

Power concedes nothing without a demand. It never did and it never will – Frederick Douglas

SECTION 1

ADVOCACY: DEFINED AND DEMYSTIFIED

Advocacy has been essential to the mission of the National Health Care for the Homeless Council and HCH projects since their inception in 1985. HCH projects were founded with the assumption that the homelessness crisis of the 80s would be temporary but unfortunately this has not been the case. The stubbornness of modern homelessness only redoubles the need for advocacy to make homelessness rare and brief.

Defining Advocacy

We often use the term "advocacy" as if we all had a clear understanding of what is meant by the word or what it means to "do advocacy." Particularly among those who consider themselves professional "advocates," little attention is paid to defining the term. At the same time, the word often carries with it a certain mystique. Sometimes we think that it must take something extra special to do this thing called advocacy. **In reality, advocacy is quite basic – and we have been doing it our entire lives.**

As human beings, we have been advocating since we were capable of crying for food, and we only get better at it as we age. We justified why we needed an increase in our allowance, we gave impassioned pleas for extending our bedtime, and outlined all the reasons we should be allowed to borrow the car. The instinct has become even more ingrained as adults; negotiating for the best price, providing advice to a friend, and other day-to-day advocacy has become second nature.

This comfort with advocacy has extended into our professional lives as well whether we realize it or not. Employees of HCH projects have long advocated on behalf of individual clients.

Defining Advocacy is often overlooked but can be a helpful place to start.

To advocate (verb): To speak or write in favor of; support or urge by argument; recommend publicly

Advocate (noun): A person who speaks or writes in support or defense of a person or cause

You are in fact "doing advocacy" whenever you:

- **Call a shelter** to explain why a client's mental illness should not keep her from having a place to stay
- **Ask that a hospital social worker** develop a discharge plan that is more attentive to the needs of your disabled client
- **Call the Department of Social Services** to clarify a client's Medicaid eligibility
- **Explain to a friend** the realities of poverty and homelessness

Sounds familiar, right? Well, consider these situations:

- **In navigating the Disability Determination Service** you realize that it is too complex for most individuals with cognitive deficits to understand on their own.
- **When scrambling to maintain a client's benefits** you realize renewal forms are frequently sent to addresses your clients can't access.
- **After making numerous attempts to find specialty care for your patients**, you realize no provider will see someone who is uninsured.
- **When searching for housing** you realize that there are no shelters for intact families in your community.
- **While listening to the news** you hear your local mayor discussing housing policy with no reference to low-income renters.



Unfortunately, these are also familiar situations, but consider the differences. The first set of situations focuses upon helping achieve change for specific individuals. The second set highlights the need for broader change—or what we call “policy advocacy.”



Defining Policy Advocacy

When we recognize **problems in the system** that make it harder for our clients to qualify for services, navigate processes, or improve their circumstances, we want to see solutions put into place. The act of making a problem known, suggesting alternatives, and helping policy makers select the best solution is known as “policy advocacy.” The following are principles of policy advocacy at the National HCH Council:

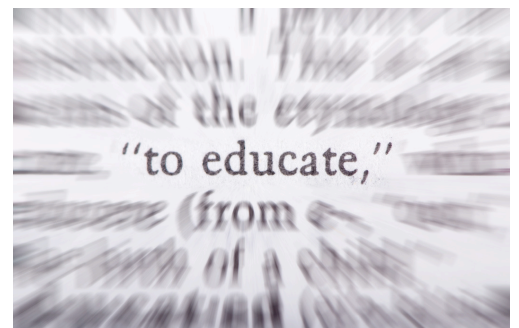
Advocacy is educational. Contrary to stereotypes, effective advocacy does not require political clout or campaign contributions. Instead, advocacy is an educational process between lawmakers and their constituents. Most policy makers are unaware of the issues faced by homeless individuals and do not have personal experience with the programs and systems designed to assist them. Hence, they may be unaware of the problem and/or the actions they can take to be part of the solution. It is our job to educate them.

Advocacy is sharing experiences. While statistics and studies are important, real life experiences are often more compelling. Providers and consumers both have experienced issues of poverty and homelessness first hand. Their stories can effectively demonstrate the need for policy change.

Advocacy is focused on public policy. While a sympathetic story can be compelling, the ultimate goal is to illustrate the need for changes in public policy. It is important to maintain focus upon systemic issues and structural solutions. Policy makers will guide you to the right people, and as you develop relationships, you’ll learn who can be most helpful in achieving the policy change you seek.

Another way of thinking about policy advocacy is the Council’s formal definition:

*“Policy advocacy is the **educational** process through which **experience, data, and insight** are shared with those who craft **public policy** so that they may make informed decisions.”*



*Contemporary homelessness is the product of conscious **social and economic policy decisions** that have retreated from a commitment to ensuring basic life necessities for all people.*

from the National Health Care for the Homeless Council Statement of Principles

Advocacy is about building relationships. We practice individual advocacy by relying upon our relationships. For example, referring a patient to a specialist with whom you have worked in the past is easier than referring to someone you don't know. Policy advocacy is no different. A policy maker who is unfamiliar with you or your organization likely will be less responsive than one who knows and trusts you. Reach out and build relationships with relevant officials just as you would with providers in your clinical work. Invest the time needed to establish these relationships.

Advocacy should focus upon universal solutions, but expect incremental progress. The goal of policy advocacy within the context of HCH is to make homelessness rare and brief. Stay focused on macro-level solutions such as universal access to quality health care, affordable housing, and livable incomes, but understand that public policy change is usually achieved through a series of smaller and more incremental steps.

Have a bias toward action—let's see something happen now. You can break that big plan into small steps and take the first step right away

—Indira Gandhi

UPSTREAM THINKING

As writer and ecologist Sandra Steingraber explains through the following parable, it is important to think upstream and consider the conditions creating the crisis . . .

The residents of a remote village along a winding river began noticing increasing numbers of drowning people caught in the river's swift current and so went to work inventing progressively more elaborate technologies to rescue them. So preoccupied were these heroic villagers with rescue and treatment that they never thought to look upstream to see who was pushing the victims into the river.



Next Steps

With a clearer understanding of policy and advocacy, you are ready to explore concrete ways to effectively integrate advocacy into your daily work. It is not as hard as you think.