Journal Entries

SOWK 665- Influencing Social Policy

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**Entry #1**

I am going to start with the definition of social policy that really forced me to think about the context and environments that social policy is written.

 “Social Policy is premised in the past, implemented in the present and directed towards the future. It is influenced by societal values and ideologies and should be sensitive to the diversities that constitute Canadian Society.” Graham, Swift, Delaney (2003).

I have never really given much thought to the historical context of policy development until this class. The text (Westhues, 2006) nicely outlines the major influences of politics and ideology that shaped today’s current social policy in areas like welfare, health and justice. I have often been frustrated by the downfalls of many of these policies, for example, the rates single people are given to live on social assistance but I did not think about how these policies were shaped and the ideologies behind them. I have learned that before pushing for change it is essential to understand where current policies have come from and the historical context and ideology that they were developed in and also the current environment we are living in. The economic factors, political environment, community understanding are all so important in the success of policy change.

 I was involved with an organization/ group that worked on making our city buildings and businesses smoke free before provincial legislation was passed. This group and its leaders worked tirelessly trying to convince city council that they should become a smoke free city and lobbied hard and frequently on the issue. For many years there was little support for making the change. Over time we heard more about second hand smoke and its side effects at a National and Provincial Level. At the local level, through relationship building and finding the right champion on council our city passed the first bylaw in Saskatchewan to become smoke free. Soon after the local policy was passed the province also implemented smoke free legislation.

This was my first involvement in social policy change. In context of the above definition I can now see how we were unsuccessful for so many years, or were we laying the foundation education and awareness, for change in our community, I don’t know… I do think if we would have given more thought to why people were opposed to supporting the change and the ideology they held (individual choice and freedom, least intrusive, cost of enforcement) we may have been able to advocate in different ways to make the change happen sooner. With that being said, ultimately I think that the political will at the National and provincial level have the biggest impact on the social policy change around smoking at the local level.

**Entry #2**

As service agencies we label people and divide them by age, by diagnosis, disability, sex, and race and try to serve them based on the predominant label they have been given opposed to looking at the whole person. I wonder if there was a way to realign social policy and service delivery so we were providing services based on need instead of worrying about mandate and exclusion criteria? The issue lies in how programs and services are funded. Often programs are funded based on the next hot topic or political agenda. Examples of this in Saskatchewan are the discrepancies between funding available for clients eligible for services funded under the Community Living Division and clients that require similar services with a mental illness or an acquired brain injury. Another example is the renewed interest in funding programs for clients with a diagnosis of HIV and AIDS when a decade ago these programs were cut. Programs are funded to provide services to distinct groups. All of these clients have similar needs but because of diagnosis receive quite different levels of services (i.e. Housing options and work programs, monthly allowances). The whole idea of who is considered worthy to receive services and which group has strong advocacy groups working for them depends on the funding that is received. In a conversation during a presentation July 18/2011 you said that “governments are authorizing themselves to discriminate.” (Jake Kuiken). This statement holds true for me. On news talk radio the other day there was a conversation regarding the idea of a new ministry for gay, lesbian, bi-sexual and transgendered people (GLBT). There was an animated conversation with callers and their thoughts on this. Many people called in saying things such as –“only veterans should have a ministry” or” we should get rid of all of the ministries for specialized groups” (Aboriginals, Seniors, Youth) or “we should design new ministries for all groups” (blondes, people with blue eyes). Many callers felt that in Canada we are getting carried away providing specialized Ministries and services and by doing so we are discriminating others. I think it relates to the idea of the government authorizing to discriminate. I will think more carefully about my own advocacy and agendas for clients based solely on diagnosis and not on overall needs of people.