CHAPTER 2
KNOWING THE ENVIRONMENT

CHAPTER OUTLINE

Stakeholder Expectations
Analysis of Environmental Trends
  Political Trends
  Economic Trends
  Social Trends
  Technological Trends
From the World to the Neighborhood: “Thinking Globally and Acting Locally”
Needs Assessment
  Problem Identification
  Community and Institutional Characteristics
  Analysis of Consumer Perceptions
  Current Programs and Services
  Needs Assessment Instruments and Methods
  Needs Assessment as an Ongoing Process
Discovering Community Assets and Strengths
Community Collaborations
Boundary Management: Coalitions, Professional Associations, and Networks
Public Relations
Agency and Environment: The Directorial Role
Summary
Human service programs exist within environments that affect not only their day-to-day operations but also their ability to meet the long-term needs of consumers and communities. Successful efforts—from the smallest, most narrowly focused program to the largest multiservice agency—depend on the degree to which boards, managers, staff, and other stakeholders understand their environments.

In this chapter, we will discuss the environmental contexts of human service organizations. In recognition of the importance of thinking globally and acting locally, we review current trends in the larger public arena and then address the impact of these trends on human service management. As we noted in the previous chapter, organizations are purposeful entities that respond to needs and trends in the environment. The ability to scan and understand an agency’s current and future environments appropriately will enable boards, staff, and other stakeholders to anticipate and deal proactively with changing conditions. Ideally, the board and staff of the agency will work not only to respond to the environment but also to influence it in return. In order to make the environment more responsive and hospitable to clients, human service managers have come to recognize the importance of advocating on behalf of their consumers.

Agencies must accurately and comprehensively assess their changing environments on an ongoing basis if they are to be successful in appropriately responding to community needs and visions. Historically, the most common technique for this has been the needs assessment. This valuable tool has been augmented in recent years by strength-based approaches, including asset mapping.

This chapter reviews a number of processes that enable the organization to respond effectively to its environment and not only survive but thrive. A general term for this type of activity is boundary spanning or boundary management. One example of boundary management is environmental scanning, a process of identifying trends and issues. Environmental scanning is a key step in strategic planning, presented in the next chapter.

Agencies also manage environmental relations through their involvement in community collaborations, interdisciplinary teams, service linkage agreements, and coalitions. The functions of public relations and marketing can also be very important in helping the agency deliver services in the most responsive ways.

In any successful organization, managers and staff play roles in environmental scanning and ongoing community relations. We must also recognize, however, the key role that is played by the boards that oversee the agency’s work in achieving its mission. The members of a board of directors are often the people who provide the strongest connection between an agency and its environment. For that reason, this chapter concludes with an overview of the board’s important role.

**STAKEHOLDER EXPECTATIONS**

The key actors in the human service organization’s environment—those who have the most influence on the organization—are now commonly referred to as stakeholders. Among the individuals and groups who hold a stake in what the organization does and how it operates are its funding sources, its regulatory bodies, the legal system, other human service organizations, and the organization’s clients and constituency groups. Since “environment” does not necessarily refer only to an agency’s immediate
geographic area, a funding source could be a federal bureau in Washington, DC, the governor’s office at the state capital, a private foundation located in another state, or the local United Way. Or, for agencies having diversified funding sources, it could be a combination of all of these funding agencies, each with its own set of funding conditions, reporting procedures, and accountability standards. Thus, in terms of funding sources alone, an agency’s environment can acquire complex proportions. Managed care, privatization of government services, and the recent focus on documenting outcomes of service are all reflections of the political context of human service organizations that are requiring major adjustments.

Regulatory bodies such as accrediting councils can also exert considerable external influence on an organization’s structure, including its policies and procedures, hiring practices, technology, and so on. Although membership in these standard-setting associations is voluntary, failure to affiliate with one can depreciate an organization’s status and power, whereas membership in good standing can increase an organization’s prestige and image. Also, the effect of the legal system on organizational practices is a common contemporary phenomenon. Lawsuits and countersuits often result in changes in agency policies.

In addition to these external sources of influence, the human service organization is subject as well to environmental influences from other organizations, especially those competing for political or financial resources; from client groups in need of additional services or dissatisfied with current ones; and from interest groups seeking to impose their own agendas on organizational goals and services.

Finally, expectations for improved customer service are challenging agencies to make improvements in service delivery philosophies and methods. Patients’ rights initiatives in mental health and disability services exemplify trends that should improve service delivery.

Managers need both depth perception and peripheral vision when looking at the environment. They need to know what is relevant from the past and need to look ahead into the future. In the present, they need to look “sideways” beyond the daily arena of service delivery programs. For example, the business section of the newspaper may show important trends in finance that an astute manager could turn into an opportunity. The “society” section typically covers local fundraising events that may give a manager ideas on new places to look for support. Generally, the higher one goes in management, the broader and longer-term the vision needs to be. Even at the service delivery level, however, staff members should be looking at the environment to identify emerging needs and new programs, and to find similar organizations using “best practices” that may be adapted in one’s own program.

ANALYSIS OF ENVIRONMENTAL TRENDS

Effective organizations go beyond superficial study of current trends to look for the deeper meaning and future implications of those trends. Only when important trends have been recognized can effective, long-term planning take place. In his book on strategic planning, Bryson (1995) uses the acronym PEST to organize trends in the environment: political, economic, social, and technological factors.
POLITICAL TRENDS

Political trends at national and even international levels have major effects on human service programs, affecting their local environments and challenging their abilities to respond to change. Every era brings new challenges that can sometimes take a human service provider by surprise.

THE CLOSE OF THE TWENTIETH CENTURY The “devolution revolution” (Cooke, Reid, & Edwards, 1997) resulted in heretofore federal responsibilities being shifted to state and local government, also leading to great increases in contracting and other forms of privatization, with increased expectations for innovation and cost savings. Welfare reform and block grants, for example, led to increased interaction across the sectors (government, business, not-for-profit) and new forms of interagency collaboration.

Accountability became an important word in the human services in the 1970s, when the Nixon administration and other conservatives questioned the War on Poverty and other social programs. Subsequently, the “reinventing government” movement (Osborne & Gaebler, 1992), welfare reform, and managed care put renewed emphasis on performance measurement (Martin & Kettner, 1997). This increase in emphasis on outcomes led to concepts like performance- or outcomes-based accountability (Cooke et al., 1997), with human service programs now expected to measure and document outcomes, not just units of services provided. Borrowing parlance from business, agencies needed to show how their services added value, for funding sources, clients, or the public at large.

Another political trend focused on individualism and personal responsibility (Bryson, 1995, p. 89). The welfare reform act of 1996 was a good example; rugged individualism replaced the government entitlement philosophy that had been in effect since the New Deal. Conservatives now expected the philanthropic sector and the faith communities to move in to help the poor and disadvantaged as government support decreased or ended.

THE EARLY TWENTY-FIRST CENTURY This conservative approach to social well-being gained even more traction as the twenty-first century began. At the federal level, public policy focused on tax cuts for people in the highest income brackets and used the need to cut costs as a reason for eating away at the safety net that had always been important for people in poverty. These policies greatly increased the gap between the “haves” and “have-nots” in the American social fabric. Addressing the need to change this perspective, Obama (2006) pointed out the following:

But over the long term, doing nothing probably means an America very different from the one most of us grew up in. It will mean a nation even more stratified economically and socially than it currently is: one in which an increasingly prosperous knowledge class, living in exclusive enclaves, will be able to purchase whatever they went on the marketplace—private schools, private health care, private security, and private jets—while a growing number of their fellow citizens are consigned to low-paying service jobs, vulnerable to dislocation, pressed to work longer hours, dependent on an underfunded, overburdened, and underperforming public sector for their health care, their retirement, and their children’s education. (p. 148)
After 2008, the polarization of political thought came to the forefront of public discourse, with questions about the role of government in protecting citizens’ health and welfare at the center of debate. “It’s what keeps us locked in ‘either/or’ thinking: the notion that we can have only big government or no government; the assumption that we must either tolerate forty-six million without health insurance or embrace ‘socialized medicine’” (Obama, 2006, p. 40). This either/or thinking moved from political talk to action when fierce opposition came close to derailing the 2010 Affordable Care Act.

IMPA CT ON HUMAN SERVICE MANAGEMENT The political environment has obvious effects on human service programs because (a) their own existence depends on their ability to respond to the winds of political change and (b) the well-being of consumers and clients is always at stake. The political stresses of recent decades highlight the need for human service managers and stakeholders to move from a stance of reaction to a stance of action. The connection between an organization and its environment is a two-way street, which raises the possibility that the environment itself is susceptible to change. In times of political change, advocacy becomes an important human service function (Lewis, Arnold, House, & Toporek, 2002; Mosley, 2010; Ratts, Toporek, & Lewis, 2010). Mosley (2010) suggests that “it is clearly in the best interest of human service organizations to promote policies that facilitate new funding and service opportunities rather than constraining them” (p. 506). People who work in human service settings are usually experienced in advocating on behalf of their organizations. Recent trends have shown, however, that it is just as important to advocate on behalf of the clients, consumers, and communities that are served by the program.

Advocacy can also be an important tool for human service organizations that are concerned with systematic inequalities in areas such as education, health care, and housing, which serve to limit the opportunities of individual clients. Advocacy work allows organizations to address some of those structural concerns and thus may help organizations more completely meet their missions. When serving clients who face economic difficulties, lack political influence, or experience stigma of different kinds, advocacy by human service organizations has the potential to promote social and economic justice. (Mosley, 2010, p. 506)

Advocacy that is carried out by human service professionals can play a key role in improving environments at three levels: the individual, the system, and the larger public arena (Lewis, Arnold, House, & Toporek, 2002; Ratts, Toporek, & Lewis, 2010).

ECONOMIC TRENDS The economy, domestically and globally, has its ups and downs, but of one trend we can be sure: we should continue to expect limited public sector resources and growth, which suggests the need for continued productivity improvement and creative service delivery arrangements. Economic development and entrepreneurialism are becoming more prominent than traditional “services” strategies to empower residents of the inner city and others at lower income levels. In spite of these efforts, inequality is increasing, further bifurcating U.S. society.
THE LATE TWENTIETH CENTURY  A number of trends that characterized the closing years of the twentieth century have maintained their influences over time. For instance, the increased “marketization” of human services—”the reliance in public policy on natural trade exchange practices (for example, competition, privatization, commercialization, decentralization, and entrepreneurialism)” (Cooke et al., 1997, p. 230)—exacerbated the trend toward increasing inequality. Managed care is another economic force affecting human services, in terms of both quality of service and access to care.

Another economic trend, the increasing globalization of the economy, benefits many of the wealthy but will continue to cause stress and dislocations for residents and workers in the United States. Well-paying blue-collar jobs in the United States are being eliminated in favor of paying lower wages to workers, sometimes including children, in undeveloped countries. Difficult economic conditions in many developing countries add to increased immigration to the United States. With many immigrants able to acquire only unskilled work, often without health benefits, health and social service systems experience strain.

THE EARLY TWENTY-FIRST CENTURY  The great recession that began in 2007 placed extreme stress on all human service systems. Of course, human service programs that have missions related specifically to poverty, homelessness, unemployment, and related concerns are accustomed to dealing with the effects of economic downturns. But high unemployment figures and economic stress also bring an influx of new clients to programs that are focused on mental or physical health. It has become increasingly clear that poverty and economic crises are determinants of mental health problems (Hudson, 2005; Knapp, Funk, Curran, Prince, Grigg, & McDaid, 2006; Meyer & Lobao, 2003; Murali & Oyebode, 2004). Murali and Oyebode, for instance, point out that people affected by poverty are “doubly victimized” because they are exposed to more stressors than others but have fewer resources to manage them. People in poverty are also vulnerable to physical health problems. Equating lack of access to equitable health care in terms of social injustice, Levy and Sidel (2006) state that “social injustice leads to increased rates of disease, injury, disability, and premature death because of increased risk factors and decreased medical care and preventive services.” Levy and Sidel list a number of health-related effects of poverty, including, for instance, poorer nutrition, greater exposure to unsafe water, increased exposure to infectious disease agents and occupational and environmental hazards, and increased complications of chronic diseases. They also emphasize the inequities in access to health care, including lack of access to diagnostic, therapeutic, and rehabilitative services as well as lack of preventive services.

These data point up the most difficult reality in times of economic distress: greater numbers of people with dire needs facing less robust health and human service programs. “With the shrinking of safety net programs, human service organizations experience increasing demand while coping with declining resources” (Hasenfeld, 2010, p. 2).

SOCIAL TRENDS

Social and organizational complexity is likely to increase, and chaos theory, adapted from the sciences, is being used to make sense of this (Warren, Franklin, & Streeter,
1997). With increases in immigrants from virtually any part of the world, diversity of the workforce, clients, families, and the citizenry will increase. Baby boomers are aging, leading to a search for new ways for the elderly to contribute to society. Young people entering the workforce, in human services and elsewhere, bring with them new values and priorities. They, and in fact all workers, are likely to experience more career changes than in past generations, leading to more job retraining and a greater use of consultants and part-time and contract employees. This situation has implications for agency salary and benefit structures, working environments, and other considerations for the quality of working life.

**Cultural Diversity** The most important social factors affecting the human services involve the rapidly changing demographics in the United States.

Between 2000 and 2050, the vast majority of America’s net population growth will come from racial minorities, particularly Asians and Hispanics, as well as a growing mixed-race population. By the middle of the 21st century, America will have no clear “majority” race. (Kotkin, 2010, p. 1)

This change within the United States is due in part to high birth rates, specifically among Latinos born in the United States (Kotkin, 2010). Immigration is also playing an important role in bringing about increased diversity (Chung, Bemak, Ortiz, & Sandoval-Perez, 2008). Together, these trends will bring this country to the point of becoming “a unique multiracial superpower with deep familial and cultural ties to the rest of the world” (Kotkin, 2010, p. 1).

**Effects on Human Service Management** The vibrant, multicultural nature of the population holds great promise for the future, not least for the economic environment (Hinojosa-Ojeda, 2010). As these changes unfold, however, everyone involved in the human services must be diligent to make sure that programs adapt. It is, of course, universally accepted that human service providers must be culturally competent. The increased diversity of the population served requires even more: that all human services programs be designed so that the kinds of services offered fit the cultural values and needs of consumers.

Cultural groups that are marginalized and subject to oppression can present challenges that require not just cultural sensitivity but also focused programming. Consider, for example, the clear needs of immigrant and refugee populations. “Given the politically charged atmosphere that currently exists in the United States regarding immigrants, it is crucial that mental health professionals be aware of the impact that the current sociopolitical environment, immigration policies, pre-migration experiences, post-migration challenges, and various forms of racism and discrimination have on the mental health of immigrant and refugee clients” (Chung et al., 2008, p. 314). The Arab American Community Center for Economic and Social Services (ACCESS) is illustrative of a human service agency that meets the direct-service needs of clients but also attends to community empowerment and advocacy. The ACCESS Mental Health Division provides services to adults, children, and families, but it also includes the Psychosocial Rehabilitation Center for Survivors of Torture, the Partnership for Screening and Advocating for Refugees and Asylum Seekers, the Annual Symposium on Refugees and Survivors of Torture,
the Anti-Stigma Initiative Program Countering the September 11th Aftermath, and the Ethnic Minority Empowerment Program (ACCESS Mental Health Division, 2007).

Human service programs that work with marginalized and traumatized populations are not only organized around nontraditional services but must also offer traditional helping services in nontraditional ways. An example of an organization that tries to meet this challenge can be found in the Gaza Community Mental Health Programme.

The Gaza Strip—one of the most densely populated areas in the world, with two thirds of the population being refugees and 50% being younger than sixteen years—has witnessed extreme forms of violence and suffering...This has made the extent of mental health problems in the Gaza reach unprecedented levels. (Gaza Community Health Programme, 2010a, p. 1)

With poverty, overcrowding, physical health problems, and trauma making human services important, this organization is forced to do its work with extremely meager resources. Although clinical services are provided, outreach methods are important, not only because more people can be reached but also because of the stigma and distrust associated with clinic visits (Celinska, 2009). GCMHP programs, which are especially focused on children and women, include the following (Gaza Community Mental Health Programme, 2010b):

- Informal home visits are used to meet with extended families and take note of trauma symptoms among a large number of children.
- Outreach methods are used to reach children in schools and, at the same time, train teachers and parents to detect problems and provide help.
- A Women’s Empowerment Project provides services in centers located in cities and refugee camps, with residents of refugee camps serving as Community Development Leaders.

The examples of the ACCESS organization and the Gaza Community Mental Health Programme demonstrate that cultural competence must underlie not just service providers but also program planning and management. This fact remains true for programs that are designed for a more general, culturally diverse population.

Consider, for instance, the importance of addressing issues of culture and diversity in the face of community crises. The following principles for cultural competence have been developed by the Substance Abuse and Mental Health Services Administration (2003) and disseminated by the Federal Emergency Management Agency (FEMA) to guide disaster relief efforts: Maintain a current profile of the cultural composition of the community. (Factors include race and ethnicity, age, gender, religion, refugee and immigrant status, housing status, income and poverty levels, percentage of residents living in rural versus urban areas, unemployment rate, languages and dialects spoken, literacy level, number of schools, and number and types of businesses.)

1. Recruit disaster workers who are representative of the community or service area.
2. Provide ongoing cultural competence training to disaster mental health staff.
3. Ensure that services are accessible, appropriate, and equitable.
4. Recognize the role of help-seeking behaviors, customs and traditions, and natural support networks.
5. Involve as “cultural brokers” community leaders and organizations representing diverse cultural groups.
6. Ensure that services and information are culturally and linguistically competent.
7. Assess and evaluate the program’s level of cultural competence.

The responsibility to implement these principles lies in the hands of all human service managers and stakeholders.

TECHNOLOGICAL TRENDS

In the human services, technology is almost always assumed to mean “computers.” A broader definition is used here: the work rules, tools, equipment, and information used to transform inputs into outputs (goods or services) (Taylor & Felten, 1993, p. 54). The service delivery methods and processes we use to help change people (for example, casework, psychotherapy, and community organizing) are our technologies. This topic will be discussed later in the context of program design, but it is mentioned here because human service organizations are increasingly pressured to change or adopt technologies. For example, managed care policies typically require providers to use short-term models rather than open-ended, long-term treatments, and welfare-to-work programs are precipitating the development of new ways to bring the poor into the workforce.

2.1 ENVIRONMENTAL TRENDS AND THE GRANDVIEW COMMUNITY CENTER (GCC)

In Chapter 1, you were introduced to the Grandview Community Center (GCC). The political, economic, social, and technological trends we have described have very direct and critical effects on Grandview’s services.

- The consumers of GCC’s services belong to a population that can be described primarily as have-nots within a more stratified environment. The human service workers who serve them will find it important to advocate on their behalf.
- The GCC consumers are vulnerable to economic downturns. In difficult times, demand for services will increase while the organization will have fewer resources. Grandview’s stakeholders will find it important to seek new ways to do more with less, possibly by entering more community-wide collaborative networks.
- The cultural makeup of the community has changed, making it likely that existing programs and services will need to adapt. Grandview’s new clients will have different attitudes and needs in comparison with the less diverse consumer population of the past.
- Grandview Community Center was founded in the 1930s. Since then, the available technology has changed drastically. This pace of change is accelerating, which means managers and service providers might need to grapple with a steep learning curve.

Technological change in agency operations will continue, using techniques such as business process reengineering and total quality management. Further reductions in the ranks of mid-management will affect career development
prospects for lower-level workers, while at the same time empowering them in their current jobs. Systems redesign, including services integration and the various forms of interagency collaboration, are also affecting the ways agencies deliver services (O’Looney, 1996).

Finally, of course, information technology and computer use will continue to advance. Human service workers were in the past slow to embrace this trend, in spite of the opportunities to reduce mundane work and have quicker access to more work-related knowledge. Now, a high level of technological sophistication is expected among human service workers at all levels.

FROM THE WORLD TO THE NEIGHBORHOOD: “THINKING GLOBALLY AND ACTING LOCALLY”

The trends we have just reviewed have taken us from the evolving world economy, the World Wide Web, and national political trends to the effects of larger trends at the level of community functioning and agency operations. The wise human service worker or administrator will, in order to function effectively and purposefully, think globally and act locally.

Based on lessons from both business and the not-for-profit sector, organizations that do a better job of assessing and responding to the environment will, other factors being equal, be more likely to thrive. Techniques for doing this include environmental scanning (a component of strategic planning discussed in the next chapter), data collection techniques such as needs assessments and asset mapping, interagency and community collaborations, and managers assuming “boundary-spanning” roles as part of their jobs. Other management processes that help an agency manage its environment include marketing, public relations, coalitions, professional associations, and networks.

NEEDS ASSESSMENT

Human service agencies can be effective only if they allocate resources and respond to expectations based on clear and comprehensive goals. These goals must be responsive to the realities of the given community. Because the services being delivered must be the services that community members require and want, a needs assessment is a common method to inform program selection and design. In this context, a need is defined as “the gap between what is viewed as a necessary level or condition by those responsible for this determination and what actually exists” (Siegel, Attkisson, & Carson, 1995, p. 11). Through a needs assessment, problems in the community can be identified and ways to address them can be sought. The needs assessment might be a broadly based attempt to measure and evaluate the general problems and needs of a total community, as in the instance of a community mental health center or a health agency beginning operation. It might involve a specific measurement of the needs of a narrowly defined target population, as in the case of an existing agency or institution deciding on the efficacy of an innovative service. In either situation, the needs assessment should be comprehensive
in the sense that an attempt is made to identify problems, to measure relevant community characteristics, to analyze consumer perceptions of problems and goals, and to determine whether needs are being met by current programs and services.

**Problem Identification**

Needs assessment involves a recognition that services are being planned in order to bring about some change in the current situation. The process begins with the question of what measurable area of difference exists between the current state of affairs and what is desired. Using a variety of tools and mechanisms, the group conducting a needs assessment tries to determine the extent to which a specific disability, dissatisfaction, or unmet goal exists within the community. Attempts are made to establish the size of the potential target population, the nature and severity of the problems being addressed, and the likelihood that specific kinds of services would be used. In the hope that potential services might be preventive in nature, focus is placed not just on current disabilities but on health-related goals. Interest is centered both on what is and on what can be.

**Community and Institutional Characteristics**

The problems addressed by human service organizations take place within environmental contexts that must be assessed. By taking knowledge of global trends to the level of the immediate community, planners can recognize demographic characteristics of the target population; discover resources available for problem resolution; and isolate social, political, and economic factors that might be causally related to difficulties that consumers experience. A comprehensive needs assessment must identify both problems and the environmental factors that affect them.

**Analysis of Consumer Perceptions**

Human service professionals often believe that they can identify the negative or positive conditions that exist in a community. Yet the identification of problem situations is affected by a variety of perceptions, values, experiences, and sociocultural factors. Only members of a given community can decide whether a condition is tolerable or unacceptable, central to the quality of life or tangential. Needs assessment must also take into account potential consumers’ perceptions of their own personal needs.

**Current Programs and Services**

Each needs assessment, whether it has been designed to provide a sweeping picture of a total area or to examine the prevalence of a single, concrete problem, must take into account the current efforts being undertaken. Examination of service utilization can help shed light on the prevalence of a specific need. A survey of locally
available services can also help to determine whether additional programs are necessary. Analyzing current offerings can be as important as identifying problems because needless duplication of effort can be avoided.

**Needs Assessment Instruments and Methods**

Most needs assessments utilize a combination of approaches because comprehensiveness requires different tools for the measurement of separate factors. Each of the many types of tools available has the ability to expand or contract, to run the gamut from the narrow and simple to the broad and complex. The human service professional who hopes to be involved in program planning should be aware of the nature of the options available.

**Social Indicators** Social indicators are quantitative measures of aspects of the community that are thought to correlate with needs for service. A needs assessment based on the use of social indicators normally uses secondary data rather than gathering all of the necessary information specifically for the purpose of the study. The needs assessor decides what kinds of information might be useful for shedding light on the problem of a target group or geographic area. The information is gathered, possibly using a combination of locally gathered data and national statistics. Data that are relevant for needs assessment are found through such sources as census report and other governmental publications, statistics gathered by local or national organizations, needs assessments that have been carried out by local health or planning departments, and a variety of nationally distributed publications.

Some of the aspects of community life that can be measured, at least indirectly, include demographic characteristics, socioeconomic variables, health statistics, educational level, housing, employment patterns, family patterns, local safety issues, and use of leisure and recreational facilities.

**Surveys of Community Members** When surveys are used, community members are asked directly to provide information concerning their needs and desires. Surveys can be used with a sample of people living in a community or administered to members of a target population. The survey can take the form of a mailed questionnaire, a series of telephone interviews, personal contacts, or online communications. Surveys can be used to gather data concerning any of the needs assessment purposes, including problem identification, measurement of community characteristics, analysis of community member perceptions, and use of current programs and services.

**Surveys of Local Agencies** Survey approaches can also be used to identify the services currently being offered and used in the local community. When surveys are conducted for this purpose, questionnaires asking managers to identify the kinds of services provided, the number and types of consumers served, and other agency characteristics can be sent to known agencies and institutions. This process can have a two-pronged purpose: to gather utilization data that can illuminate client needs and to determine what kinds of resources are currently available within the community. This step helps to prevent duplications of services. Even more importantly, it can point the way toward inter-agency collaborations.
Open Forums and Meetings The views of community members concerning their own needs and priorities can be determined through community meetings. In such settings, a variety of ideas that would not be heard through other mechanisms might be developed. The forum or meeting approach can run the gamut from small, informal get-togethers to block cub meetings to open hearings. What is important is that many community members be encouraged to voice their views. Moreover, this type of activity might increase the community members’ commitment to ongoing participation.

Use of Key Informants The idea behind the use of key informants is that there are people within any community who are well informed about unmet needs and local opinion. Key informants can help with the needs assessment process through meetings, individual interviews, or questionnaires. Their sensitive analyses of the current situations cannot replace more broadly based needs assessments, but they can help to focus the needs assessment on current sentiments within the community.

People who are carrying out needs assessments for the purpose of building effective human service programs must be careful in their selection of key informants. At worst, the people selected might not be representative of the community at large. At best, they can provide an entrée into the community that might not otherwise be available to human service professionals. A good example of this kind of entrée is provided by the IBISS agency, which works very effectively in the favelas of Brazil. In a discussion of the organization’s first entry into the favelas, Nanko van Buuren, the executive director, said,

We work in the most violent and socially excluded slums where the government and the police don’t enter. These favelas form a state within a state and are ruled by organized crime ... You have to understand that these slums are really socially excluded: there are no schools, no health posts, nothing.” (Beauchemin, 2006, p. 2)

The IBISS teams were initially able to enter a favela only because they began by establishing a relationship with an association that represented the people living within its environs. Little by little, after that entrée, the organization was able to establish trust where few others had.

Needs Assessment as an Ongoing Process

Gilmore and Campbell (2005), in a discussion of the needs assessment process, point out that,

Health and human service professionals have different reasons for using this process. Some professionals use needs assessments as starting points for program planning. Others use them on a continuing basis with the same populations to detect changing needs over a certain period of time and to adjust services based on those needs. (p. 4)

It should be recognized as well that needs assessment should be an ongoing process not just to study changes within one population but also to recognize how needs within a community alter as the demographics change.
DISCOVERING COMMUNITY ASSETS AND STRENGTHS

It is likely that human services organizations will continue to use needs assessments as practical first steps in program planning. As useful as the needs assessment technique is, however, it has a serious limitation when used in isolation. By definition, it focuses on problems or deficiencies in a community or population and does not necessarily consider important factors such as community strengths and assets.

A growing number of community development leaders argue that the focus on “needs” may itself be problematic. They suggest that needs-focused assessments risk defining an organization, neighborhood, or community by its problems—problems that generally require outside expertise and resources to “fix.” (Roehlkepartain, 2008, p. 2)

Asset mapping and Assets-based community development (Kretzmann & McKnight, 1996) provide a broader perspective. According to O’Looney (1996), the mapping of community strengths and capacities is a “first step in learning to build the support structures for self-help, mutual aid, and informal economic development” (p. 248). This provides “a common and comprehensive base of information on which to make decisions” (p. 248), such as where to locate resources and services.

One product of asset mapping can be a database of residents’ skills, talents, and willingness to volunteer. Civic associations, families with skills and knowledge to share with others, and goods and services to provide to neighbors can all be identified. Asset mapping must promote a search for multiple resources within the community; meet the needs of diverse social, ethnic, cultural, and interest groups; focus on the grassroots level to uncover hidden resources; involve community residents in the design and implementation of the survey; and “illuminate and enhance the potential for mutual exchange of skills and services” (O’Looney, 1996, pp. 257–258).

Asset mapping illuminates the strengths that are inherent in the community and helps to highlight the importance of strength-based approaches to community assessment. According to Roehlkepartain (2008), strength-based approaches share the following common characteristics:

- Strength-based approaches focus on the capacities or gifts that are present in the community, not what is absent …
- Strength-based approaches stress local leadership, investment, and control …
• Strength-based approaches surface both formal, institutional resources (such as programs, facilities, and financial capital) as well as individual, associational, and informal strengths and resources ...

• Strength-based approaches seek to link the strengths and priorities of all partners, including the young people. This mutual engagement, respect, and commitment yields reciprocal benefits to everyone involved (pp. 3–4).

These positive approaches to community development increase the focus on the community, although not to the exclusion of relevant external forces, and this facilitates the development of relationships among community residents and organizations. This approach to combined assessment is well linked with another emerging technology: the community collaboration.

COMMUNITY COLLABORATIONS

Although service integration and interagency collaboration have a long history in social work, going back at least to the charity organization societies of the nineteenth century, recent attempts at collaboration reach for deeper and more fundamental ways for service providers and community members to interact. Evidence indicates that interagency collaborations can indeed be successful for all involved, but this type of collaboration must be learned and takes time and effort (Mulroy & Shay, 1998). To acknowledge a strengths-based perspective in this context, Bailey and Koney (1996) assert that “all organizational members must recognize and continually acknowledge the valuable resources each brings to the system” (p. 606).

Lewis et al. (in press, pp. 179–181) suggest that well-organized collaborations and networks share several distinct characteristics, including the following:

1. Both those who deliver and those who use services actively plan and evaluate such programs ...
2. Agencies work together in cooperative helping networks. Without cooperative networks, agencies find themselves simply competing against one another for limited funds ...
3. The network has a coordinating organization that facilitates ongoing planning and includes workers and community members in the process ...
4. The helping network has a mechanism through which it can react to specific issues ...
5. Conventional planning agencies within the helping network are open to broad participation ...
6. Government agencies, social planning agencies, direct service agencies, and community groups maintain ongoing dialogue ...
7. The rights of consumers, as well as the uniqueness of each agency, are protected at all stages of the planning process.

Models of collaboration are continually evolving in the current dynamic environment. Some basic definitions, examples, and guidelines are offered here to enable the human service manager to assess an agency’s local collaboration activities and make decisions regarding how to work within them. Abramson and Rosenthal (1995, p. 1479) offer the following definitions. Collaboration is “a fluid
process through which a group of diverse, autonomous actors (organizations or individuals) undertakes a joint initiative, solves shared problems, or otherwise achieves common goals.” Interdisciplinary collaboration “describes the process by which the expertise of different categories of professionals is shared and coordinated to resolve the problems of clients.” An inter-organizational collaboration “is a group of independent organizations who are committed to working together for specific purposes and tangible outcomes while maintaining their own autonomy; they terminate their collaboration or transform themselves into other forms of organization when that purpose is met.” Examples of this type of collaboration include coalitions, networks, strategic alliances, task forces, or partnerships. An even more advanced form of collaboration involves formal merging of funds and staff, sometimes into new organizational entities. This has become known as a “community collaborative” or, as we describe it later, organizationally centered services integration. Collaboration can occur at the service delivery or policy levels.

O’Looney (1996) distinguishes between the “soft,” informal process that may be seen as the “spirit” of collaboration, which includes the sharing of goals, values, ideas of fairness, and the experience of joint activity, and the “hard,” formal process that he calls service integration. He sees the latter as representing the “fruits of the collaborative social dynamics,” which include cross-training and cross-authorization of staff, pooled funds, co-location of services, shared transportation, and job descriptions that include collaboration as a performance requirement (p. 15). O’Looney asserts that collaborations should be undergirded by basic principles or shared values, suggesting that such services be community based, prevention/early intervention oriented, family focused, and culturally sensitive.

Abramson and Rosenthal (1995) note some of the common obstacles to collaboration, including the unequal balance of power among representatives (based on disciplines or the size or status of the organizations); inequities based on differences in color, gender, or culture (for example, male dominance); role competition or turf issues (fighting over limited funds or competition among professional groups); differing value bases; unclear definitions of roles and responsibilities; and inadequate conflict management processes. If these issues are addressed early and explicitly, in a climate of goodwill, collaborations are likely to be successful.

Abramson and Rosenthal suggest key tasks at the different developmental stages of a collaboration to help ensure success. At the formation stage, establishing a common mission, a shared view of problems and tasks, and clear operating ground rules are important. At the implementation stage, it is important to deal with communication difficulties, group dynamics, and interpersonal problems that get in the way of completing products such as a community assessment or a strategic plan. At the maintenance stage, issues or tensions may arise regarding power, leadership, goals, strategies, and follow-through on agreements. Existing norms and ground rules, agreed to upon formation, may be returned to as aids in resolving these problems.

In particular, Abramson and Rosenthal suggest several key roles for leaders, who have particular responsibility for “setting the tone, assessing and managing the group process, keeping the activity on target, and handling administrative details” (p. 1485). Leaders may rotate, or there may be a central core of leaders, but regardless of the formal structure, all leaders must act in the best interests of
all participants. Leaders should help develop a positive climate where all can be heard, differences are openly discussed, conflict is proactively managed, and a view of hope and optimism predominates.

BOUNDARY MANAGEMENT: COALITIONS, PROFESSIONAL ASSOCIATIONS, AND NETWORKS

In addition to all of their other responsibilities, managerial leaders, especially those at the upper echelons, need to assume “boundary-spanning” roles that require them to interface with those elements of their organization’s task environment, or supra-system, that have a direct bearing on the organization’s growth, survival, efficiency, and effectiveness. Knowledge of the environments in which human service organizations are embedded and of the skills required to negotiate balanced exchanges of tangible and intangible goods and services between the organization and its task environment becomes an essential component of the managerial leader’s professional armamentarium.

Many direct service staff rarely see their agency executives and wonder where they are during the day. In fact, an effective manager needs to spend much of her or his time actively engaged with aspects of the agency’s environments. This includes reading literature on current developments in the field, increasingly via the Internet. Even with these resources, a manager needs to spend a good deal of time outside the agency, in face-to-face meetings with other service providers, funders, community members, advocacy groups, and the news media. A manager may not enjoy traveling to the state capital to meet with legislators or their staff, but such trips, as well as attendance at worthwhile national conferences or meetings of professional associations, can pay off in the future for the agency.

Not only can state-of-the-art information be acquired about successful model programs, new funding sources, or pending legislation, but also personal relationships are built that will be valuable in later collaboration or problem solving. A human service manager should become aware of relevant organizations in his or her field of service and participate in them as appropriate.

PUBLIC RELATIONS

Public relations in general and media relations in particular are important aspects of an agency’s interaction with the environment. At the most local level, an agency, especially one providing services that some consider to be controversial or that involve “undesirable” clients, may need to pay extra attention to relationships with local residents and other organizations. Ideally, the agency would have begun to develop relationships with the local community before opening a program there. Sometimes concerns regarding, for example, having ex-offenders or people in recovery living in a neighborhood can be addressed by meeting with residents and introducing the staff and program model. There may be ways to adapt the program or add new services to build community acceptance. Having good relationships with local politicians, community leaders, and relevant local government staff such as zoning administrators should make it easier to solve problems.
On a slightly broader scale, the agency should have a well-thought-out strategy for media relations on an ongoing basis. Cohen (1998) has provided useful suggestions for connecting with local reporters and editors. The agency should learn which editors and reporters handle human service issues and arrange a meeting to be introduced and provide background on the agency and its services. Reporters will then know people to contact when they are preparing a story.

The agency can make available to the media information on new or modified programs and human interest stories illustrating what a program does and what positive effects it has had on the community. News releases, letters to the editor, guest editorials on television or radio, and op-ed articles are effective ways to reach large numbers of citizens.

AGENCY AND ENVIRONMENT: THE DIRECTORIAL ROLE

According to Herman and Heimovics (2005), successful executives “work through their boards to position their organization in its environment” (pp. 163–164). There is little doubt that effective work across the boundaries between an agency and its environment is considerably enhanced by the presence of a flourishing board and by a good working relationship between board and staff. Among the most important roles that boards can perform are defining and advancing the organization’s mission, developing the organization’s resources, overseeing management, ensuring that organization assessment is carried out, and engaging in “outreach as a bridge and a buffer between the organization and its stakeholders” (Axelrod, 2005, p. 137).

In considering the ways in which a board can act as a “bridge and buffer,” Axelrod describes a number of key activities that an organization’s board are ideally situated to carry out. These activities include the following (Axelrod, 2005, p. 137):

- Serve as ambassadors to communicate the organization’s mission, policies, programs, and services to its various stakeholders.
- Interpret and communicate to the organization the needs of the communities served by the organization.
- Define the organization’s position on public policies and serve as advocates.
- Protect the organization from inappropriate intrusions by government and special interests.
- Promote the organization to donors and potential donors.

Clearly, if board members are to communicate accurate information about the organization, they themselves will have to be well informed. If they are to communicate information from the community to the agency’s management, their input must be welcomed by the staff. If they are to promote and advocate for the organization, they must have a clear message that is shared by all stakeholders. These factors serve to highlight the idea that the agency’s board and managers must work closely together. It is perhaps for this reason that Axelrod terms the idea of limiting boards strictly to policy an “old bromide” (p. 142). Trying to create and maintain impermeable boundaries between the board’s policy domain and the staff’s operational expertise is impractical at best. When managers keep board members well informed about the organization’s operations, they make it possible for the board
to play a significant role in supporting the agency. And when managers are open to the messages that board members bring in their role of conduit from the community, the agency gains input that is valuable to strategic planning process.

SUMMARY

The stakeholders of an effective human service organization know that one of their most important qualities is their understanding of the environment. Human service programs are powerfully affected by environmental factors in the larger public arena. Political, economic, social, and technological changes—even at the national or international level—bring both opportunities and challenges and call for adaptations that might be unexpected. At the local level, human service programs need to be built on an understanding of the needs, the assets, and the strengths of the community being served. This chapter reviewed the connections between human service programs and their environments, moving from a global perspective to the presentation of practical ideas for enhancing the connections between program and environment.

COMPETENCY-BUILDING ACTIVITY 2.1

At the close of Chapter 1, you began the process of developing your own hypothetical program. You began to consider your dreams for this program. You thought about the difference you could make in the lives of a particular population. You gave your program a name.

Now it is time to consider the environment within which your program will exist:

1. What are political, economic, social, and technological factors that would be most likely to affect the clients you will serve?
2. How might you go about assessing the needs and the strengths of your program’s community?
3. What factors of culture and diversity would have the greatest effect on your clients and your program?

CASE ACTIVITY 2.1

Marcia Butler, Angela Ortiz, and Pam Collins worked together at the Department of Human Services (DHS) in a fairly large city. Because they were the only female professionals in their particular branch, they tended to be the ones assigned to work with battered women, and they had all dealt with a number of these situations.

Pam, the youngest and least experienced of the three professionals, often asked Marcia and Angela for advice and support when dealing with difficult problems. One such situation had just presented itself. Pam’s client, a very young mother of two who had been severely beaten by her husband on many occasions, had just been referred to DHS for the third time. Each time Pam worked with her, the same thing happened. Immediate, stopgap measures were taken, wounds were healed and promises made, and the young client returned to the same situation. There was no potential for change as long as this client saw herself as without resources for self-sufficiency. She could not support herself and her children economically, her self-esteem was as battered as her body, and she felt she had no future except with her husband.

Marcia and Angela sympathized with Pam’s difficulty in helping this client, but they did not have any answers. Each of them had seen similar situations time and again. Yet, as much as they tried to help,
they could see no way out, primarily because of the way services were organized.

Battered women could go to a shelter that had been organized by a nonprofit, private agency, but the shelter provided only short-term (two weeks’ or less) refuge for women and their children. No long-term services were offered. Women could receive vocational counseling and training through the employment service and personal counseling through the mental health center. Either of these, however, required that the women enter long-term programs before being able to make drastic life changes. In light of their relationships, most women did not feel safe using such programs within the context of their home situations.

Marcia, Angela, and Pam recognized the need for a more comprehensive program to deal with the needs of battered women in their locality. To be effective, a program would have to combine physical refuge, medical services, personal and family therapy, and vocational counseling. The purpose of such a program would not necessarily be to remove all battered women from their current homes but to work with whole family systems and to ensure that women developed more options for their lives.

Although the general manager of DHS recognized the need for such a program when it was presented to him, he did not see how it could fit into the agency’s current plans and appropriations. He made it clear that he did sympathize with the aims of the program and that he would be glad to consider it further if he could see a carefully developed proposal. The proposal would need to include hard data concerning needs as well as specific suggestions concerning program activities and funding. He would not consider reallocating funds currently being used by other programs that were already hard-pressed to serve the number of clients needing assistance.

Similarly, community agencies, such as the women’s shelter, shared their philosophical support for a more comprehensive program. None of the currently operating programs, however, seemed ready or able to take on the burden of providing additional services.

Marcia, Angela, and Pam began to recognize that they could not help develop this sorely needed program just by mentioning it to others. They would need to become more involved themselves. The program might be brought into being in any of a number of ways, including creation of an alternative community-based agency, application for a grant that might be awarded either to the Department of Human Services or to the women’s shelter, or development of a coalition of existing agencies and services. The possibilities needed to be spelled out, and if Marcia, Angela, and Pam did not take the initiative on this, no one else would:

1. If you were in the situation these human service professionals face, would you become involved in seeking a solution? To what extent?
2. What approach to solving the problem seems most promising, given the human service network that exists in the community being discussed here?
3. What steps should Marcia, Angela, and Pam take in developing, and possibly implementing, a comprehensive program?

REFERENCES


USEFUL WEB RESOURCES


National Consumer Supporter Technical Assistance Center (NCSTAC). *Community Needs Assessment.*
