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Sustaining and Enhancing the Human-Services Infrastructure

FROM HUMAN SERVICES TO HUMAN DEVELOPMENT: A RESILIENCE PERSPECTIVE

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This volume of reports on the human-services infrastructure in Greater Phoenix reveals many flaws and many potential and actual problems. It also suggests ways to shore up and repair this infrastructure. But how can this work best proceed? Greater Phoenix faces sheer resource limits as well as competition from other community interests; it must also contend with the significant management and logistical pressures associated with “playing catch up” to need and demand curves associated with projected population increases. Further, this takes place in a governance culture that has often been defined as politically conservative—meaning one that provides “basic” city services while emphasizing fiscal constraint, limited government, and government facilitation of growth and private economic development, but minimizing involvement in social services. These are real challenges for those doing human-services work in this fast-growth setting. They should not, however, be seen as intractable. Rather, they need to be balanced against existing assets and resources that can be mobilized to build on this essential infrastructure.

This is the work of community building—of knowing how to translate narrow kinds of success that are ubiquitous in day-to-day human-services work into much broader versions of human capacity and achievement. A resilience perspective helps shape an approach to community building that is balanced, positive, flexible, and sustainable. Resilience is the capacity to recover from and adapt to life’s inevitable difficulties. Since stresses, crises, and strains of life are unavoidable, resilience capacities that allow people and communities to bounce back from adversity are threshold commodities. Although there is much to learn about resilience, we know that, while virtually everyone can be resilient, there is significant variation in resilience capacity among individuals and communities. We also know that resilience is a kind of individual and community buoyancy that requires deep, continuing appreciation and nurturing of social connections, trust, learning and adaptation, and assets.

Human Services in Greater Phoenix: A Resilience View

When the Greater Phoenix human-services sector is viewed through a resilience prism, the picture changes. To start with, we find evidence of strong collaboration capacity with historical roots. Arizona’s state-agency reform of 1974 centralized provision of many direct poverty-related programs, including welfare. That model remains in place today, with the Arizona Department of Economic Security (DES) planning and administering direct poverty-related services, including welfare reform. Parallel to that formal system is a wide network of nonprofit and faith-based organizations, supplemented by literally thousands of “self-help” efforts spread throughout the region. All of these organizations offer support and
Collaboration and Innovation

Still, despite these significant experiences with collaboration and public-private partnerships, more is needed at the operational level. In interviews with Greater Phoenix human-services leaders, the topic of collaboration among service providers was frequently mentioned as a most critical need. Indeed, some believe that improved and sustained collaboration is central to any meaningful reform of the human-services sector. Similarly, a culture of innovation is a priceless resource for the Phoenix area that, if nourished, can help to remake human services. Again, the region and state possess significant history and experience in this regard. In fact, Arizona is an acknowledged innovator among the states in two of the largest areas of human services, welfare reform and indigent healthcare.

Arizona took an early and significant first step toward reshaping its welfare program with the 1995 enactment of the Employing and Moving People Off Welfare and Encouraging Responsibility (EMPOWER) program. At the time, EMPOWER was one of the most extensive welfare-reform programs in the nation and one of the first to include in one program such major reforms as mandatory cash sanctions for non-compliance, adult time limits, transitional medical and child care, a family benefit cap, and unwed minor parent provisions. Arizona’s effort served as a general model for national welfare reform, which was enacted in 1996. The state has received several awards, including high-performance bonuses, for this innovation. Yet it is important to note that from the beginning of the planning for EMPOWER—and its more recent welfare-program offspring—the keys to reform have been nonprofit providers of “supportive services” (childcare, transportation, healthcare, substance-abuse treatment, etc.) and improved community involvement and collaboration.

An even better-known Arizona example of human-services innovation is its indigent healthcare program, AHCCCS. In 1981, Arizona was the only state not participating in the national Medicaid program. State leaders saw significant problems with conventional Medicaid, but also had grown weary of paying the full tab of spiraling health costs without a fair share of federal funds to use in indigent healthcare. The result, AHCCCS, was a byproduct of the strongly held belief by the state’s political leadership that containing costs while providing quality in indigent healthcare would require a public-private partnership to administer a pre-paid, capitated system. AHCCCS “mainstreamed” Medicaid recipients into private medical practices instead of providing services through public agencies. Low-income residents got healthcare choices as well as services without being stigmatized, and Arizona got lower costs compared to other states.

It is important to note that both EMPOWER and AHCCCS were Arizona inventions that were different enough to be implemented as “waiver” programs—that is, they did not conform to standard federal program guidelines but qualified for federal welfare reform and Medicaid funds anyway. Both programs have served as major resource streams for the human-service populations of Greater Phoenix, and both have made significant impacts on the development of the area’s human-services sector. There are many other examples of powerful and innovative ideas arising from Arizona public-policy experiences. The Morrison Institute at Arizona State University (ASU) recently published a catalogue of such innovations entitled Arizona Ideas. This history of public-policy innovation is part of the reason for the recent development of a new international Alliance for Innovation in Local Government, headquartered at the ASU School of Public Affairs at the Downtown Phoenix campus. The Washington, D.C.-based International City/County Management Association (ICMA) and the Innovation Groups (IG) in Tampa, Fla. have joined with ASU-SPA to form a unique consortium on innovation.

Collaboration and innovation are potentially powerful assets for building human-services capacity. There is evidence of both ample supply of these assets in Greater Phoenix and of aspirations for their further development. Can they be applied with greater focus to the human-services issues that Phoenix will face in the future? Recent experiences within the sector showcase exciting experiments, innovations, and collaborations that can be viewed as precursors to larger future changes in the human-services sector.
Resilience Solutions and Community Building

There are significant challenges associated with repairing the traditional human-services infrastructure while promoting human resilience. For one thing, previously described debates about defining and targeting “need” have a daily impact on actual interventions. In addition, the daily operation of many individual agencies and programs alongside well-meaning but sometimes detached community-building efforts often means that human-service interventions and long-term community-building efforts do not connect as firmly as they should.

A broad systemic view of intervention is necessary to make significant future change, but it is often elusive. For a host of reasons, interventions often “morselize” at the individual organizational and community levels. That is, they focus on narrow dimensions of “the problem” and immediately available outcome measures—such as welfare-to-work job placements rates, quarterly profits, or election results—rather than on building system-wide capacity for the long term. This is particularly evident in the proliferation of community activities that involve marginal tinkering with small programs and minor investments in neighborhoods: these do not build communities. In fact, many limited and targeted grant efforts do just the opposite—reinforce separation and segregation, and in some cases destroy communities.

In his classic book about public policy’s search for safety, Aaron Wildavsky explores the public-policy implications of the fact that risk (danger) and safety are inextricably intertwined and should be viewed in a systems context. Wildavsky points to the danger of thinking in terms of “all good” and “all bad,” and counsels a search for safety and development of the whole which involve reduction but not elimination of overall risk. In advocating resilience over resistance as a central organizing theme for city planning and management, Sophie Churchill admonishes:

“A city facing a time of turbulence, and in the face of the global communication power flows...should give attention to identifying, conserving and investing in the human, social, intellectual and physical capital which constitutes its protective factors, rather than expending a large part of the energy of its leadership in short-term efforts to spend particular funding regimes.”

In short, there are good reasons to re-think and broaden the type and structure of future interventions that need to be made in social and human services. In the ASU Resilience Solutions Group (RSG), the central topic of inquiry and experimentation is just this type of broader, connective intervention called “resilience solutions.” Characteristically, resilience solutions have multiple targets, generate a more general well-being, and create new and/or increased capacity through new connections and alliances. Resilience solutions are long-term and sustainable. They differ from many more standard and targeted interventions just as conflict resolution differs from conflict management. These are solutions expected to take time, but also to have multiple impacts and increase in value over time.

Innovative resilience solutions that change the structure of social exchange are emerging within our communities. One example is the “Experience Corps,” which engages retired senior citizens to advance the chances of young children in inner-city schools. The seniors volunteer, are trained, and then assigned to work with needy youth at school. The seniors get a way to help better the lives of children in their community. The children get a surrogate grandparent to watch over them during part of the school day. Success is measured by markers of well-being among the seniors and by retention rates of the children in high school. Another example is Building Bridges Across the Divides, which brings together African Americans and Caucasians to further cross-cultural dialogue and understanding. This program promotes social capital, thereby raising the threshold for conflict in the inner city.

Other examples include the Healthy Communities Initiatives by the World Health Organization, the National Civic League’s All-American Cities awards, and the League’s community-building facilitation based on development of the Civic Index. The Resilience Alliance is an international network of institutions and agencies that focuses on social-ecological systems, promoting adaptability and sustainability surrounding developmental policy and practice. The Community Resilience Project based in British Columbia has developed manuals and guides to enhance the capacity of individuals and communities to respond to change. These and many other programs represent a new era of public policy and programming that attend to both the assets and deficits within communities.

We must strive to continue to unify theory and to integrate...
social activism with models of community health and well-being built upon a solid empirical foundation.

In Greater Phoenix, St. Luke’s Health Initiatives has launched a five-year, multi-million-dollar program that blends the RSG resilience model with strength-based community development as a key to resilience. Called “Health in a New Key (HNK),” it awards funds to community organizations that develop new partnerships to implement resilience-based interventions that focus on assets, not deficits. The effort is defined as “a way of identifying, framing and responding to issues that focuses first on existing strengths and assets...and avoids the pervasive culture and model of deficits and needs.” This initiative marks an important step in providing funds to move beyond threat and response paradigms to funding resilience and assets-based research and interventions that can be sustained within communities. As a part of this work, SLHI has created a virtual network of leaders of local organizations dealing with a broad range of human-services issues who meet and frequently interact over the broader issues that bind them. Most of these organizations had operated in silos defined by need and program and did not know of each other’s efforts or even existence prior to the HNK intervention.

Also in keeping with resilience perspectives, the Maricopa Association of Governments (MAG) recently convened a Regional Human Services Summit of approximately 200 elected officials, government staff, nonprofit, faith-based, academic, and private-sector representatives, all interested in responding to the event’s organizing question: “What can we do now with what we have?” Designed to develop priorities for human services from broad and genuine community dialogue, this summit and the related follow-up have produced a refined list of issues and projects designed to greatly increase collaboration by purposely “pairing” issues that are often treated separately. Examples include:

- An affordable-housing and transportation civic education campaign
- A developmental disabilities and aging integration project
- A housing and aging summit
- A project involving domestic violence and the civil legal system
- A project on homelessness and mental illness

In tandem with this effort to ramp up community dialogue and deploy human-services resources in new ways, MAG is preparing to map the resources used to address human services throughout the region, so as to better assess their distribution and capacity. Other examples of a new interest in human services and of new forms of resilience-friendly collaborations represent further steps in the remodeling of the Greater Phoenix human-services sector. Examples from the Valley of the Sun United Way demonstrate the type of broader community leadership that is required:

- **Firestar** - Fire departments, mayors, city agencies, the United Way, and neighborhood alliances working together toward improving neighborhoods
- **Arizona Self Help** - A free online directory to determine if families can get help from 18 different health and human-services programs
- **The AZ211 System** - An online source of information about child care, jobs, health care, insurance, and other needs, as well as about local emergency bulletins and alerts in times of disaster
- **Valley of the Sun United Way Councils of Human-Services Providers** - Very active around certain broad community issues

Those interviewed for this study also mentioned other significant examples of new approaches to working with human-services issues, such as the first-time Phoenix bond election for nonprofits, Native American Connections and the Native American Health collaborative, the downtown Phoenix Human Services campus, and the recent trend of investment in science education and related nonprofits.

**The Future: People First Means Full Human Development**

The human-services infrastructure of Greater Phoenix is vast and complicated. It has supporters and detractors, both of whom sometimes seek to portray it in simple terms by deploying political rhetoric about big government or about the human condition. But this noise serves only to obscure the very real change and potential for change that should be the focus of the region, its leaders, and other residents in democratic dialogue.

...IT IS BETTER FOR BOTH INDIVIDUALS AND THE COMMUNITY TO BUILD HEALTHY COMMUNITIES FROM THE GROUND UP BASED ON STRENGTHS AND ASSETS, RATHER THAN TRYING TO TREAT A NEVER-ENDING INVENTORY OF DEFICITS AND NEEDS.
We contend that this dialogue can be greatly improved by a framework that is relatively neutral and designed to focus on human development to its fullest capacity. A resilience perspective is useful in shifting the focus from deficits to assets, from needs to strengths, from problems to opportunities, from individual to community. This perspective can help develop indicators to measure progress toward desired outcomes, and to craft strategies to impact multiple targets in the short term while extending strength to a larger community in the long term. Simply stated, by focusing on human and community health and well-being, the resilience approach greatly helps to solve the theoretical dilemma about selecting targets of need versus broader definitions of human services.

A central future objective for Greater Phoenix in the face of hyper-growth should be to reduce reliance on the old human-services model and infrastructure while increasing broader resilience solutions. This is not advocated for political reasons, but because it is better for both individuals and the community to build healthy communities from the ground up based on strengths and assets, rather than trying to treat a never-ending inventory of deficits and needs. The true challenge will be to keep people first in the chain of change that will define Greater Phoenix. A recent essay about innovative and comprehensive transit solutions to virtual gridlock in Copenhagen and Paris puts it this way:

_The trick, for city and transit planners...is to put people first, spaces second and buildings last._

If Greater Phoenix is to build on its strengths, to grow, to be inclusive, to offer opportunities for prosperity for all, and to be sustainable, it will require sustained efforts to replace traditional human services with genuine human development. This will be challenging work, but not as costly, controversial, or ultimately ineffective as trying to expand the region’s other infrastructure domains while neglecting human development. Imagine the enormous rewards if, at some future point, Greater Phoenix is thought of as the place that put people first as it built community.

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NOTES

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REFERENCES


This report evaluates whether a program for older volunteers, designed for both generativity and health promotion, leads to short-term improvements in multiple behavioral risk factors and positive effects on intermediary risk factors for disability and other morbidities. The Experience Corps places older volunteers in public elementary schools in roles designed to meet schools’ needs and increase the social, physical, and cognitive activity of the volunteers. This article reports on a pilot randomized trial in Baltimore, Maryland. The 128 volunteers were 60-86 years old; 95% were African American. At follow-up of 4-8 months, physical activity, strength, people one could turn to for help, and cognitive activity increased significantly, and walking speed decreased significantly less, in participants compared to controls. In this pilot trial, physical, cognitive, and social activity increased, suggesting the potential for the Experience Corps to improve health for an aging population and simultaneously improve educational outcomes for children.


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