutional governments of the time in a world that knew feudalism and authoritarianism.6

Second, the profession should develop a broader curriculum which would include content on economic structure and process.7 This would help prepare professionals for understanding the angst stemming from groups who feel alienated and the emergence of new political movements. Social workers deal with the impact of inequality, but we do not address prevention. Instead of advocating equal and exact justice8; we merely speak of macro-injustices and call for economic justice, environmental justice, and social justice. Then we structure the curriculum around micro-interventions which locate structural problems within the individual, family and small groups. What a contradiction. By not giving more attention to macro content, do we inadvertently suggest our own powerlessness?

Third, the profession should develop the capacity to participate more effectively in the political environment. The dual efforts to engage in voter suppression and curtail demographic changes owing to xenophobia in vogue from the nation’s high office is not

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"There can be no unity until inequality is defeated. This is a challenge that social work faces and must address."

is surely challenged as it addresses social justice in the context of greater diversity, changing demographics and a geopolitical context that is increasingly intolerant of justice based values and social rights and more accepting of neo-liberalism, racism, anti-Semitism, homophobia, xenophobia and other isms.

Given this reality, the profession must commit to a deeper understanding of the impact of inequality and how it created historical unfairness and privileged certain cohorts. This is especially true of economic inequality which has grown exponentially over the last generation.5 There can be no unity until inequality is defeated. This is a challenge that social work faces and must address.

So, What Should the Profession Do?

First, the profession should accept the meaning of privilege (or whiteness) and the reality of reduced privilege and the resistance that all have witnessed via increased polarization and various alliances of hate. Charleston and Charlottesville are examples. The inability to comprehend the meaning of whiteness and the privilege that is associated with it did not redound to poor Whites. That is a basis for their anger. A consequence of inequality is the increasing class division which also fuels discontent relative to race, gender, sexual orientation and national origin.

Let’s be clear, the founding fathers wanted the country to be White. They advocated white supremacy and elitism. 

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just rolling the clock back over fifty years with particular harm targeted toward People of Color and new immigrants, but with threats to democracy itself. Social work’s voice could be stronger, now.

Too few of us hold elected office in Congress and in state legislatures and exert too little influence in major policy debates. The curriculum can be reshaped to include content that can better facilitate knowledge about civic participation and build confidence in students so that they are not afraid to become effective change agents and social justice warriors. We might revisit that old reformer, Jane Addams. And while we are at it, also visit W.E.B. Du Bois (who gave us the basis for the strengths perspective, empowerment, and mixed methods) and Ida B. Wells-Barnett (research and anti-lynching advocacy), Whitney Young, Jr. (advisor to Dr. M.L. King, three U.S. presidents, and the Atlanta Student Movement).9

Fourth, the profession should learn that leadership matters. Look to those just mentioned (Addams, Wells Barnett, Du Bois, Young, and others) as models. Predictions are that women will maintain their dominance in the profession, although their numbers will continue to decline in the national workforce.10 They will hail from immigrant and refugee status, poor population groups and both inner-city and rural communities.

By 2020, half of children will be People of Color, and soon the majority of the population.8 New professionals from these cohorts will certainly not be similar to Jane Addams in terms of what they bring in human capital investment relative to wealth and education. Thus, the challenge is to provide them the best education we can since they will be looking for upward mobility for themselves and their families as well as their clients and their communities. In this regard, new innovative models or designs for professional study, i.e., online programs, second language offerings, simulated practice and distance supervision and robotic technology will be imperative given costs, language, and transportation barriers.

Finally, the profession should understand that messaging and language must become more inclusive and emphasize social rights—for all. We have to stop dodging certain concepts and deal with them although that will produce some discomfort. Examples include: race (not just diversity); injustice (not disparities—injustice causes disparities) and equal and exact justice (not just social, environmental and economic justice). I have personally witnessed our profession’s movement from apartheid when Black and other social workers of color could not provide service to White clients. And I know that some agencies would not serve certain immigrants, for example, the Irish in Boston. And yet, we have overcome these realities, but I suggest that there is still much to be done.

Social work is a great profession. Let’s make it greater. Thank you.

"...the profession should understand that messaging and language must become more inclusive and emphasize social rights — for all."
Special Thanks – Dean Anna Scheyett from the University of Georgia and Dean Jenny Jones from Clark Atlanta University for nominating me for this award. I would like to thank Deans Bonnie Yegidis and Maurice Daniels, both formerly of UGA and Drs. Harold Briggs, Tony Lowe, Waldo Johnson, and Deans James Herbert Williams, and Daryl Wheeler for their support. I also thank my colleagues at Boston College, where I served as Dean for 24 years, and the University of Georgia, where I have served as a faculty member for 17 years.

Sincere appreciation is extended to CSWE for establishing and presenting the Awards that have been acknowledged today.

I share this award with my sisters (Drs. Faye Gary, Gladys Gary Vaughn, Ollie Gary Christian) and brother (Homer Gary II), my late parents (Ollie and Homer Gary) and grandfather (William P. Gary). My family is represented today by my granddaughter Jasmine, and nephew William, and several other relatives and friends. And foremost, I share this day and award with my late husband, Dr. John H. Hopps, Jr.

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1. Plessey v. Ferguson, 163 U.S. 537 (1896).
Atlanta City Hall’s Old Council Chambers turned into a lively classroom on November 14, 2020 when more than 100 social work students met with Atlanta Mayor Keisha Lance Bottoms.

The mayor answered questions about policy issues for nearly an hour. Students showed particular interest in how she addressed disparities of access to resources, including housing, mental health services and services for the differently abled.

The mayor, an Atlanta native, also spoke frankly about her difficult childhood and how her father’s incarceration impacted her life. “I carried a lot of shame and pain, but it helped shape me into the leader that I am today,” she said. “I’ve since learned so much about people and the choices they make when they feel they don’t have any other choices.”

The interaction was organized by June Gary Hopps, Thomas M. “Jim” Parham Professor of Family and Children Studies, and Master of Social Work students as part of Parham Policy Day. The annual School of Social Work event highlights the impact of social policy on society. This year’s activity also was supported by the Donald L. Hollowell Professorship, held by Llewellyn “Lee” Cornelius, director of the UGA Center for Social Justice, Human and Civil Rights.

Hopps said she hoped the students came away from the experience with a better understanding of how public policy responds to social needs.

“Students heard firsthand how the lack of resources, e.g., funding, can be a barrier to policy initiatives; why it is essential to develop allies to facilitate change or prevent unwanted change, and how to work with other government units and a variety of interest groups,” she said.

Students said they were impressed with the mayor’s confidence and openness.

“The experience ... was helpful in many ways to me as I prepare for graduation and next steps as someone that hopes to work in policy advocacy and public interest,” said Simone Moonsammy, one of the student organizers. “The experience also was helpful in reminding me to stay engaged and intentionally make time to contribute to issues that I am passionate about and to not stop doing that, even if it’s just a few hours here and there.”
Social Work Responds to Injustice and Exploitation
The trafficking of persons around the world, also known as modern day slavery, is a serious violation of human rights and a manifestation of social injustice. Human trafficking is defined as “the recruitment, harboring, transportation, provision, or obtaining of a person for labor or [sex] services through the use of force, fraud, or coercion for the purpose of subjection to involuntary servitude, peonage, debt bondage, [sexual exploitation] or slavery” (U. S. Department of State, 2000). It is caused by micro- and macro-level factors: macro-level factors include economic injustice, poverty, wars and natural disasters, globalization of the consumer market, discrimination against women, and global sex tourism. Micro-level risk factors include family breakdown, poor family relations, child abuse and neglect, mental illness and substance use among parents, and homelessness among children (Roby, 2005). Though valid and reliable trafficking data remain a challenge and born of contention, a recent report estimated that 24.9 million individuals around the world are currently victims of some form of trafficking. These men, women and children are exploited in economic activities such as agriculture, fishing, domestic work, construction, manufacturing and the commercial sex industry (IOL, 2017). Although the majority of victims are trafficked across international borders, 42% are victimized within their own countries (UNODC, 2016). Trafficking disproportionately affects women and children—of the current global victims, 71% are female and 28% are children (UNODC, 2016).

The Code of Ethics of the National Association of Social Workers affirms the profession’s responsibility to pursue social change and human rights, particularly on behalf of vulnerable and oppressed people, and toward the liberation of all people. Similarly, the Council on Social Work Education maintains that “social work’s purpose is actualized through its quest for social and economic justice, the prevention of conditions that limit human rights, the elimination of poverty, and the enhancement of the quality of life for all persons” (CSWE, 2015). A social work perspective on the issue of human trafficking is therefore critical in anti-trafficking efforts, not only because of the professional guiding principles and values, but also because of the holistic nature of social work interventions with oppressed populations.
Social justice for trafficking survivors must go beyond the prosecution and punishment of perpetrators, it must include provision of necessary services that help survivors restart their lives in conducive circumstances. There are several important implications for the profession in dealing with the problem of trafficking. Applications to policy include advocating the Fredrick Douglass Trafficking Victims Prevention and Protection Reauthorization [HR 2200] bill of 2017, which is yet to become law and expires very soon. The precursors to this law have provided funding for anti-trafficking efforts since 2000. Programmatic applications include providing specialized and comprehensive services to trafficking survivors, including psychosocial, economic empowerment, legal representation, language interpretation, and supports with immigration issues. In addition, community awareness programs are also key in preventing or reducing the problem.

However, the effectiveness of these important applications hinge on rigorous research that is informed by the social, health, and behavioral sciences as well as the humanities. Clearly, one area of research is the collection of valid and reliable data on the issue. Research in the area is very much in its infancy and there is opportunity to collaborate both transdisciplinarily and transnationally in order to build a body of research that will lead to the provision of the best services for trafficking victims and survivors. The UGA School of Social Work is presently involved in research whose goal is to provide evidence-informed intervention and reintegration services for female survivors of trafficking. The transnational research team represents scholars from social work, medicine, sociology, public health and family studies. The intervention will be designed in a sustainable manner and replicable across various countries in the world.

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Gender based violence is a social justice issue. Gender inequality leads to the maintenance of gender norms and expectations that influence how college students communicate about sex and give consent. My own qualitative research exploring college students’ attitudes and beliefs concerning sexual assault revealed that they are still vulnerable to the influence of harmful norms that mandate women be timid and “nice”, therefore agreeing to unwanted sexual activity in order to not cause drama. Men are also vulnerable to norms that mandate they be aggressive and persistent, even with acts of resistance from their partner. Men in particular perceive, often incorrectly, that their male peers are engaging in sex with multiple partners; therefore, to fit in, they must do the same. My research examining how college students negotiate prior to and during sexual interactions confirms that even when they know how to establish and respect boundaries, these norms prevent them from engaging in healthy, fully consensual sex. Gender norms also influence how college students give consent and know it has been given. My quantitative research examining how college students perceive consent has revealed that gender norms influence how they communicate about sex and how they interpret each other’s behavior.

College women have inherently different lives because of the violence they may experience. Some sexual assault prevention programs continue to place the onus on women to prevent sexual assault by emphasizing steps they can take like socializing in groups, making sure there is a “babysitter” (someone whose job it is to watch out for everyone else), creating text chains to check in on everyone throughout the night and even carrying pepper spray. My qualitative research looking at college women’s experiences has confirmed that many of them feel a burden their male peers do not experience to prevent their own assault. College women do not have the same experience as men because they do not have the freedom to embrace all of the potentials of campus life due to the threat of sexual assault. A pilot study I conducted looking at sense of belonging and sense of community among college women found that their concern for experiencing sexual assault and harassment reduced their sense of belonging and had a negative effect on their mental health.
It is also important to consider system changes that need to be made in order to prevent sexual assault and help survivors. Campus police, in particular, have the skills to interact with survivors when they report an assault in a trauma-informed way that encourages survivors to continue through the reporting process. I am currently developing an online training for patrol officers to address this concern. One key element of this process is community engagement; the team developing this training include police officers, rape advocates, college students and researchers. The research includes stakeholders and includes those that would be influenced by the proposed changes. Changing a system like police can positively influence other university level systems to fully embrace addressing the problem of campus sexual assault.

Finally, it is important that any approaches to sexual assault prevention be inclusive. Current sexual assault prevention does not address the specific needs of marginalized groups, including sexual minorities, gender minorities and people of color. Therefore, sexual assault prevention programs need to include the experiences of these communities that take into consideration the intersection of their gender, sexual orientation and race. My current research developing a sexual assault prevention program for college campuses utilizes technology and digital gaming so that students in these groups feel their unique experiences are addressed. Other research I am conducting will look at how the racial, gender and sexual orientation of survivors affects how they are perceived as victims and the type of care they receive after reporting a sexual assault.

At the core of my research in sexual assault prevention on college campuses is an understanding that gender inequality is at the core of campus sexual violence. It has created norms and expectations that have negatively impacted college students’ behavior and contributed to the continued perpetuation of sexual assault. These gender norms also intersect with norms surrounding race and sexual orientation that require research that attempts to include everyone’s voice in deciding how the problem of campus sexual violence should be addressed.
TO BUILD A BETTER WORLD: NOW IS THE TIME FOR A RIGHTS-BASED APPROACH TO SOCIAL WORK PRACTICE

Jane McPherson, MSW, MPh, PhD
Assistant Professor and Director of Global Engagement

Back on April 3rd, 2020, Arundhati Roy, the Indian novelist and human rights activist, wrote of the current pandemic as a catastrophic rupture in our lives from which we might build a new and better society:

Historically, pandemics have forced humans to break with the past and imagine their world anew. This one is no different. It is a portal, a gateway between one world and the next. We can choose to walk through it, dragging the carcasses of our prejudice and hatred… Or we can walk through lightly, with little luggage, ready to imagine another world. And ready to fight for it.

In early April, as Roy was writing, our lives in the U.S. had been newly upended by pandemic. At the University of Georgia, our activities had just moved online and those of us who could afford to do so were staying largely at home. Individually and collectively, we were adjusting to the new realities that the virus had brought our way. The world’s millionth case of COVID-19 had been identified and, in the U.S., 6,257 individuals had died from the disease. George Floyd and Rayshard Brooks, two African American men, both fathers, were alive, enjoying their families, and adjusting to the changes along with everyone else.

The unequal impact of the disease quickly became obvious. As Asha Jaffar observed from Nairobi, “The coronavirus has been anything but a great equalizer. It’s been a great revealer, pulling the curtain back on the class divide and exposing how deeply unequal this country is” (Dahir, 2020). Jaffar was describing Kenya, but in the U.S., the view is the same: corona thrives where racism, ageism, ableism, and other forms of discrimination thrive; it takes aim at those who live on the economic edge, who lack the space in which to self-isolate, who live with diseases exacerbated by stress and poor nutrition, and whose work does not easily translate online; it particularly menaces people of color, migrants and refugees, the homeless, and the imprisoned or detained.

Assessing the depths of our national crisis in late June after the police killings of George Floyd and Rayshard Brooks (and others), I am called back to Roy’s gateway. We are not yet walking lightly through her portal; no, we are most definitely “dragging the carcasses of our prejudice and hatred” with us. If the coronavirus has the power to “bare the underlying weaknesses” of the
societies it ravages (Horowitz, 2020), in the U.S., our weaknesses are clear: inequality, embedded structural racism, and a white-supremacist founding ideology that has shaped our social institutions, including the police, healthcare delivery, and yes, social services. Meanwhile, the pandemic marches on: nearly 9 million global COVID-19 cases have been identified and, in the U.S., families are mourning the deaths of 120,000 loved ones. More people are dying every day.

So, what is a social worker to do? To paraphrase both Saul Alinsky (1971) and Barack Obama (2018), we need to work in the world today—as it is—and we must work to dismantle unjust systems in order to build the world as it should be. As professionals who work shoulder-to-shoulder with individuals experiencing injustice, we must use our skills—both micro and macro—to address people’s immediate needs while also insisting on a redistribution of privilege, wealth, and power in our societies. In other words, now is the time for social workers to commit to taking a rights-based approach to social work practice (Mapp et al., 2019).

What can a rights-based approach bring to the current moment?
Rights-based practice sees the world through a human rights lens; it employs rights-based methods; and it aims at rights-based goals. Through a rights-based lens, we see that access to healthcare, unemployment benefits, housing, social security, education, etc.—the social and economic rights first promised in the Universal Declaration of Human Rights (1948)—are actually privileges reserved for the lucky rather than rights guaranteed to all. Shifting the focus from human needs to human rights requires social workers to see clients’ concerns in larger sociopolitical context and to assess for political issues beyond the standard social or psychiatric ones. Further, it challenges us to work in solidarity with our clients in the fight for justice. Seeing problems through a rights-based lens leads social workers to set ambitious, justice-focused goals. A client’s need for a roof over her head may be met by referring her to a shelter, but securing her human right to housing will require a long-term commitment to social and political change.

A rights-based approach guides intervention. Rights-based social workers root their practice in the human rights principles of human dignity, antidiscrimination, participation, transparency, and accountability (McPherson & Abell, 2020). Living by these principles, we cultivate democratic and transparent engagement with service users. Relationships built on equality and respect serve to deconstruct traditional power dynamics based on profession, race, income, or other social status (McPherson, 2015). This practice of building respectful and engaged partnerships that question the usual distribution of authority creates expectations—within service users and social workers—that all will be listened to and treated with dignity. Everyone’s voice matters.

Rights-based practice with its ambitious and aspirational goals is necessarily collaborative. To create the justice-focused changes, social workers must engage clients, communities, and political leaders. Other professionals are needed: lawyers, certainly, but also organizers, doctors, educators, researchers, faith leaders, and more. Rights-based practice, which requires attention to both micro- and macro-level concerns, demands skills and energy that go beyond what a single human being (even a social worker!) is likely to possess alone.

Rights-based practice is political. It requires advocacy and activism, and this is surely a time when political action is needed to address the human rights violations that we see all around us. George Floyd and Rayshard Brooks experienced violations of their right to life; peaceful protestors have experienced violations of their right to free speech and assembly; people of color incarcerated in U.S. prisons, jails, and detention centers are experiencing violations of their right to...
nondiscrimination, and gaps in care for coronavirus and rising unemployment violate people’s right to healthcare and employment. Rights-based practice requires social workers to stand up for human rights. Social workers may feel uncomfortable with this call to political action. Indeed, evidence shows that social workers are less comfortable with activism than they are with other aspects of the rights-based practice model (McPherson & Abell, 2020).

This discomfort is something we must examine critically. Professional neutrality simply serves to ally professionals with the powerful against the interests of the underserved and disenfranchised (Farmer, 2005; Freire, 1984). We must return to the activism that built our profession and revive our long and brave tradition of campaigning for civil, social, and economic rights (Piven & Cloward, 1978; Reisch, 2013).

A human rights–based approach to social work understands our service users as experts and partners, rather than passive recipients of charity and services (Mapp et al., 2019). It also empowers—and challenges—us to promote our core professional values, even (and especially) when those values are threatened by structural racism and austerity-driven social policy. Today, we address the fallout from the coronavirus in a time of deep social unrest and reckoning with racism, while also contending with reduced social spending and increasing social inequality.

Arundhati Roy asks us to imagine the world on the other side of the portal. We must not return to a “normal” that accepts the oppression of Black people and the social exclusion of the poor. We need to pass through that door envisioning an ambitious expansion of a human rights access for all. And we must be willing to work for it.


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This year the state of Georgia passed its first hate crimes bill. More than half a century after the Civil Rights Act of 1964, and almost as long since the first federal hate crimes legislation was signed, Georgia was one of only four states in the country that did not have a bill that increased penalties for crimes based in discrimination and hatred of “the perceived other.”

This bill (HB426) was tabled by the Senate Judiciary Committee during the first half of the session and was expected to sit on the table (not move) for the remainder of session. It only passed amidst pandemic, peaceful protests, violent unrest, the slow apathetic suffocation murder of George Floyd by police officers, and the stalking death of Ahmad Arbery in rural Georgia – both of which were broadcast on television and in social media worldwide.

Simultaneously, Georgians experienced voter disenfranchisement, extensive budget cuts to direct services for those with mental, physical and substance use challenges, the refusal to use big business to bring additional capital into the state and reopening the state with a disregard for federal guidelines.

What does that say regarding the importance of social justice and the action required to bring about change? Social work was founded on the principle of taking action. The first social workers challenged the system. Trash collection was the catalyst for movement and community organization.

So what is our obligation as social workers today? Social workers are positioned to utilize the dual perspectives of macro and micro practice to foster change in systems that are resolved to maintain the status quo. I would pose that there are still system problems that must spur us to action.

In the current session, this action for change helped restore funding for maternal health, peer services and crisis beds for youth. However, there are challenges that remain.

As social workers, we have the statistics, the research and the organizing capacity to confront issues of discrimination,
disenfranchisement, racism, tokenism, and institutional and structural oppression head on. It is time to act.

My research and practice expertise is in education and mobilization of communities to engage in the policy space. This includes strategy and advocacy messaging. This same messaging is crucial in my own professional community—social work. To that end, here are some ways social workers can engage in the current social policy landscape:

1) Elections – Volunteer to participate in the upcoming election. This can include working at polling locations and phone banking. Contact the Secretary of State to ensure that complaints are logged. Post important voter dates/deadlines on social media or throughout your organization.

2) Programs/Research – Educate yourself regarding programs and models that are best practices. Share this information with your legislators before sessions. Let them know what is important to you and the community you are representing. Most legislation is brought forward because of what legislators learn in their districts. Presenting issues to legislators creates “champions” for those causes.

3) Testimony – Understand both sides of an issue and call, submit comment or plan to testify in committee meetings. Providing testimony can be effective in bringing forth positions that have been unheard or reaffirming points for legislators.

4) Advocacy in Groups – Join or find organizations focusing on your interests that participate in advocacy and lobbying at the state level. These organizations often create legislative agendas and real time legislative updates and alerts so that members know when to take action. Actions can include advocacy days, placing calls, sending emails or testimony.

As social workers it is our responsibility to define what we see and speak up. If we remain silent, we permit opportunities for increased injustice, including disenfranchisement and trauma, to persist. We have an opportunity to set the tone for generations to come. ■
Social workers have an obligation to serve marginalized people. Creating pathways for individuals to participate in democracy through voting is one way social workers can promote the rights of vulnerable and oppressed groups. Voting in the 2020 presidential election is a central way to increase social justice, effect social change, and increase community empowerment. Unfortunately, the coronavirus pandemic has created an unprecedented barrier to voter engagement. What avenues must social workers take to promote a safe and accessible election in light of the pandemic? Students will contemplate this question and others as they read this year’s selection for the Social Justice Common Book Initiative. Drs. Tiffany Washington and Jennifer Elkins selected *Give Us the Ballot* by Ari Berman, past featured speaker at the annual Social Work Day on the Hill. This book models the importance of having a solid foundational understanding of voting rights in the U.S. by chronicling the gains and setbacks of voting rights since the 1960s. We expect this book to expand students’ definition of social justice, engage their intellectual curiosity about voting as a political and civil right, and challenge their critical thinking about the role of social workers in removing barriers to voting.
The University of Georgia School of Social Work Masters of Social Work Program

SOWK 7118: Power, Oppression, Social Justice and Evidence-informed Practice, Advocacy, and Diversity in Social Work (PrOSEAD)

MSW CURRICULUM STATEMENT (Appears at top of every syllabus):

Beginning 2017, the UGA SSW faculty has adopted a focus on addressing **power** and **oppression** in society in order to promote **social justice** by using **evidence based practice** and **advocacy** tools and the celebration of **diversity**. This philosophy, under the acronym, **PrOSEAD**, acknowledges that engagement, assessment intervention, and evaluation with individuals, families, groups, organizations, and communities requires an understanding of the historical and contemporary interrelationships in the distribution, exercise, and access to power and resources for different populations. And, that our role is to promote the well-being of these populations using the best and most appropriate tools across the micro, mezzo and/or macro levels of social work practice. In short, we are committed to:

| Addressing | Power and Oppression, |
| Promoting  | Social justice, |
| Using      | Evidence-informed practice and Advocacy, |
| Celebrating| Diversity |

a. **Power** – Certain sections of populations are more privileged than others in accessing resources due to historical or contemporary factors related to class, race, gender, etc. Our curriculum will prepare students to: (i) identify and acknowledge privilege issues both in society as well as at the practitioner/client level; (ii) have this understanding inform their practice in order to competently serve clients who experience disenfranchisement and marginalization.

b. **Oppression** – Social work practice across the micro-macro spectrum should work to negate the effects of oppression or acts of oppression locally, nationally and globally. Our curriculum will prepare students to enhance the empowerment of oppressed groups and prevent further oppression among various populations within the contexts of social, cultural, economic, political, and environmental frameworks that exist.

c. **Social Justice** – Social workers understand that human rights and social justice, as well as social welfare and services, are mediated by policy and its implementation at the federal, state, and local levels. Our curriculum will prepare students to engage in policy practice at the local, state, federal, or international levels in order to impact social justice, well-being, service delivery, and access to social services of our clients, communities and organizations.

d. **Evidence Informed Practice** – Social workers understand that the clients’ clinical state is affected not only by individual-level factors but also by social, economic, and political factors. We are also cognizant that research shows varied levels of evidence for practice approaches with various clients or populations. Our curriculum will prepare students to engage in evidence-informed practice. This includes finding and employing the best available evidence to select practice interventions for every client or group of clients, while also incorporating client preferences and actions, clinical state, and circumstances.

e. **Advocacy** – Every person regardless of position in society has fundamental human rights to freedom, safety, privacy, an adequate standard of living, health care, and education. Our curriculum will prepare students to apply their understanding of social, economic, and environmental justice and their knowledge of effective advocacy and systems change skills to advocate for human rights at the individual and system levels.

f. **Diversity** – Social workers need to understand how diversity and difference characterize and shape the human experience and are critical to the formation of identity. Our
curriculum will produce students who are able to engage, embrace, and cherish diversity and difference across all levels of practice

COURSE DESCRIPTION

This required course encapsulates the entire philosophy of our MSW curriculum. It examines the interrelationships between Power, Oppression, Social justice, Evidence informed practice, Advocacy and Diversity in social work practice. The overall framework focuses on understanding the barriers to and the enablers of social change (see figure in pg. 2). Students learn about the UGA SSW's initiatives on social justice and human rights. The course will help students to focus on critical self-reflection and the arduous and often painful trajectory to recognize their privileges or power and how it shapes their lives and interactions; how it might be oppressive to others; how diversity in its various forms may be understated; how to advocate at all levels of practice for the under-privileged, and how to base practice on the social work tenets of social justice, human rights, and choosing the most appropriate interventions.

STUDENT OUTCOMES

The overarching objective of this class is to help students move from basic self-awareness to critical consciousness, from practice skill and assessment to intervention and social action in addressing power and oppression, promoting diversity, advocacy, social justice and in basing appropriate interventions in evidence and applying the best available evidence for various groups and problems.

Upon completion of this course, students will:

- Understand the historical and contemporary involvements of the SW profession, including the NASW & IFSW, and the UGA SSW in empowerment efforts.
- Develop an understanding for the philosophy and spirit of the MSW curriculum at the UGA SSW
- Develop a level of understanding about social justice and its connection to privilege, power, oppression.
- Deepen their understanding of their personal social and cultural identities and biases, and how these relate to clients diverse clients and communities.
- Understand and articulate concepts of culture, identity, privilege, power, ally behaviors, oppression, social justice, and “differentness” and integrate these concepts into their practice framework (micro or macro). Understand how these concepts operate in a global context and relate to human rights.
- Gain skills in having honest conversations about the intersection of social work and race, class, gender, ability, sexuality, gender, national origin, difference, oppression and privilege.
- Utilize skills to combat social injustice, which is necessary for competent practice in diverse communities, including self-reflection, self-assessment, and consultation, and use these skills to understand and build ally relationships.
- Apply theories of oppression (social injustice) to assess the impact of systemic/institutionalized oppression on clients, develop culturally congruent services to reduce its negative effects, and empower client to challenge existing oppressive conditions by intervening at multiple systems levels.
- Identify and discuss the extent and nature of economic and social inequality, discrimination, self-governance and social capital, especially as it relates to race, gender and sexual orientation, age, religion, disability status, ability to vote, class and ethnicity.
Social Justice Relevant Faculty Publications by UGA School of Social Work Faculty 2010-2020

AGING


“Injustice anywhere is a threat to justice everywhere.” — Martin Luther King, Jr.


BEHAVIORAL HEALTH


BEHAVIORAL HEALTH AND RACE/ETHNICITY


**CHILD WELFARE**


“**My doctrine is this, that if we see cruelty or wrong that we have the power to stop, and do nothing, we make ourselves sharers in the guilt.”** — Anna Sewell


**CIVIL AND HUMAN RIGHTS**


CIVIL AND HUMAN RIGHTS INTERNATIONAL


“There must exist a paradigm, a practical model for social change that includes an understanding of ways to transform consciousness that are linked to efforts to transform structures.”
— bell hooks, Killing Rage: Ending Racism


CRIMINAL JUSTICE


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**“Philanthropy is commendable, but it must not cause the philanthropist to overlook the circumstances of economic injustice that make philanthropy necessary.”**

— Martin Luther King, Jr.

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**CRIMINAL JUSTICE AND GENDER**


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**CRIMINAL JUSTICE AND HEALTH**


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**CRIMINAL JUSTICE AND RACE**


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“If you tremble with indignation at every injustice then you are a comrade of mine.”
— Ernesto Che Guevara

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CULTURAL COMPETENCE


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ETHICS


GENDER


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GENDER AND BEHAVIORAL HEALTH


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GENDER AND VIOLENCE


HEALTH


“If there is no struggle, there is no progress.”


HEALTH AND GENDER


**HEALTH AND RACE/ETHNICITY**


“America’s health care system is neither healthy, caring, nor a system.” — Walter Cronkite


**HEALTH AND RELIGION**


Choi, Y. J., Orpinas, P., Kim, I., & Kim, J. H. (2020). Factors promoting physical activity among Korean American youth living with arthritis and comorbidities. *Journal of Human Behav...

**HUMAN TRAFFICKING**


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“I am no longer accepting the things I cannot change. I am changing the things I cannot accept.” — Angela Davis

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**INTERNATIONAL AND IMMIGRATION**


POVERTY


**RACE**


“Until the great mass of the people shall be filled with the sense of responsibility for each other’s welfare, social justice can never be attained.” — Helen Keller


**RACE AND RELIGION**


Moore, S. E., Adedoyin, C., Robinson, M. A., & Boamah D. A. (2015). The Black church: Responding to the drug-related mass incarceration of young Black males: "If you had been here my Brother would not have died!” Social Work & Christianity, 42(3), 313-331. https://pdfs.semanticscholar.org/1fba/c18b1e5bda6f5f52c81cb6b192c7225312.pdf


**RACE AND SOCIAL WORK EDUCATION**


Briggs, H.E., Holosko, M.J., & Miller, K.M. (2018). Editorial: Concluding remarks: Ten, nine, eight, seven six, five, four, three, two,


RESEARCH


SEXUAL MINORITIES


SOCIAL AND COMMUNITY ACTION


“‘The opposite of poverty is not wealth. In too many places, the opposite of poverty is justice.’” — Bryan Stevenson


SOCIAL AND COMMUNITY ACTION AND RACE

SOCIAL WORK EDUCATION


SOCIAL WORK HISTORY


SOCIAL WORK PRACTICE


VIOLENCE


**“The need for change bulldozed a road down the center of my mind.” — Maya Angelou**


Call for Papers - Journal of Poverty Special Issue

JOURNAL OF POVERTY

Special Issue

Land and Cultural Dispossession and Resistance:
Afrodescendent and Indigenous Peoples in the Americas

Editors: Stephen Haymes (DePaul University-Chicago, USA), Vladimir Nunez (Pontificia Universidad Javeriana-Bogota, Colombia), Llewellyn Cornelius (University of Georgia-Athens, USA)

Background/Rationale:

The historical legacy of Afrodescendent and indigenous peoples in the Americas has been shaped by what Anibal Quijano refers to as the “coloniality of power” of Western capitalist modernity. This model of racialized power along with its ideals of development, nature, gender and knowledge has resulted in the annihilation of other worlds, specifically Afrodescendent and indigenous. Thus, for example, in Latin America at the hands of international finance, extractive industries; and governments these populations have disproportionately been the victims of political and social violence, land and cultural dispossession, climate and water injustice, and environmental destruction. Likewise, the promotion of tourism as an industry in the Caribbean Basin, the Southern coast of United States, and also in Latin America, has created both a dependent economy and the dislocation of indigenous and Afrodescendent populations from coastal areas to support the development of seaside hotels and resorts which block access to beaches. The forced displacement, migration and dispossession of rural communities in the Caribbean, Latin America and the United States to isolated urban and suburban ghettos has resulted in, for example, food and socio-environmental injustice, and political, economic and geographical isolation.

This special double issue of the Journal of Poverty focuses on documenting the 21st century consequences of the coloniality of power, as it relates to, for example, extractivist and tourist industries, cultural and land dispossession, forced displacement and migration, climate, water and food injustice, cognitive injustice, and the environmental destruction of Afrodescendent and indigenous communities in the Americas. Along with this, the special double issue is especially interested in submissions that integrate as part of their analysis and discussion the forms of resistance by these communities.

Preference will be given to submissions theoretically and conceptually grounded in critically oriented perspectives in the social sciences and humanities and also in, for example, race and ethnic studies, Africana studies, Latin American studies, communication studies, critical intercultural studies, urban studies, women and gender studies, queer studies, educational studies, indigenous studies, environmental studies, political ecology, development studies, migration studies and decolonial and postcolonial studies.

Tentative Timeline:

- Issue Call for Papers: April 2020
- Submission Deadline: March 31, 2021
- Publication: Fall 2021

Click on the following link for further information: https://bit.ly/journalofpovertysi