

Supporting social service teams in the promotion of more community-oriented intervention models: systematically organising the experience and compiling learning

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Abstract

This article compiles the reflections and lessons learned from the experience of supporting social service teams in the promotion of community work as part of their intervention models between 2017 and 2020. Through the systematic organisation of the work conducted, a host of key content- and process-related aspects are identified that may help bring about these changes to the forms of care offered and the organisational models needed to deliver this care.

In a social and healthcare emergency context that demands more proactive, collective approaches, as well as a return to community work within the functions incumbent on social services, this article aims to provide several clues with a view to future processes that may be set in motion with this community-based approach in mind.

Firstly, the article begins by setting out the current situation regarding community mandates in strategic social service documents. Next, the vested interests and needs behind the demand for support in promoting community work are analysed in depth. Lastly, the key stages of the supporting role performed are presented, and the emerging components that have been identified as leverage aspects for these processes of change are disseminated.

Keywords: Community work, social services, community-based approach, support, community intervention model.

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Contextualisation

As a means of social intervention, for some time community work has – with varying consistency – been re-emerging in countless academic debates and in the focus of social service and welfare policies to a greater or lesser degree in recent years in Catalonia. “The turn of the century has brought about a reversion to community-based components within social policies” (Carmona, 2011, p. 17). Several regulatory instruments are in place in order to foster community work, including Act 12/2007 on social services. Nevertheless, despite the “mandate” that exists in terms of community intervention and its incorporation into strategic documents, for some time several voices have pointed out that the reality of community work within Catalan basic social services constitutes a lingering practice that is not easy to prioritise or which entails an additional effort that is scantily recognised at institutional level (Ballester, 2017). Similarly, questions have been raised for some time while proposals and reassessments are made with regard to the position that the community element should hold within the basic social services intervention model owing to the strategic, locally based role these services play within communities.

The suitability of primary care services for community work stems particularly from the fact that they are close-at-hand services shaped according to the area to provide for the entire local population of residents or the persons who are there at any given time. As a core component at this level, the basic primary social care service must, as a whole, be multi-faceted in nature, allowing it to operate according to the social dynamics unfolding within the community or communities it serves (Pelegrí, 1999, p. 33).

In this context, a look ahead to the coming three-year period from 2021-2024 appears to point to years marked by substantial commitments and changes within the Catalan Social Services System and in policies for fostering community work and community action in Catalonia. Firstly, the new Strategic Plan for Social Services of Catalonia (PESSC) 2020-2024, promoted by the Catalan Ministry of Labour, Social Affairs and Families, robustly incorporates the community strategy, a core component in aspect 5 of the plan and, in a cross-disciplinary manner, throughout the entire document. Furthermore, at present work is underway on the implementation of the new Local Inclusive Community Action Plan (PLACI), fostered by the Directorate-General for Community and Civic Action, which is shaping itself as a new tool for intervention that the Government of Catalonia makes available to local organisations when it comes to social integration and community action. The PLACI is seen as an instrument that may help to strengthen the Catalan Social Services System via the organisational positioning of the new Plan within the Basic Social Services Areas, and by promoting a community strategy which permeates all the actions of the local organisations of Catalonia, steered by social services.

Nevertheless, beyond the political and strategic commitments identified – which are nurtured by the developments made in recent years –, in this breakthrough in the community focus we cannot overlook the substantial contribution made by the various social service teams throughout the region in promoting more community-oriented approaches. We commonly refer to commitments nurtured by a strategic perspective from the service managers and coordinators involving broad resolve, consistency and effort, although they have not always benefitted from the financial, organisational and regulatory backing that would have helped to further promote their cause; indeed, the conditions needed to be in a position to systematically establish these commitments as best practices – and assess their processes, models and impacts – have also not arisen.

Introduction to the support work carried out

In this context of commitments to community work, over the past three years we at the MARGES² team have supported social service managers and teams seeking to begin working on the basis of more community-oriented, collective approaches.³ The journey we have undertaken has allowed us to identify certain primary components that may serve as mechanisms for broader, more wide-reaching changes which should be taken into consideration if we wish to foster a process intended to define and promote a model of community intervention.⁴ All in all, the aim is for social service teams to embrace differing forms of social care that help to ensure the individual continues to remain at the heart of the process while also placing the spotlight on the communities and local areas they form part of.

The following lines detail the outcomes of the analysis of these support experiences and a reflection is given on the lessons learned.⁵ At a time when community work appears to be making a powerful comeback among the functions of social services, this article seeks to provide certain clues about the future processes to be brought underway with this community focus in mind. The goal is for experiences of change and innovation to be delivered from the standpoint of reflective practice.

2 MARGES is a social consultancy cooperative specialising in community action (www.marges.coop).

3 Work has been carried out with social service departments having differing features in terms of local circumstances (rural-urban), institutional affiliation to the local organisation (county or town council), existence of a community team or programme with a specific assignment in community outreach (PDC-Community Development Plan/PLA-CI), organisational models (geographical grouping, functional grouping, process-based organisation) or in-house organisational formulae involving professional specialisation (profiles specialising in community work within the EBASP-Basic Primary Care Teams/ABSS-Basic Health Areas, community-based benchmarks).

4 These aspects relate to the content of the change process, but also to the instruments and strategies to trigger and support it.

5 Certain reflections set out in this article also pick up on conversations held in the intervention forum held with the colleagues Elena Masanas, Clàudia Manyà, Guiomar Vargas and Fernando Fantova.

Mindful practice also allows us to learn from our day-to-day activities; accordingly, the work setting becomes a forum for learning. Moreover, a reliable assessment of our interventions will only be possible on the basis of this type of thorough practice. [...] Our proficiency shall only be enhanced through a reflection on and assessment of our interventions (Navarro, 1998, p. 39).

Analysis of the starting point: demands, needs, imageries

The support processes in the fostering of community work we are examining are launched following a demand for assistance – submitted by social service managers – which we receive as an external team, serving as the starting point for working with the teams.

Examining this initial demand in greater depth provides us with a wealth of information when it comes to diagnosing the needs and interests justifying the reassessment of means of intervention that lean towards more community-oriented models by social service teams, when it comes to the prevailing notion held of community work and when it comes to understanding this function as the start of a process of change.

Regarding the examination of needs and interests

As we have observed, the strategic and regulatory framework of social services (Act 12/2007 on social services; the future Strategic Plan for Social Services 2020-2024; the new Local Inclusive Community Action Plan) sets out the function of promoting a community strategy within social services. Nevertheless, these frameworks rely on an excessively abstract, vague approach in terms of the community mandate, preventing managers and teams from understanding these functions, and from bringing them into day-to-day practices and in-house methods of organisation.

In connection to the foregoing point, we have not made progress in Catalonia in building a specific methodological and conceptual framework in community work within social services to steer the community-based practice and strategy of teams. No answer has yet been given to the issue of *what it means for basic social services to engage in community work*, a question that implies defining what the *specific nature of social services is in the community-based approach*, taking into consideration: the contribution of community work among the target population and in the specific area, the organisational constraints to adopting a role of leadership or active involvement in community-centred strategies, the influence of the local perspective of the service (rural-urban) in the implementation of community-based approaches, etc. Indeed, on account of all the foregoing,

a large body of the needs and concerns that reach us in initial demands submitted by social services managers are positioned within this external mandate of promoting community work (scenario *a*), albeit within a blurred and unspecified function framework hindering a precise understanding of “what is being asked of us in community work” (what) and “how it can be delivered” (how).

We also encounter needs for assistance triggered by in-house commitments to promoting community work (scenarios *b* and *c*). These commitments may crop up within the context of a more generalised process of reassessing the organisational model of the service which entails working towards a reflection on the intervention models, the association between the service and the local area, or the role played by people receiving care in the projects and services we draw up, among others. When the starting point triggering the demand for assistance is this (*b*), we are faced with an opportunity given that the organisation is imbued in a deeper process of transformation. Nevertheless, at the same time, in these hazier, more convoluted contexts – embedded in processes of change – reactions of fear and resistance to the promotion of new means of action and intervention may be triggered more easily.

However, we may be dealing with commitments (*c*) that are brought about when teams are faced with a “complex or stagnated” social intervention context, calling for a more comprehensive, proactive and community-centred approach. When the starting point for the support/working process is triggered by the need to design a *community intervention as a response*, the capacity to solve the challenge or tension that has brought about this process will become a necessity, whilst it will also be necessary to capitalise on it in order to introduce new community-based means of action that go beyond the design of the specific strategy and which allow the teams to cast doubt on the prevailing approaches and test new forms of engaging with the local area.

On the borderline between scenario *a* and scenario *b* we find the occasional further demand brought about by a political assignment entrusted to the social services manager by the council. Indeed, this is a situation that may be interpreted as an opportunity. Even so, it is necessary to be able to thoroughly examine the reasoning behind the duty to promote community work and, most importantly, the imagery about the community intervention and the expected impacts. We have occasionally outlined projections that link community work to a lower volume (and lower costs) of direct care, or to a certain softening of conflicts in neighbourhoods, or to an expected “change of image” exhibited by social services in the local area. A whole range of variables will impact on whether or not some of these effects arise. In any event, the risk of this projection is that it ties community work in with visible actions (the development of “projects and actions” in the local area) and casts a veil over the community micro-processes that professionals launch from the regular sphere of direct care (Cofiño, 2018) which are helping to create contexts that encourage the

social involvement of the persons receiving care (European Antipoverty Network, 2009).

Regarding the prevailing conception of community work

Largely speaking, we observe a strong, broad tendency to envisage community work as engaging in projects and activities within the community; associating it with actions we perform outside of the offices and facilities of our service (MARGES, 2020; Manyà and Morales, 2018). Of course, boosting community actions implies being in the local area, engaging with the people, and this is the setting where things happen... However, this image of community work is restricted and idealised at the same time. In the idealised conception of it, we at social services drag along a somewhat nostalgic vision of community work, one which believes it is possible to automatically transfer the community practices from other periods to present-day organisational frameworks and social contexts (Ginesta, 2014; Ballester, 2017). In the restricted conception of it, the fact that the choice of community intervention model should not solely be linked to a host of intervention techniques and methodologies – and instead should be the upshot of an analysis that addresses the aspect for which we seek to intervene based on a community approach, with the motivations justifying this – is overlooked.

Not all aspects of getting outside the health centre constitute “community action”. Community action is not doing something with more than two people outside the health centre. Beware of this compelling, contagious need to leave health centres and take to the streets. Why? Based on what needs? (Cofino, 2018).

The primary implications of these conceptions in support processes relate to the risk of associating the acquisition of a set of new intervention methodologies and tools (the training aspect of teams) with directly leading to the promotion by teams of community-oriented practices. Firstly, this association overlooks a range of aspects concerning the conditions that need to exist (beyond aspects of training and skills) for teams to be able to engage in community-based practices and functions, which we will address subsequently. Furthermore, as mentioned, scant attention is lent to the necessary reflection that must be given to the decision on the relevance of committing to a community intervention methodology and on the reasons *for which* the collective dimension of social issues should be addressed.

Along these lines, faced with a specific social reality, as an organisation and team of professionals we benefit from a host of ways to explain this phenomenon and intervene in the specific social challenge or problem. We accept that the manner in which we act with regard to social problems (homelessness, unemployment, housing shortages, emotional distress, unwanted loneliness, etc.) is the result of a highly specific way of observ-

ing reality, and to a certain extent this manner entails a certain ideological onus (Viscarret, 2009). In adopting the manner of understanding and addressing social reality from the perspective of politicising community action (Rebollo, 2019), the changes we imagine and seek in this reality are not exclusive to the subject or the populations enduring certain problems; rather, they include – or should include – society at large, along with the policies driving these changes, the institutions and, additionally, ourselves (personally and professionally) (Barbero, 2008). Accordingly, the actions we should be performing as part of community-centred processes should focus on various aspects of the social reality in which we seek to intervene: the strategic dimension (interpreting the reality and planning the most appropriate intervention according to our understanding of it); the methodological dimension (the most suitable methods based on the goals we aim to reach); and the person-centred dimension (implementing actions with a focus on strengthening the bonds and social relationships of cooperation). These three dimensions refer to the various elements we need to take into consideration when we state that, as an organisation, “we wish to engage in community work”. The framework for the three dimensions helps to provide us with a strategic perspective when it comes to selecting a community-based approach and endowing the day-to-day function we perform with a community-centred purpose, avoiding falling prey to the habit of diminishing community work to a one-off project or activity which we label as being “community-centred” simply because “people from the community take part” and “we carry it out away from our offices”.

Regarding the understanding of functions as processes of change

In keeping with the theme of the foregoing points, in initial demands to promote community work we identified a great deal of emphasis was being placed on training-related aspects (familiarisation with community work, acquisition by professionals of new tools, etc.); however, internal organisational aspects of the service which could encourage – or restrict – the implementation of these community-centred practices are not taken into consideration so widely. One may believe that the demand for training leaves responsibility for promoting community-centred practices at the feet of professionals, diminishing the responsibility of organisations to identify and create the organisational and contextual conditions to make it possible.

Social services professionals cannot do this single-handedly [...]. Accordingly, at the same time it is necessary to refer to the responsibilities incumbent on the organisations and institutions that social services professionals work for, their professional associations and social policy in general (Román, 2009, p. 6).

In the team support processes carried out, we have worked on the assumption that there is an inter-dependence between “community work”

and “organisational change”, deeming that the commitment to community work constitutes an opportunity for organisations to reflect on and reassess their organisational models (MARGES, 2020), while the transformation of organisational models becomes a mechanism to foster more inclusive, community-centred care models (Manent and Fantova, 2020).

[...] may be an opportunity to transform traditional organisational models in order to lay the foundations for doing things differently, for innovating in how current and future needs are met, for building socially and financially sustainable models (Manent and Fantova, 2020).

One of the aspects we have been supporting managers and teams with in the promotion of community work is the need to relay responsibility in demanding support for teams back to the organisations in the understanding that if we are seeking to bring about meaningful, tested changes in the medium- and long-term we will need to define the process according to what it actually constitutes: a process of supporting change.

The journey: work carried out and emerging components

By considering these starting points we have been able to gain a broader, better understanding of the demands and needs that drive managers and teams to progress with community work, helping us to hone the support processes. In this respect, the role as an external consultant involves striking a complex balance between addressing the needs and anxieties driving the demand and, likewise, showcasing other elements that will need to be borne in mind to ensure the impact of the process will be more wide-reaching, helping the team to progress towards the establishment of a new (more) community-centred intervention model.

Consultancy is valid owing to its social function within communities of practice and knowledge, inasmuch as it adds value to existing efficient expertise within those communities and in their organisations and individuals. Its ethical commitment and professional expertise mean it encourages independence and, indeed, a liaison with the agents with which it engages, whilst also helping to boost the added social value of the systems, communities and networks it takes part in (Fantova, 2019).

From the standpoint of this baseline position, below we shall set out the key stages in the working processes that have been carried out in recent years, along with the components that have arisen. It has been possible to address some of these elements during the journey; others have been identified subsequently, based on a systematic approach to and a reflection on the work carried out. They are all what we shall refer to as driving-components and they are part of the lessons learned.

The implementation of brackets of support has been considered in various stages, to enable it to transition from the most strategic dimension, through the conceptual dimension and, lastly, progressing to the practice-centred dimension, without overlooking the recurring nature of all three.

Stage one: generating strategic conversations

Having determined as our goal establishing the responsibility incumbent on the organisation when referring to the promotion of more community-centred models, during the first stage of the support process we worked alongside the management teams in order to reflect on the strategic dimension (why and for what) behind the promotion of community work within social services. These *strategic conversations* also make it possible to identify the *boundary conditions* – limits and constraints – that we will need to address in the process (Moliní, 2012), whilst also allowing work to get underway on defining aspects relating to the internal organisation which should enable the community-centred functions to unfold within the teams.

The content of these conversations addresses issues such as:

- Our understanding of community work from our perspective as an organisation/service.
 - To identify differences in the imagery and languages.
- A reflection on the reasons for which we seek to foster community work.
 - To identify the contribution of community work within the mission of social services, on the context of the professional intervention, and among our target population.
- The establishment of the goals sought with this process and the desired changes.
- The identification of the boundary conditions, as well as the (internal) strengths and the (external) opportunities for the process.
- A reflection on the importance of establishing a community strategy as a service and framework for the community-centred function within teams.

The conversation about these key elements makes it possible to draw up the working process we will follow to lend impetus to community work within the service, thanks to a realistic and feasible working timetable which, at the same time, should make it possible to observe developments and assist teams in experimenting with new forms of intervention.

By and large, this stage has been carried out with the coordinators and managers from the service owing to the responsibility incumbent upon them. However, it may also be interesting to consider setting up a community work promotion group within the organisation (formed by

members from the management unit and a professional representing the various basic primary care teams/programmes/divisions).

Stage two: languages, expertise and abilities

In all support delivered, one of the core points in the procedure has been engaging in a community work training process within the service.

Although broadly speaking the trend is to address training to technical teams, we may point out the significance that the training plan focus on the various layers of the system-organisation, involving the management team and the administrative support units. In establishing a notion of community work as an intervention model and not solely as the implementation of specific actions and projects, it is vital to be in a position to lay the foundations for a shared framework within (and with) the organisation at large. Furthermore, as people we are prisoners of our own language, which in practice means that we encounter professionals and teams that use the very word *community* to refer to very different things. Training must serve as an opportunity to share, deconstruct and reach a consensus on the various imageries and languages concerning community work.

In this training stage it is necessary to strike a balance between content-based goals (concepts and methodologies)⁶ and process-related goals (relationships and intentions). The latter two examples relate to strategies to actively involve the team as a whole in the process of change and to support managers and teams in *sustaining the continuity* of this change.

The resulting lessons learned enable us to state that incorporating community work into the teams' agenda may lead to hugely varying experiences and, oftentimes, the forum afforded by *training sessions* becomes the ideal context in which to purposely trigger the range of emotions and opinions this commitment gives rise to. Indeed, people may exhibit an interest in the new strategy in a host of varying manners (Moliní, 2012): certain professionals show great enthusiasm for the scope for change and for incorporating new, more community-oriented approaches; others may attend the training with seemingly scant interest and motivation, albeit with an expectation concerning the outcome of the process; and others may portray their disagreement and, less frequently, openly show their “fear” that this care model triggers. All means of expression are legitimate and it will be vital to help identify which emotions cast a veil over disagreement, negativity or uncertainty, and what the training may deliver in order to shed light on these aspects and provide support. In our experience, the following approaches have been the most effective in truly addressing “fear within the community”:

- Generating the community dimension in the current care model of the service, as well as the intervention instruments and tools

⁶ To provide teams with a benchmark in community-centred work and new intervention strategies and tools to strengthen the community dimension.

used by the team: vindicating models such as person-centred care or the contributions from the systemic response, as well as the social diagnosis tools or the recent self-sufficiency matrix. They already encompass "the network", "the local area", the "bonds" between the people and families we support. What we do not always consider is that this is an initial level to the approach in community work and by lending it a team-based strategic vision and relational intentionality we are already contributing to the community strategy of the service.

- In relation to this first element, the training forum must help to break away from a *false reasoning* that shrouds the collective imageries of the teams: the tendency of urging to confront individual care with community work (Rebollo, 2019), which places us under the pressure of "either we engage in a case assignment or we conduct community work". In order to help provide reasoning that breaks away from these opposing rationales, during the training we have helped professionals to identify the various ways of contributing to community work through the regular functions the service delivers. The aim is to prevent the *community* from being deemed "as one more thing" to cover as part of a professional assignment, and instead to incorporate it in the unfolding of our tasks and projects. In this regard, the *proposal for the various contributions to the organisation's community strategy* has become an essential approach in doing away with this reasoning and lowering barriers to lending impetus to community work. Our position is based on the idea that within the team it is not necessary for everyone to work from the standpoint of the function of promoting community projects; however, it shall be important for everyone to work on the basis of a community-centred perspective (Cofiño, 2018) in keeping with a jointly established service-based community strategy.
- Another strategy that has yielded excellent outcomes is inspired by the suggestions from Sean Gaffney. In working with the teams to incorporate more community-centred mechanisms, it is necessary to have a view of the desired outlook for change (forward-looking focus), without neglecting to showcase the community-centred endeavour performed so far (track record focus) and which also enables us to discuss the frustrations at everything that was sought to be done but did not bear fruits.
- Lastly, one further strategy has been to generate conversations to allow professionals to explore their own abilities and motivations, as well as the fears and difficulties they believe they have in terms of the unfolding of potential community functions. This task (a reflective view) has helped envision personal and team-wide prospects and limitations, while aiding in outlining strategies in order to address the community tasks jointly. It has also assisted in steering away from the predisposition of

certain professionals to *detach themselves from the community task* when it is not individually experienced from an inner perspective, thus enabling them to conceive it as a service-based strategy embodied in distinct tasks and contributions among the various professionals and teams/units.

Stage three: creating the conditions

The third stage is the time for thoroughly addressing elements linked to organisation which may help to allow for an effective drive of the community-centred approach within the intervention model. It should also bring to the fore the issues we have identified as being of significance and concern to the teams when we refer to *building a community*.

To ensure participants commit enthusiastically and make progress, the leeway for working must be substantial (Molini, 2012, p. 59).

As we stated, it shall not suffice to benefit from a trained and enthusiastic team; rather, it is necessary to focus on the structure that is required to allow new means of intervention to be tested and, most importantly, to ensure this change is long-lasting and permeates through the entire organisation. This stage entails generating strategic conversations anew with the service management to make progress in identifying and delivering solutions to elements that are paramount when it comes to creating the organisational conditions:

- To progress in defining the *community strategy* of the service and in specifying the *community functions* for the teams,⁷ taking into consideration the specific contribution of social services to community work, centring on the complementary nature of the body of professionals of the organisation and of the community ecosystem.
- To analyse the internal methods of organisation that need to be reconsidered in order to gain space and time to implement the community-centred dimension.
 - Reviewing organisation of agendas and timetables; hours dedicated to direct care in order to commit to more group-based approaches that make it possible to have a bearing on problems carrying a collective dimension; benefitting from broader presence in forums and projects in the local area; or having time to consider the community-based aims we incorporate into regular tasks.
 - Identifying the professional role in community work at social services and the professional profiles within the teams.Formulae for specialising in community-centred functions –

7 The “levels-based model” may prove useful in this task (MARGES, 2020).

such as assigning “community benchmarks” or setting up a committee to promote community work within the service – may be taken into consideration.

— Identifying knowledge, abilities and *community-focussed motivations* among the professionals in the team which could help with the unfolding of functions.

- To envisage mechanisms to identify the teams’ needs in order to foster new practices.
- To take into consideration the importance of the role of the managers and coordinators in allowing functions to be implemented and ensuring change is enduring.
- To incorporate instruments making it possible to plan, compile and showcase examples of community-centred dedication from professionals (computer programmes, service agenda, reports, etc.).

Stage four: implementation

This stage is the most recent in the work conducted to date and, as a result, it has been subject to the lowest degree of systematic organisation and analysis. Many of the processes we have supported are precisely at this key stage: it is the point when it becomes necessary to engage in implementation, management of the change and, most difficultly, ensuring continuity is enduring.

We go on to share certain strategies that are being incorporated – or which could be considered – to assist the teams and the organisation in setting community targets. The aim of these strategies is twofold: firstly, to begin introducing and putting more community-centres approaches to the test, while experimenting with new working methods; and, secondly, to systematically organise and assess the changes and the lessons learned that we set about incorporating. The goal is to lend purpose to the management of learning (Fantova, 2014) by gaining in terms of knowledge and focussing this on defining the community strategy of the service.

- To introduce supervision in community work: incorporating sessions for external supervision of the team or the professionals acting as benchmarks in community work for the service. For a number of years, social intervention organisations have benefitted from supervision forums (Vázquez and Porcel, 2017); although in general this mechanism has been associated with specific team or case supervision. As community functions have been gaining traction within social welfare services, we begin to outline a new sphere for supervision that calls for specific abilities, techniques and procedures on account of the specific nature of the community approach within social services as a whole.

- To create a community of practice: promoting communities of practice within the organisation (committee, promotion group, team of community benchmarks) to gradually introduce and compare community functions, testing out new means of action and drawing on lessons learned. It is important for these forums to be underpinned by the motivations of the professionals taking part. It would also be noteworthy to occasionally open these forums up to other professionals from the organisation and the local area who also perform *community functions* in order to align the strategy of action.
- To promote monographic sessions and specialist training: visits may be organised in order to: undertake experiences, share best community practices with other teams, organise topic-based sessions to examine the community-centred dimension within the team's intervention strategies in depth, or identify new training *gaps* that will need to be filled in order to ensure the functions are fulfilled.
- Community work in regular meetings: to acquire the habit of incorporating an item in the agenda of team meetings to address subjects linked to the community strategy of the service. This forum may serve in order to share community information on the local area; to exchange information on the extent to which a community project we are promoting or taking part in is progressing; to jointly analyse the relevance of being party to a new community forum/process promoted by the local area; or to review the suitability of promoting an intervention based on the community approach that would meet the needs identified in terms of direct care.
- To benefit from forums and mechanisms to share the process: it is important to envisage how we shall go about jointly building and sharing this process to promote community work within the intervention model with other services of the organisation and in the local area. We must stress the need to track the community strategy, observing and acknowledging *others* from the standpoint of an approach of complementarity and joint responsibility with regard to the strategies and endeavours shared among all players in the community ecosystem as a whole.

Conclusions

Supporting a process to promote community work in social services entails lending support on the path of change. Upon referring to *change* we are invited to examine ourselves, to question ourselves, to incorporate new knowledge, to search for new answers that trigger substantial transformations; we are also invited to innovate. However, not just to embrace any kind of innovation, nor even a kind of innovation that is tied in with

the more instrumental innovative approach of gaining new techniques; rather, innovation from a substantive standpoint, the kind of innovation that paves the way to transforming reality in a different fashion (Brugué, Boada and Blanco, 2013).

In short, the rationale for innovation is not instrumental; rather, it is substantive. In other words, it does not entail learning to improve on what we were already doing, but rather learning to approach it differently [...]. Innovation relates to knowledge, rather than to technique: we innovate through new knowledge, not through new techniques (Brugué, Boada and Blanco, 2013, p. 10-11).

The kind of innovation linked to the promotion of community work within social services points to the need to transform intervention models, gearing them to more community-centred models of care. This shift would entail changing the way solutions to the problems are envisaged and, above all, reconsidering the very nature of the problems (Brugué, Boada and Blanco, 2013). Indeed, these are social problems that, by and large, encompass many dimensions – political, social, economic, etc. – calling for more collective answers. Forming collective answers to social challenges is at the core of community work. In this respect, community practices are deemed as practices of social innovation inasmuch as they forge processes of awareness-raising, collective action and mobilisation (Blanco, Cruz, Martínez and Parés, 2016).

The transformation to more community-centred care models challenges organisations and professionals. Above all, organisations are reminded of the responsibility incumbent on them to enable the conditions leading to the promotion of community functions and ensuring that the changes instigated are sustained. This transformation invites us, as professionals, to carry out a thorough review of the purpose of our task; it questions *how we see the other* and the role we are conferring to the individuals we assist and the local areas where we work. It also reminds us of the potential for capitalising on the citizen knowledge generated from our own vital experience (Martín, 2020) by involving people in the search for answers to problems that affect and concern them, based on more inclusive and collective approaches. Lastly, it is necessary for those of us among the body of institutions and players supporting the promotion of community work within welfare services to not overlook the importance of systematically organising and assessing these experiences of change. These are processes for reflection and building new knowledge which should be embarked on using a joint, collective approach in keeping with the values of community work and innovative practices.

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