Global economic, cultural and ideological processes in society affect social work and the welfare regimes in developed countries. In their day-to-day work, social work professionals are confronted with the impact of unemployment, the widening income gap, social vulnerability and disadvantageous living conditions. In contemporary social work practice, there is a call for effective models of practice that promote practitioners' autonomy and their abilities to give support that is more preventive, to their clients. This article reports on some developments in social pedagogy within the context of social work issues and offers insights on practical preventive social interventions. It identifies four bases for operating schemes in social pedagogy within social work practice: empowering strategies, an appreciation of clients' cultural and ethnic preferences, responsive communication, and promoting collaboration, along with cultivating alliances with significant actors around the client. The potential of these operating schemes as tools might be applied to varied preventive interventions. The article concludes that these bases within socio-pedagogical social work can extend the capacities of welfare services by changing the dominant discourses shaping many contemporary welfare service contexts, as well as by the workers themselves supporting their clients' lifeworlds.

Keywords: social pedagogy, social work, welfare service.

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Its high quality services, its committed and well-qualified staff and its responsiveness to client need (Bytheway, et al., 2002) measure the welfare state’s success. A major challenge facing contemporary social pedagogy within social work is to develop its relevance to, and connection with, the issues of social vulnerability and problems occurring in local communities (Fawcett, 2009; Ranci, 2010). In tackling existing issues with inequality, social vulnerability and marginalisation, there is a lack of a holistic approach to both the societal and the individual lifeworld context (Dychawy Rosner, 2016; Manuel, 2006; Oliver, 1990; Ranci, 2010). To remedy this, social practices can intervene to prevent reductions in the scope and quality of service for sustainable welfare services. Various factors affecting an individual’s life offer challenges to professionals conceptually, methodologically and practically, when it comes to considerations of the social divisions such as age, gender, ethnicity, socio-economic status, disability etc., as well as the responses of different authorities in relation to policy, practice and research (Blom and Morén, 2010; Grunwald and Thiersch, 2009; Manuel, 2006; Midgley, 1997).

The concepts and assumptions of this article are based on a social work and social pedagogy theoretical discourse (Blom and Morén, 2010; Göppner and Hämäläinen, 2007; Mullaly, 1997). Many professionally held values bring social pedagogy and social work together with commitments to act in the best interests of the individual, safeguarding, promoting social and economic well-being, and with supporting vulnerable and oppressed people’s independence and social connections. In Sweden, social pedagogy in social work practice has an opportunity to increase the clarity regarding these professional approaches through an infusion of the subject of social pedagogy in graduate social work education (Righard and Montesino, 2012). Both social work and social pedagogy are formalised as coherent vocational activity approaches for dealing with social problems (Midgley, 1997). In this context, the concept of social work is understood as emphasising the importance of the social and political structures that shape human societies and stress that social exclusion must be considered when examining the effects of oppression and powerlessness in contemporary society (Lavalette, 2011). Accordingly, the concept of social pedagogy originates from that central to social pedagogy belief that social power relations shape the personal status of individual and that people oppressed and dominated have to be encouraged to build self-confidence and self-efficacy (Dychawy Rosner, 2015; Eriksson, 2014; Grunwald and Thiersch, 2009). Correspondingly, the terms social pedagogy and social work, according to this portrayal, will be used interchangeably as socio-pedagogical social work. The theoretical frame in this paper touches on the concept of the individual’s lifeworld and the welfare system embedded in this world. It is based on social constructivism and the salutogenic progress-oriented approach within social care work, its resources and its organisational scope. According to contemporary research, social pedagogy is a meaningful construction and a creative approach to inclusion, participation, collaboration and dialogue in the professional communities of practice within social care and welfare services (Dychawy Rosner, 2016; Eriksson, 2014; Grunwald and Thiersch, 2009). As such, socio-pedagogical social work not only represents the accepted norms of welfare, but creates new ideas and forms of practice as well.

This presentation addresses the issue of how social pedagogy inputs may manifest themselves in work with socially vulnerable groups. The aim is to cultivate knowledge around the theoretical, methodological and practical premises as a base for a professional socio-ped-
agogical approach in social work. However, to date there has been no extensive analysis of the actual content and implementation of preventive socio-pedagogical structures. In this article, I have considered the ways in which various factors in the social environment construct clients’ needs and how professional service missions related to preventive intervention can work. Given the complexities of social pedagogy within the terrain of social work practice, the question is: how may socio-pedagogical approach contribute to the preventive helping process when dealing with clients’ needs?

**Complexities of the social work practice terrain**

Many developed countries experienced serious economic difficulties in the 1970s and increased their social expenditures at higher rates than economic growth. In Sweden, the extension of social rights in the modern welfare state was supposed to place the country in the avant-garde of social inclusion. However, many social policy experts have claimed that state social welfare has not reduced class inequality in society to any significant extent (Malmö Commission, 2013; Morel, Palier and Palme, 2012). This view seems to be vindicated by the emergence of citizens' rights movements within various health and welfare fields, which link service users' experiences to the civil rights movement (Swain et al., 1993). Such concepts as, for example, independence or being normal, were problematised as a form of oppression that individualises disability or social vulnerability rather than viewing it in social terms (Oliver, 1990; Swain et al., 1993). Confronting the prevailing labels of disabling or enabling social structures, actions were promoted to achieve improved access to public spaces and to challenge cultural stereotypes by encouraging people with disabilities to be active agents for change (Fawcett, 2009; Swain et al., 1993). Today, in contrast to the dominant models of health and welfare delivery, these services seek to engage service users in dialogue (Dychawy Rosner, 2015).

The political context and the emergence of new social service programmes, including community development, poverty alleviation initiatives and community health services, created a reorientation of the knowledge base from an individualistic frame to perspectives that recognise the social contexts of service users' lives (Lavallette, 2011; Morel, Palier and Palme, 2012). More recent research has extended this understanding to integrate various theoretical traditions into the thinking, to guide and support clients. For example, Dychawy Rosner and Eklund (2003) conducted research that was partially based on the biomedical discourse, with a focus on an individual's functional status as the object of inquiry. This perspective fails to recognise the ways in which developmental disability and wellbeing are intimately linked to the social norms and social environment in which they occur (Dychawy Rosner, 2015).

Social work has become highly routinized and bureaucratised, as it has increasingly moved away from professional into managerial control (Lavallette, 2011). A Swedish municipal social care may be an example of how managerialism has introduced forms of management by documentation that force professionals to perform certain work in certain way. This development has been subjected to critique and debate (Höjer and Forkby, 2011; Guidi,
Meeuwisse and Scaramuzzino, 2015). Correspondingly, social science research has repeatedly demonstrated the influence of socioeconomic disadvantages on personal life experiences and a range of social determinants of health and wellbeing. Social welfare investigators are still concerned about the impact of social programmes on equality and on people's life conditions (Malmö Commission, 2013). These narrower discourses can enable professional expertise to adopt a more self-critical stance over their caring functions and about the purpose and effects of their practice. Social pedagogy within social work was found to have an important role in delivery if social programmes and to reinforce anti-discriminatory practices and social protection, and promote social inclusion, by addressing the challenges posed by poverty and social exclusion and helping clients to respond to hazards in social structures, in the sense that it promotes resocialisation and helps clients to avoid certain social and economic risks (Dychawy Rosner, 2016; Eriksson, 2014; Grunwald and Thiersch, 2009).

**How may preventive interventions in socio-pedagogical social work contribute to the process in dealing with clients’ needs?**

Social practices and institutions are the products of a historically situated exchange of ideas and embedded authorities (Foucault, 1977). Various disciplines outside of the social sciences, such as biomedicine, psychology, psychiatry, sociology, and neoclassical economic and legal discourse, have a historic and contemporary influence on the development of a formal knowledge base in socio-pedagogical social work. Going beyond a concern with effectiveness, discomfort over the limited capacities and an acknowledgment of the social dimension of the services, social work theorists sought to integrate a radical and social action perspective in models of anti-oppressive casework approaches (Lavalette, 2011). This movement enabled practitioners to integrate the analysis of structural and cultural injustice into their interventions (Healy, 2014, Mullaly, 1997).

A global process within contemporary society mirrors a shift from a more stable framework of solidarity to a more fluid one centred in self-realisation, self-confidence, access to personal choices, possibilities and flexibility (Giddens, 1991). This raises questions of how disadvantaged groups are treated in relation to the underlying normative notions and images connected with general expectations or social treatment. Consequently, the call for preventive welfare services work urges professionals such as social pedagogues and social workers to become active agents for change in the existing social order when supporting their clients. The role of social pedagogy assigned to social interventions differs depending on clients' needs and their social conditions, and it is influenced by various personal, institutional and societal factors (Dominelli, 2004; Manuel, 2006; Grunwald and Thiersch, 2009). The content and rationality of preventive interventions is expected to provide people with both the necessary capabilities and reasons for change. Thus, it can be a restructuring process going from a passive, institutional
and administration-based protection strategy, to an active response based on an individual approach in the intervention architecture. The varied topography of practice provides professional approaches situation-by-situation, through the application of social pedagogy theory, technique and strategic solutions designed to meet the present need. This requires a long-term perspective as well as an integrated view of the clients’ living situation and access to the institutional and personal resources that exist in the surrounding social environment. According to Blom and Morén (2010), social work interventions are seen as open systems, and their content is influenced by external factors. In view of that, interventions can be described as outputs, e.g., shaping diverse conditions, or as outcomes, when they demonstrate an influence on the clients’ life situations.

As client groups are generally regarded as having low status and being politically powerless, the professionals have to direct their attention to the ways in which service and social support is conceptualised and delivered. In recent years, a growing interest in socio-pedagogical prevention research is noticeable. A study of prevention context noted that much of early social work prevention practice tried to decline the impact of illness and social problems on both individuals and communities (Ruth, et al 2015). Call for prevention have been part of every national health and social care reform discussion for population based approaches. National Association of Social Workers (NASW) (2005) has integrated prevention into practice standards. Preventive interventions are to be provided as universal to an entire population, selective to those at risk for problems or indicated to those who have shown or experienced a problem.

The support aimed at particular skills and competences is generally called training, as an active response to an individual’s need, and emphasises the person-in environment approach. This is a formal intervention that is aimed at the production of guidance and activities that regulate a person’s development and forms the content of their successful process of overcoming their experienced lived borders and adapting to their social lifeworld within the existing social surroundings. The support of clients’ transition from a position of social vulnerability and dependence on help to a state of independence and wellbeing may undergo what social researchers call a change, and adaptation opportunities as well as problem-focused actions are necessary in order to improve future individual capabilities and powerful support. Fawcett (2009) draws attention to a risk and vulnerability paradox. Prescribing interventions to those perceived as vulnerable accentuates their perceived weakness rather than their strengths, and the need of assistance rather than autonomy. Looking at this dimension, preventive intervention must recognise value-laden assumptions and concentrate on a more sustainable state of functioning and focusing more on client in environment perspectives.

Socio-pedagogical prevention is in this paper understood as a social intervention designed to facilitate behaviour and environmental adaptations that minimise impact of ill health and social ill, improve or protect health and social wealth (NASW, 2005; Ruth et al, 2015). The issues of empowerment and the mobilisation of various resources are here a crucial subject, as in every society the relocation of resources from the economically active population to dependants is a basic function that has created pressures within which human spaces and societies have developed (Morel, Palier and Palme, 2012).
Accordingly, to perspectives presented above, I would like to suggest that there are four pragmatic bases for the development of what may be called preventive interventions. Looking at the essentials of the operation of social pedagogy within social work practice’s preventive profiles (see examples in Table 1), we can take into account four imperative strategies aiming at generating support. They are: the development of empowerment and mobilisation, an appreciation of the clients’ cultural and ethnic preferences and practices, responsive communication strategies and managing appropriate collaboration.

**Empowerment and mobilisation**

Empowerment has become an essential part of socio-pedagogical theory, and as such, it seeks to increase the personal, interpersonal and political potential of marginalised populations. Within social work, there has been some debate as to whether to consider empowerment a theory or a process (Carroll, 2004). As theoretic framework viewed as helping people to take more control over their lives and as a professional model of practice, it may include a variety of conceptually coherent social work approaches and frameworks for practice (Lee, 2001).

Empowering types of strategies to preventive socio-pedagogical social work need to acknowledge that the societal discourse of vulnerable populations may still be quite rudimentary, and too often based on attitudes that, e.g., people with disabilities, older people, immigrants, etc., form a group of individuals competing for economic resources with other social groups. Professional actions have to rework and reposition these kinds of attitude by adopting activities, in terms of diversity, communities, cohesion and inclusion, which can tackle these silo structures of existing realities. It is a matter of moving the socio-ecological determinants of disadvantage from the pathologising and limited potential of casework methodology to being prepared to support the greater empowerment of service users by influencing the strategies related to the clients’ co-option of a wider social environment (Dychawy Rosner, 2015; Malmö Commission, 2013).
Table 1. Example of operational strategic solutions in preventive social pedagogy in social work practice

<table>
<thead>
<tr>
<th>Strategies</th>
<th>Content</th>
<th>Example of common elements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Empowering strategies and mobilisation</td>
<td>Identifying the nature and power of strengths</td>
<td>Listening to the clients' voices and encouraging participatory engagement in the development of safety plans and resource mobilisation</td>
</tr>
<tr>
<td>Appreciation of clients' cultural and ethnic preferences and practices</td>
<td>Acknowledging and identifying the conceptualisations of cultural values and beliefs that are incorporated into daily life</td>
<td>Communication</td>
</tr>
<tr>
<td>Responsive communication strategies</td>
<td>Development of relations and relational process between worker and service user</td>
<td>Promoting in-depth conversation for engagement in the concerns and experiences of the service user</td>
</tr>
<tr>
<td>Managing appropriate collaboration</td>
<td>Promoting sharing the clients' perspectives with their significant others, community stakeholders and support systems</td>
<td>Cross sector membership and the cultivating of alliances and working relationships</td>
</tr>
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</table>
Investigators studying lifelong learning have highlighted the crucial importance of empowering strategies. Ideas of lifelong learning have strong linkages to the social pedagogy concept of bildung (Hellenes, 1976). According to this hypothesis, social pedagogy practice aims to help an individual develop critical capacities and build self-knowledge, plus social, cultural, and political understanding (Grace, 2007). Freire (2005) emphasised such inclusive and liberating pedagogy as a core tool to analyse the exposition of any injustice as well as an individual’s struggles and possibilities for change. Freire’s radical educational approaches have applications far beyond education, and social workers recognise them in practice with marginalised and disempowered people (Hegar, 2012). For example, the principle of starting where the client is, endorses one of the most supportive applications in strength and empowerment-based approaches. The preventive capacity to generate very substantial empowerment can also help people determine their own priorities and makes it possible, as a socio-political notion and a moral duty, to take care of other individuals who, due to their disabilities, weak position, accidents or old age, are incapable of taking care of themselves.

Appreciation of clients’ cultural and ethnic preferences and practices
The importance of clients’ cultural and ethnic preferences is supported by Cooper (2001). The reallocation of priorities and supporting of clients’ cultural and ethnic preferences can be understood as a de facto exchange of resources across diverse social groups, classes, generations and cultural values (Lavalette, 2011). With increasing globalisation, travel and migration, some individuals or groups are becoming exposed and dependent on transfers and the redistribution of social support within the host country’s national context or – as some prefer to see it – an investment in human resource with future returns to society (Morel, Palier and Palme, 2012). Thus, the patterns of social pedagogy support and are in fact strongly connected to the institutional context in each public social service, and to the available resources, but there are also powerful relations mediated by personal communication and professional skills that may directly affect the scope of the helping encounters, and accumulate social support during the various processes of integration (Eriksson, 2014; Grunwald and Thiersch, 2009).

Responsive communication strategies
Communication chains of supporting networks include client participation, and they are often good occasions to develop mutual understanding and to test new ideas and explanatory models, alongside an advancing awareness of the inherent dynamics of the conditions of the individual client’s own experiences. Intensive support models for families and individuals identifying having multiple and complex needs are described in the literature (Howe, 1998). In some cases, the communicative relationship itself is a therapeutic vehicle (Mason, 2012; Parr, 2016). A deepened dialogue with involved parts is needed, through which a systematically planned, evaluated and recorded exchange of experiences can develop (Quinney, 2006). The growth of shared constructs for intervention outcomes shapes the development of specific solutions and an evaluation that presupposes pedagogical knowledge of the theory of instruction considering the broader conditions that contribute to situations of social expectation (Dychawy Rosner, 2016; Engestöm, 1994; Morel, et al., 2012).
Managing appropriate collaboration

The important recognition in this field is that social pedagogy approaches do not operate in a vacuum. This may be particularly clear when it comes to addressing the issues of creating support networks connected to the client’s daily life (Quinney, 2006). This calls for social pedagogy within social work practice to include strong alliances with the existing social networks around the person. Practitioners need to establish working relationships with their clients and within their own and external institutions, by having dialogues with representatives and stakeholders belonging to other authorities who are also aiming to build up usable intervention outcomes. Consequently, social prevention approaches are strongly dependent on the cultural and institutional context of the social welfare services in which they are practised.

Social intervention usually involves many planners and executors, which may cause problems (Quinney, 2006). On the other hand, the joint planning and realisation of interventions makes use of more diversified expertise around the client. The tapestry of a “chain” of supporting networks is created, where the metaphor illuminates the interconnections among the institutional logics of service delivery and an individual’s lifeworld (Grunwald and Thiersch, 2009). While the client may experience the helping situations individually, it is a fundamentally social, socio-pedagogical and environmental treatment act. The tendency of acting in this way towards the supply of professional networks may be very powerful. Kyriacou (2009) made an important point that social pedagogy has overlapping dimensions of care and welfare, focusing on inclusion, socialisation and support, to achieve knowledge. Hence, collaborative preventive practices are synonymous with regenerative capacity building and human capital development. This is shown, for example, in early childhood education and care; education and lifelong learning; specific forms of labour market training and social institutional protections; and across social policy for vulnerable populations and social investment; to better address the new social risks. The multidimensional collaborative approaches are, in spite of this, at the core of developing, supporting and protecting the clients’ kinship networks and skills to keep them secure.

The hypothesised four basis of preventive social interventions must be understood as a social process that is embedded in institutional arrangements, in social actions and as the active dynamics of social life (Ruth, et al., 2015). Hitherto, most professionals have considered operating strategic solutions in preventive social pedagogy in social work as a possible step towards avoiding social exclusion and the reconstruction of deprivation, and to prevent loneliness through generating access to services and facilitating the empowerment of their clients. This demands practitioners to focus on the individual’s global role, which provides their clients with valuable qualities but also on the necessity of developing advantages and reducing the existing societal disadvantages in the systemic structures (Dominelli, 2004; Dychawy Rosner, 2016; Lavalette, 2009) and client’s social location (Blom and Morén 2010). These preventive strategies bear a relationship to Giddens’ (1991) structural theory and concept of the self as a co-constructor of existing reality. Preventive interventions imply social groups and communities meet, relate to each other and express their identities. It is not a static entity, but a changing system.

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Concluding perspective

This article highlights some opportunities and challenges in advancing the use of preventive socio-pedagogical social work interventions in communities. It proposes the four basic operating preventive strategies to be included in professional actions – which are empowerment and mobilisation, an appreciation of the clients' cultural and ethnic preferences and practices, responsive communication strategies and managing appropriate collaboration.

Thinking of social work practice from this perspective may be understood as something opposite to merely a broad bureaucratic, legislative and formalised approach to the needs of service users (Blom and Morén, 2010; Fawcett, 2009; Guidi, Meuwisse and Scaramuzzino, 2015). The socio-pedagogical preventive interventions offers a holistic approach to client lifeworld and macro-wellbeing perspective, which calls for client empowerment in their process of development by focusing on the strengths and resources in the client's life that could be mobilised. Additionally, it proposes specific contributions to the way practitioners think of the dyadic communication between social worker and client, and the collaborative interactions in setting up supportive contexts.

There is no single understanding of preventive social pedagogy in social work practice as it does not remain static but develops and progresses over time. However, both professional subject areas of action to some extends overlap each other (Eriksson, 2014; Kyriacou, 2009; Richard and Montesino, 2012) and can enrich support of clients. Yet, prevention is still a minority interest area within socio-pedagogical work, with its historic commitment to social justice and service to vulnerable populations (Ruth et al., 2015). Social pedagogy practice occurs as an approach nested in social work in the micro, mezzo and macro systems, and in the inter-sectorial issues of the gender, ethnicity, disability and vulnerability of older people (Dychawy Rosner, 2016; Grace, 2007; Healy, 2014). Application of the identified bases for operating schemes may bridge the role of officialism to develop a closer function of supporting social justice, participation and therapeutic assistance offers a closer familiarity with and understanding of clients' lifeworlds, and places personal resources, strengths and achievements at the centre of the approach. The multidimensional preventive aspects are, however, associated with neoliberal policies (Fawcett, 2009) and concern an emphasis on both top-down and bottom-up mechanisms for participation.

In sum, the growing number of vulnerable populations add urgency to the need for socio-pedagogical specialist provision. There are many different attempts to develop new social interventions. Dominelli (2004) points out that pathology-based intervention in people's lives are not predominated. They are outcome of particular ways of defining and processing people. Preventive interventions should direct practitioners to think at multiple levels to apply four bases for their operation schemes such as empowering strategies, an appreciation of clients' cultural and ethnic preferences, responsive communication and promoting collaboration, along with cultivating alliances with significant actors around the client. It supports a postmodern paradigm acknowledging that there are many ways of knowing (Kyriacou, 2009; Sam-
son, 2015). This constructivist approach correspond with participatory and dialogical process in helping relationships (Dychawy Rosner, 2015; Cooper, 2001). Yet, the critical force of all this individual centred activities can be systematically constrained by professional heritage, institutional orientations and high degree of standardisation. A central concern remains with respect to concrete changes in professional relational work. In order for social professionals really to involve sustainable preventive interventions, they must become reflective, recognise the conditions underpinning the situational questions that they imply, and examine. Another dimension to development of sustainable social interventions is risk to liberating experience if its process and contents are managed and controlled by the same people who have the power to label the problem. It does, however, point us toward a need for further clarification of social workers' ways of acting and positioning in relation to use of preventive interventions. Finally, in order to explore the hypothesis regarding operating bases of what may be called preventive interventions, it would be appropriate to examine social practitioners' subjective experiences of different practices they assume to be appropriate in their local contexts.

References


