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Keep All the Wells Full: A Metaphor for Understanding Community Partnerships

King Davis

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SERVICES, RESEARCH, POLICY, AND EDUCATION

Keep all the Wells Full: A Metaphor for Understanding Community Partnerships

> School of Social Work Georgia State University King Davis, Ph.D.

Clean water from the community well gives and sustains life, growth, and commerce. Its absence through waste, monopoly, drought, or scarcity leads to sickness, fear, and death. What then is the cost to the community of scarcity or a drought in leadership, healthy children, opportunity, stable families, safety, homes, literacy, timely justice, quality education, income, health care, jobs, hope, motivation, or wealth. It is the wise and caring community that keeps all of its wells full.

King Davis, 2008



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The First Decade of the 21st Century - Context Failure of Computer Systems Sub-Prime Crisis **Contested Presidential Elections EBP** Emphasis September 11, 2001 **Congress/Foundations** Afghanistan War **Rise in Gasoline Prices** Iraq War **New Freedom Commission** Katrina & Rita Transformation as Theme **Rise of Comedy News** Immigration Dispute **Environmental Crisis Early Deaths of MI Presidential Primaries** Democratic Control of Congress Concern Over Privacy Rights



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Terms Used in the Presentation

- 1. Basic Assumptions
- 2. Root Causes
- 3. Intersection
- 4. Vision and Goals
- 5. Incremental Change
- 6. Imbalances
- 7. Leadership/Followers
- 8. Community Organization
- 9. Recommendations
- 10.Conceptual Definitions

http://mac.usgs.gov/statecooperator/ERGCoopSlides/partner.doc



services, research, policy, and education Basic Assumptions

No community or group chooses poverty No community or group chooses hunger No community or group chooses danger or fear No community or group chooses early death No community or group chooses sub-standard housing, abuse, or mental illness No community or group chooses disease No community or group chooses crime No community or group chooses addiction No community or group chooses drought!



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What are the problems What is their history Which populations have problems What are the causes What are the solutions

		Black	White	Latino	Asian	Total	US
	% of Populat	255689 61.3%	138352 33.2%	18720 4.4%	8046 1.9%	416474	
_	Income Per Capita	\$13,156	\$50,500	\$14,684	\$17,937	\$25,772	
	Out of Work					9.6%	6.9 %
	Family Poverty	16,264 90%	997 5.5%	571 3.1%	154 1%	17,966	
7	Indiv. Poverty	79,862 83.4%	11,071 11.5%	4,276 4.4%	1,322 1.3%	95,743 23%	
	Rentals	57,074	32,241	3,941	2.985	94,674	
	Med Family Income	\$26,036	\$102,657	\$32,948	\$37,399	\$37,231	

Atlanta 2000-06

Atlanta Characteristics

Atlanta 2006

Fastest Growing MetroCity in the US

- 3rd highest number of Fortune 500
- 2nd highest number of government agencies

Black Mayors since 1973
 1st in child poverty – 48%
 2nd highest # of black businesses

Implications

- Excess Preventable Deaths
- Untreated Illness & Lower Achievement
- Excess Hospital Admissions & Readmissions – Physical & Mental
- Delayed Help Seeking
- Community Suspicion and Mistrust
- Intergenerational Poverty
- Increased Crime Rates
- Excess Child Welfare Cases
- Increased Taxes & Waste

Root Causes 1. Scarcity/Perception/Real 2. Public Policies/Monopoly/Race * 3. Rublic Sentiment: Fear/Anger 4. Community Climate: Competition 5. History: Precedents/ 6. Material Values: Secondary Needs

Policy Related Causes

Action Act of 1790 U. S. Constitution Chinese Exclusion Act 1880 Civil Rights Act 1866 Plessey v. Ferguson Court Decision The Indian Trust Act States Rights



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Outline of Ideas: Why is change so difficult?

Monopoly: Internal/External

Placing value on specific things: power, land, dollars

Internal: Help seeking, development loans; redesigning the church's role; economic focus; changes in education;

Role of Public Policies

Successful Strategies: Civil Rights Movement; Legal Suits; Delegation to Advocacy Organizations; Voting; Elective Office; New Public Policies and Laws; Collaborations; values; leadership

Policies: Naturalization Act; Indian Removal Act; Chinese Exclusion Act; Civil Rights Act 1964; Economic Opportunity Act, 1964; Voting Rights Act; Immigration Act; NAMBHA

It takes 10-40 years for major change to occur

Black-White Comparison of Cumulative Proportions of Cases making Treatment Contact by Selected Years After Disorder Onset

	Cumulative Percentages							
<pre># years after disorder onset</pre>	1	2	5	10	15	20	30	
Major Depression								
African American	27.2	31.7	39.0	46.4	57.4	64.3	77.6	
White American	39.5	44.4	51.1	58.2	64.7	70.3	78.0	
Bipolar Disorder								
African American	17.3	19.5	24.5	33.0	38.1	38.1	43.9	
White American	40.5	44.3	49.8	58.2	70.5	71.3	79.4	

Neighbors, Baser & Martin (2007). unpublished data from the National Survey of American Life



Implications for Partnerships



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Partnership

A partnership involves two or more parties working to achieve common interests and goals.

http://mac.usgs.gov/statecooperator/ERGCoopSlides/partner.doc

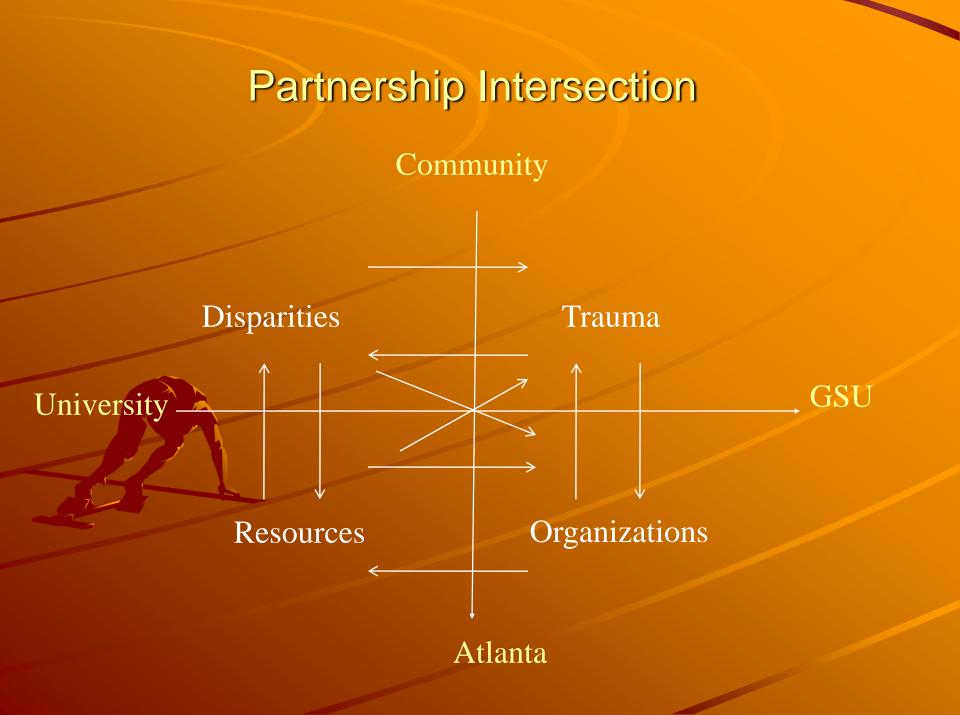


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Partnership

A voluntary, mutually beneficial arrangement entered into for the purpose of accomplishing mutually agreed upon objective(s). Specific legislative authority must exist to form partnerships where the parties anticipate exchanging funds, property, or other items having value.

www.partnershipresourcecenter.org/resources/partnership-guide/appendix-b.html



Vision, Mission, & Goals Economic Development - Business Housing Development - Purchases Family Relationships Health & MH Literacy - Information Educational Achievement -Organizational Development



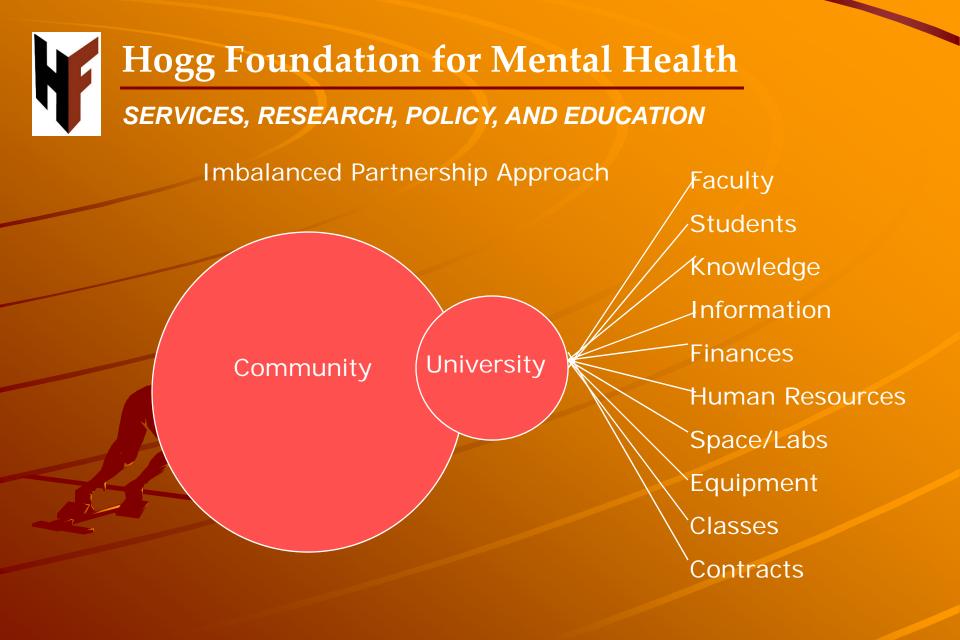
What is the nature of the exchange?

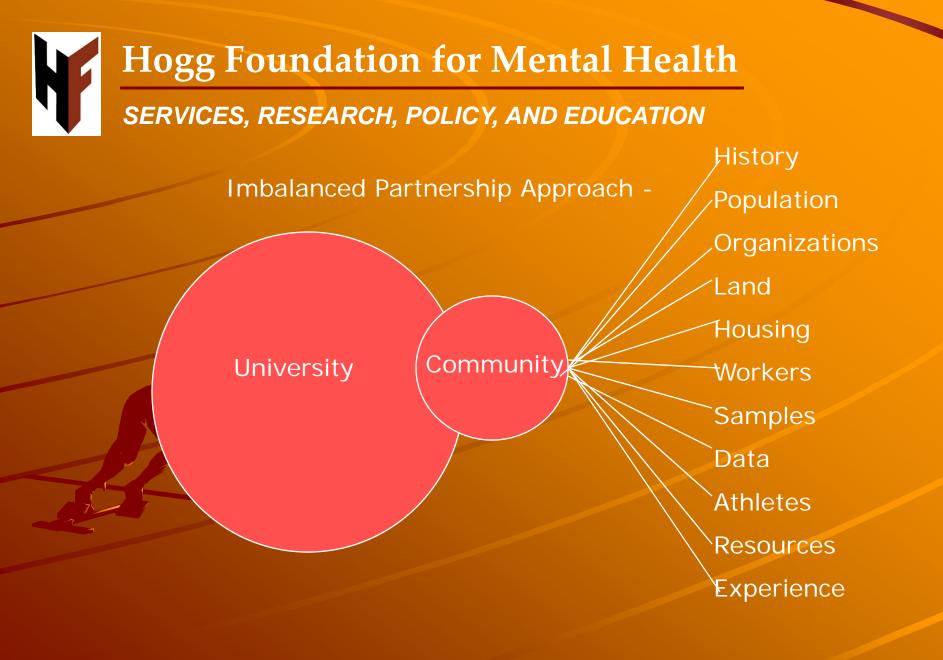


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The Impact of Scarcity









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State & CMHS Develop. CMHC & State Hospital State & Consumers MH & MRDD MH & Pharmaceuticals SA & MH HIth & MH Emerging MH & Colleges MH Corrections MH Insurers MH Business MH & Advocates

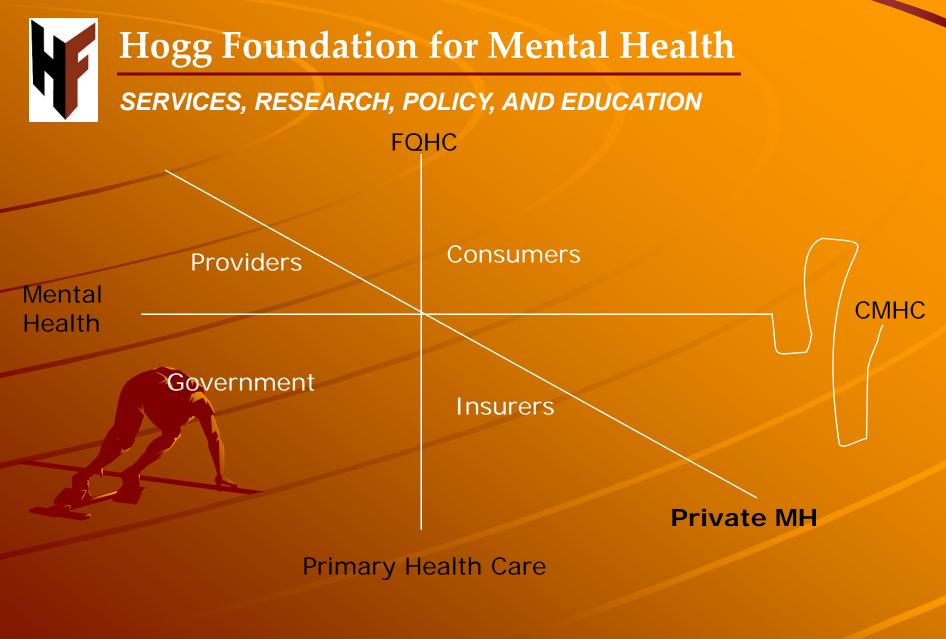
MH & Juvenile Jus **Strained** MH & Medicaid MH & State Legisl. CMHC & FQHC Consumers & Families MH & Foundations MH & Managed Care Underdev. MH People of Color MH & Religious Org. MH & Employee Unions MH & Former Commissioners



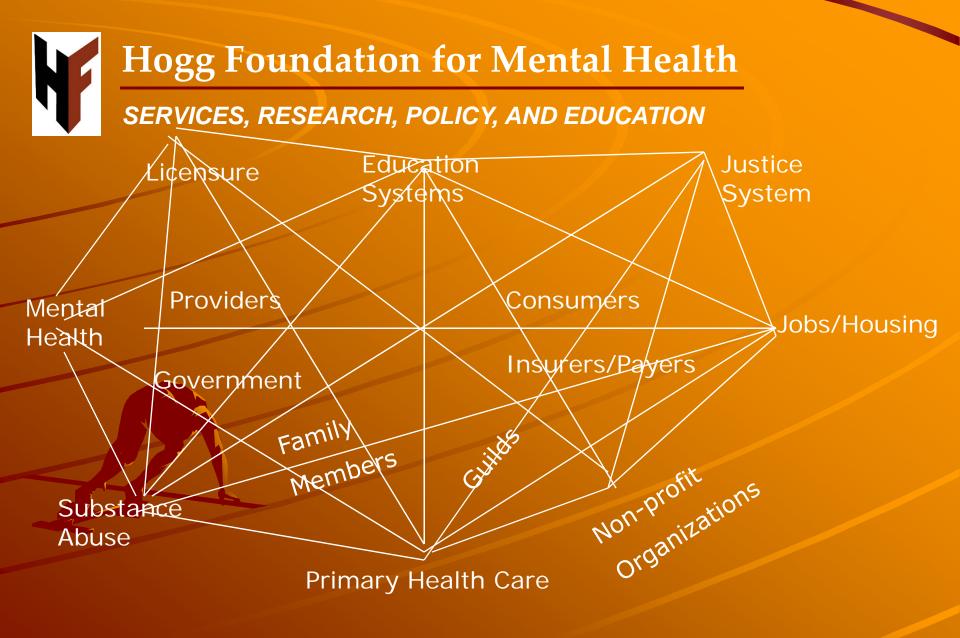
Traditional State Hospital Partnership Model



Imbalanced Behavioral Health Partnership Model



Integrated Health Partnership Model



Complex Future Partnership Model

H

Hogg Foundation for Mental Health

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Factors that Promote Partnership

- 1. Collective [Shared] Vision of the Future
- 2. Recognition of Rewards, Positive Outcomes, Gain
- 3. Legal Mandate or Contractual Requirement
- 4. Moral Imperative to Change
- 5. New Discoveries
- 6. Strategic Thinking, Conceptualization, Discussion
- 7. Leadership
- 8. Willingness to abandon historical model
- 9. Working Concepts & Language
- 10. Comprehensive Planning



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Atlanta Paradox: Barriers to Partnerships Dated Language, Concepts, & Theory Dated Pre-Service Professional Education Programs in Universities Dated Continuing Education Foci Protective Professional Associations and Guilds Dated Accreditation Requirements and Guidelines Dated Licensure Requirements at the State Level Lag in Application of Research Findings in Clinical Settings Limited Scientific Knowledge of Causation, Cure, Prevention Separate Agency Auspices Agency Specific Sources of Financing **Competition Between Partners**



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Factors that Will Affect Future Partnerships **New Conceptualizations** New Presidential Administration **Available Resources** Shared Funding Degree of Advocacy Integrated Approaches Integrated Training/Education Scientific Discovery Payment for Outcomes/Quality Acceptance by Academia Linkages with Dollars Leadership Policy Requirement Resistance to Change Language Used Identification of Mutual Goals Clarity of Concepts **Required Change Real World Origins of Concepts Required Mergers**



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The Partnership Challenge

The challenge is to show the relationship between human problems and human functioning and the clinical, scientific, and economic value of integrative approaches to service.

Change the language used in the discourse.

Change the structure, conceptualization, and expectations of American professional education.

Change the structure and functioning of human service agencies at state, local, and federal levels.

Shift funding, reimbursement, and support towards integrated care.

What's Missing at GSU? Urban Architecture Neighborhood Development Community Level Finance Integrated/Interdisciplinary Studies Relationship to AU, Spelman Relationship to Grady Hospital Satellite Locations Joint Degree Programs – Law/Economics Links to the King Center Race Relations Study Center?



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School of Social Work Recommendations **Fund Raising Courses** Non-profit management Courses **Philanthropy Courses** Finance courses **Economics Courses Organizational Development Courses Community Development Courses Small Business Development Centers Grant Writing Assistance Center Childrens Poverty Center Community Computer Lab Clinical Services Center Welfare Policy Intervention Lab Center for Women's Development SSW Foundation Trauma Center**

RWJF Local Funding Partnerships Call for Proposals Released

Robert Wood Johnson Foundation Local Funding Partnerships

Application Deadline: July 8, 2008

Robert Wood Johnson Foundation Local Funding Partnerships (LFP) forge relationships between RWJF and local grantmakers to fund promising, original projects that can significantly improve the health of vulnerable people in their communities. Local grantmakers propose a funding partnership by nominating community initiatives that offer creative solutions to critical health or health care problems.

RWJF invites grantmaking organizations including independent and private foundations, family and community foundations, corporate foundations and other philanthropies to recommend projects for this funding partnership.

More details and how to apply.

You have received this e-mail alert because you have elected to receive information from the Robert Wood Johnson Foundation on: **Vulnerable Populations**.

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> King Davis, Ph.D. Executive Director & Professor The University of Texas at Austin School of Social Work