

Notes from Qld Communities Leaders Forum May 2014

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Health, social care (community services) and education are all going through massive transformation - basically being rewired from the ground up - at a time when demand is growing and their joint and several economic significance, in terms of generating jobs and contributing to economic growth, both directly and indirectly, is growing rapidly too. It is truly a perfect storm.

It also creates a "double jeopardy" for change and renewal, in the sense that rising demand, and the need for deep structural change across the entire industry are happening at the same time. Obviously those two phenomena are linked.

Rising demand and dramatically growing economic value are placing unprecedented demands on institutions, processes and infrastructure in those sectors, much of which has been in place for over 100 years and which reflect essentially "fordist" notions of transactional welfare which was fine when the welfare task was essentially episodic and marginal.

The nature of the risks and opportunities that all three sectors are now grappling with - and this is especially true in the human services or social care sector - are longer term, relational and fuelled essentially by new conversations about what constitutes, and nurtures, resilience and capability, which are the only sustainable basis for real "social security" in the first place.

So in each of those sectors, the change and renewal game is broadly the same. How do outdated institutions and systems rapidly change themselves so they better match the dimensions and nature of the problems they are charged with solving, while those problems themselves keep changing and becoming more complex?

At the same time, how does that change process happen fast enough to reflect rising demand for a style of service and support that is proving difficult, if not impossible, to deliver from within a paradigm in thrall to the old platforms and models?

The most obvious, and the most important, implication of this context is that the kind of change that institutions and systems now need to make will take time and will be complicated. That, in turn, puts an additional premium on the essentially political task of holding the reform and renewal space wide enough, and long enough, to give leaders the room and time they need to get the change programs up and running and then to see them through to the point where real results can be discerned and, most importantly, actually experienced by the people they are meant to be helping.

In the human services and social care space, that truly "wicked" narrative gives rise to all of the challenges that are now becoming the true hallmark of worthwhile reform.

How does an essentially 19th century welfare system shift from episodic, transactional and relatively well targeted and limited programs and support to a 21st century welfare system fashioned around closer and longer relationships with clients and communities and which builds capability and resilience without ignoring the need to still deal with episodes of acute need?

Ensuring short term stability and safety in acute situations can often become overwhelming in terms of time, resources and energy, little of which are then left over to invest in the longer term work of engagement, behaviour change and capability building that are necessary to avoid the recurring crises which keep demanding most of the time and attention. Finding often small ways to start to break that potentially vicious cycle is a key task of any reform program.

In that sense, the architecture of intervention by human service agencies is itself being dramatically reshaped, with sometimes dire implications for the people, processes and organisations still locked into the previous model of transactional, short-term welfare response.

Most human service agencies are locked into a “program and problem” mentality when they need to think more in terms of “place and people” (as the Victorian Dept of Human Services characterises the shift).

It begs the question, how does the Queensland Dept of Communities itself make a shift away from program thinking without ending up creating yet more program structures? This conundrum was raised in the leadership forum, recognizing the risk of responding to the desire to break free of program and investment silos with the creation of new “better” silos, with different titles and new rhetoric but still, essentially, bound by unhelpful distinctions and divisions.

To what extent can the integration and consolidation of program activities into more client and place-focused interventions avoid the risk of deskilling the workforce, ending up with too many generically skilled people? What happens to the still-important specialist workers and how does their expertise become engaged in flatter and less complex intervention systems?

The relational approach to resilience and capability has to be context-specific and responsive to local needs, circumstances and cultures. But at the same time, it also has to be applied within the context of what happens across a large, complex distributed system where a level of fairness is expected in the way different people are treated in different places for essentially the same set of challenges and problems.

That means privileging consistency over uniformity so that broadly the same approach to people and problems (which is seen as fair) can be applied but with considerable leeway for local adaptability (which can often appear to condone quite different responses and intensity of effort in different locations for apparently similar conditions and needs, which can look very unfair).

That raises a more basic question. Is it possible to transcend the instinct of any large bureaucracy, which is always to standardise, because that makes it easier to manage (design deliver, account etc)? The task of reform is to mount a counter-intuitive campaign to resist the inevitable instinct to uniformity that the bureaucratic reflex for standardization feeds, and feeds off.

Does the alternative, which not only allows, but encourages, variability (because that turns out to be both fairer and more efficient, over the long term) have to end up costing more or testing limits of political support and accountability?

Two characteristics of traditional human service agencies represent both their greatest strength and their greatest potential weakness, given the massive change and renewal task they are now embarked upon.

One is the assumption that doing good somehow excuses you from the normal constraints of having to show that you are also doing well. Because the subject matter of so much of the work of human service agencies is heartbreakingly confronting and complex, the need to fit into the limits of normal management and performance expectations and measures can sometimes seem either inappropriate, unhelpful or even insulting. That sets up a tension built around the resistance to "normal" management by those who feel their work is not properly understood.

The second characteristic is the triumph of advocacy over performance. Because so many of the clients with whom workers in the human service space deal - especially in social care - are deeply marginalised, disadvantaged and often at extreme physical, mental or emotional risk, the assumption is that the real task for staff is to advocate on behalf of those clients.

That means that performance can sometimes take a backseat to the need to argue for a better deal for people whose level of complex disadvantage, whatever the real mix of reasons, can seem so unfair and so difficult that it demands a response often born of anger and frustration.

The new human services or social care approach...

- Smaller, relational, co-designed and rarely directly delivered, distributed, fashioned around place and people, supported by simple systems and processes, digital by design and by default, intervening for short term stability and safety when necessary but building for long term capability and resilience,

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