

CAPD

Building Capacity for System Reform

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Contents

Preface	1
Acknowledgments.....	1
I. A Case for System Reform	3
II. Lessons Learned About Stimulating and Sustaining System Reform Efforts	7
III. Implications for Outside Agents	18
Appendix: The Design of the Children's Initiative	20
Notes	21
References	21

Building Capacity for System Reform (cont.)**PREFACE**

This paper, "Building Capacity for System Reform," draws many of its insights from the experiences of The Children's Initiative, an effort of The Pew Charitable Trusts to improve outcomes for children and families through reform of the health, education and social service systems. The Center for Assessment and Policy Development (CAPD) designed the Initiative in partnership with The Trusts and a panel of national experts, and acted as the intermediary for the Initiative in the five states and the several communities within each state that undertook the initial planning effort. In March 1994, at the end of the initial planning period, The Trusts made a decision not to move forward.

In the absence of evidence of either success or failure from the Initiative's implementation, we — with others in the policy community — are left with a fundamental dilemma that has confronted system reform efforts. We know that such efforts are hard and that there are many barriers to their success. Not all solutions are known. Some look at this situation and determine that since success cannot be assured, reform is not feasible. We believe this response ensures that new solutions to very difficult problems will never be tried.

Another response is to consider whether the necessary foundation is being laid on which solutions and strategies will be crafted, not only to current challenges but also to those not yet apparent. Here, in our estimation, an effort like The Children's Initiative provides evidence of feasibility. Under the Initiative, many actors across systems, at the community and state levels and from public and private domains, became increasingly committed to the principles and strategies of reform; in some states, various initiatives became increasingly integrated into a coordinated strategy designed to improve a wide set of outcomes; and commitments were made to both create new sources of funding as well as

more effectively use existing resources. Even more compelling is the fact that the work begun under the Initiative is continuing in some states and communities even under changed conditions of support.

We, like many others, look at these early results and are heartened at the magnitude of what was accomplished in a very short time by the states and communities involved in The Children's Initiative. It is our belief that what was accomplished is strong evidence that system reform is doable and is worth trying. We need to look carefully at what has been learned about **how** to move forward and support those willing to take on the difficult challenges of reform, keeping in front of us the vision of a society in which families are increasingly able to nurture their children and prepare them to take on the challenges of the next century.

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Building Capacity for System Reform (cont.)

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Without question, however, the most important contributors to the lessons in this paper were the people in the states and communities who have taken bold steps on behalf of children and families. They include: the state of Georgia and the communities in Murray, Ware, Chatham, Fulton and DeKalb counties; the state of Florida and the communities in Broward and Pinellas counties; Kentucky and the communities in West Jefferson County and the Gateway Area Development District; Minnesota and the communities in St. Paul and Becker and Cass counties; and Rhode Island, and the communities in Providence and Newport county.

I. A CASE FOR SYSTEM REFORM

In many states and communities, efforts are underway to change the way in which services are provided to children and families in the hopes of turning the tide of poor outcomes. The impetus for this work is the recognition that current outcomes for many children and families are poor, and that the cost of these poor outcomes, in both human and economic terms, is unacceptably high.

The experience of promising programs suggests that to improve outcomes for children and families, strategies must be family-focused, community based, flexible, culturally appropriate, preventive and comprehensive. Since these characteristics are not typical of most of our current health, education and social systems for families and children, improvements in outcomes often call for reforms of these systems.

This paper is intended to assist the continuation and strengthening of system reform efforts. In it we argue that system reform is needed to improve outcomes for children and families on a broad scale and that emerging evidence provides many guidelines about how best to move forward. As is widely recognized, it is very difficult to change systems. But as a field, we

are continually learning how to anticipate and overcome barriers and how to support change. This learning, applied to bold visions and tempered by realism and flexibility, can help move us forward.

This paper focuses in particular on the capacities that need to be built — at multiple levels and simultaneously through the system — to support system reform. Our sense of these capacities comes from our direct participation in the design and planning of a particular comprehensive system reform effort (see Appendix), reinforced by our observation of other large scale comprehensive reform efforts and work on more targeted system reforms focused on institutional racism, pregnancy prevention, violence prevention and education reform. Few of these reforms are well enough developed to know the extent to which they will achieve their intended outcomes. This is the state of the art in system reform. But the fact that some lessons continually re-emerge in various settings suggest they may have broad applicability in this work.

Because of our own particular experiences, this paper also highlights the roles that outside agents can play in identifying, promoting and supporting the capacities needed to change systems to improve outcomes. Various institutions have played the role of outside agent in system reform. The most obvious examples are foundations, and intermediaries for foundations, who have been the outside agent in relation to community planning groups, school districts and state and community partnerships engaged in reform agenda. The lessons in this paper come from CAPD's experiences in the role of intermediary to one initiative and evaluator to several others. But institutions other than foundations or their intermediaries have also played this role, for example, the federal government in relation to other levels of government; the private sector in relation to the public sector; the legislature in relation to state departments and grassroots advocates in relation to service providers and other publicly funded system actors.

Building Capacity for System Reform (cont.)

These outside agents bring not only their resources, but also a set of expectations — explicit or implicit — to this work. The strategic use of both has greatly enhanced some aspects of system reform and there are also examples of missed opportunities. Both provide important lessons as we move forward. Our assessment of the special opportunities for outside agents and lessons learned from their experiences is shared in this report.

Our discussion is organized as follows. The remainder of this first section discusses what we mean by system reform, a rationale for doing it and the capacities necessary to support the work. The second section highlights some lessons that have been learned about stimulating and supporting system reform. The third and final section highlights the implications of these lessons for those who can help build the necessary capacities, especially those acting in the role of outside agents.

WHAT DO WE MEAN BY SYSTEM REFORM?

There are many efforts underway to alter the way that systems do their business, some under the rubric of "reinventing government," some associated with reform of a specific cluster of activities within a categorical area (health care reform, welfare reform, child welfare reform, education reform), and some designed to improve a particular set of outcomes for a broad group of families and children (initiatives in Georgia, Missouri, North Carolina, Florida, Hawaii and Maryland, for example).

Many of these efforts are wrestling with a common set of problems about how to work with families in a new way; how to make system services more accessible, effective and efficient; how to develop an appropriate continuum of services; how to build the infrastructure to support the continuum; how to alter incentives and accountability; and how to organize government so that it facilitates and is not a barrier to necessary changes.

Of course, not every effort to improve the lives of children and families falls under the heading of system reform. In looking across ongoing work, it seems clear that efforts that are fundamentally about reforming systems of services to improve outcomes share several characteristics:

- *System reform is viewed as a means to an end, not an end in itself.* The end is what happens to children and families. One way to recognize system reform is the extent to which this end drives decisions about system change, so that changes are strategically targeted to those most likely to affect outcomes by changing what can happen when children and families encounter the system.
- *System reform occurs when it changes the rules about how the rules are made.* At its heart, we believe system reform is about making purposeful changes in the values, missions, roles, rules and relationships within a system, changes that are designed to improve outcomes by allowing best practices to be developed, recognized, supported and replicated.
- *System reform extends beyond service strategy to encompass financing, governance and political will.* There used to be an adage in program design that a program without transportation wasn't a program. That is, the best intentioned and implemented intervention would not benefit families unless they could use it, and transportation was always an obvious but underaddressed barrier.

The corollary for system reform is that reform without financing is not reform. There is no evidence to suggest that the kinds of supports that children and families need, such as adequate health care or good quality child development programming, can be achieved without additional investments. This is true even though we believe that current system finances can be used more effectively, and that investments in prevention will likely be cost-effective in the long run compared to the current costs resulting from failure to make those

Building Capacity for System Reform (cont.)

investments. And, because financing is ultimately a political decision, changes in financing will always affect, and be affected by, governance and the public will.

- Finally, *a system is reformed when the best practices known to improve outcomes for children and families have become standard operating procedure and when this reformed system becomes the child and family serving strategy for a community, a state or the nation.* How do we know when the stage is being set for this to occur? When competing or complementary planning efforts on behalf of children are considered together, not as separate initiatives. When those planning system reform have legitimacy and authority to examine the daily operations of programs that affect children and families. When plans call for staff to be redeployed and hard dollars reallocated to fill gaps in a continuum of care or to meet system needs determined by state and community partnerships. These can all be considered as the earliest signs that a reform effort is about real change to current systems, not an add-on or marginalized effort.

These are obviously high expectations for system reform and not every system reform effort will achieve them. But in trying to understand the capacities that can support system reform, and lessons learned about how to support those capacities, it is useful to put these characteristics and the accompanying expectations on the table.

WHY REFORM SYSTEMS?

The need for system reform is based on an analysis of what is known about improving outcomes for children and families broadly, areas where there is consensus about next steps, and the extent to which current systems can be the vehicle by which these best practices and next steps are made available.

Unlike many other developing or developed countries, the United States lacks a normative system of supports for families and their

children. The United States does not support universal access to preventive supports such as health care, parental leave, child care and child development services. Our system of services to children is based on the development of specific reactive services to remediate problems after they occur, not on a system of prevention with remediation as back-up. In order to ensure that scarce resources were funnelled to those deemed most in need, the system also includes many regulations and policies that inhibit access to services and limit their flexibility, and require that families be deemed sufficiently deficient to qualify for help. The legacy of this approach is a system of services with characteristics antithetical to the best practices of programs seen as effective in improving outcomes.

In addition, our present system is based on a notion about family needs that is out of touch with current reality. First, so many children are now at risk of negative outcomes because of poverty and other conditions that even those who meet restrictive categorical requirements are swamping a system designed to serve relatively small numbers. Second, raising a child is no longer a private family matter for large numbers of families. More than half of the children in this country have custodial parents who work outside the home; these parents must rely on formal or informal systems of services in order to survive. In addition, the phrase "it takes a whole village to raise a child" has passed from insight to mantra in less than a decade based on the increasing recognition of the relationship between community strength and family strength, and an acknowledgement that every family, at some time, needs help in its parenting role.

Why must system reform be a part of the answer to this dilemma, and not less comprehensive strategies? For example, why not simply increase our investment in existing services, rather than expend resources on complicated reconfiguration and reorientation of current systems? Or why not focus our efforts solely at supporting new models of practice at the front-line? Why expend resources and political capital

Building Capacity for System Reform (cont.)

on parts of the system that are essentially invisible to families?

More comprehensive efforts are needed because the current system contributes to poor outcomes by failing to incorporate and support best practices. Improving outcomes will require system change to make such practices widespread and sustain them over time. As noted above, this requires altering the characteristics of systems themselves, so they not only permit, but become a good environment for, these best practices to flourish.

Simply improving the capacity of the system to meet current demand will help many children and families already in the system. But it cannot create the conditions to lessen demand. Changing practice at the front-line, where families and systems interact, is designed to lessen demand for more costly and generally less effective interventions. However, the requirements of this new front-line practice — flexibility, access to a broader array of preventive supports, increasing a family's control over system resources — cannot exist at any kind of scale without changing the way service delivery is supervised, regulated, accounted for, governed and financed.

Thus, we argue that system reform, though extremely difficult, is the most efficient way in the long run to achieve improved outcomes for children and families. Further, we argue that system change is continual and inevitable — systems evolve in response to funding priorities and streams, demographic shifts, emergence of new technologies, and political exigencies. We believe it is possible to change the dynamics of systems in planful ways that will improve outcomes and not result in the same barriers re-emerging. We know enough about effective approaches and necessary conditions to inform choices about how to do things differently.

WHAT CAPACITIES NEED TO BE BUILT TO SUPPORT SYSTEM REFORM?

The analysis above and the experiences of states and communities suggest the kinds of capacities that need to be built to support system reform to improve outcomes for children and families. These include:

- the capacity to engage a broad group of supporters around a bold vision;
- the capacity to take best practices to scale;
- the capacity to transform the invisible part of systems — supervision, regulation, policy, financing and governance — to become good environments for the best practices of small programs;
- the capacity to develop an outcomes orientation that is the frame for system reform;
- the capacity to identify short-term progress while long-term goals have yet to be reached;
- the capacity to support change at the community level without dictating from the top;
- the capacity to support families strengthening themselves, rather than relying on a formal system to substitute for strong families;
- the capacity to sustain momentum for change across political cycles and shifts in priorities;
- the capacity to garner public support for investments in broad, preventive approaches (such as universal access to health care; good quality early childhood programming and family support strategies); and
- the capacity to support individuals at all levels who can lead, take risks and endure.

Inclusive system reform strategies require that these capacities be fostered among multiple audiences and actors. Among these audiences and actors are:

Building Capacity for System Reform (cont.)

- *Grassroots organizations and individuals.* These organizations and individuals can build capacity to unify around a set of outcomes; identify community driven strategies and solutions; and act as partners and allies to public systems that are attempting reform.
- *Health, education and social service providers.* These providers can build capacity to share responsibility for outcomes; share case management and other resources; create a continuum of services; and relinquish some of their individual organizational identities when necessary.
- *Levels of government.* Cities, counties, states and regions need to develop the capacity to manage and staff change efforts; to identify and implement policy, financing and governance in partnership with communities and the private sector; and to support reform across administrations or terms of key individuals.
- *Business leadership.* The business community can be a powerful advocate for and partner in system reform. Key leadership in that sector needs the capacity to provide its expertise in helping craft creative strategies for service delivery, financing and governance. They also need the capacity to be strong voices for a long-term commitment to improved outcomes, to maintain a sense of urgency and vision across changes in the political environment, and to stand with the public sector in taking the risk of change.
- *Potential technical assistance providers.* There are research and development investments that need to be made to support the capacity of potential TA providers to solve problems across states and communities in the areas of management information systems, front-line practice, streamlined intake and eligibility determination processes, alternative financing strategies and governance options.
- *Academia.* Academia plays an important role in pre-service and in-service training of

system workers; and in evaluating the effectiveness of new approaches. Capacities need to be built within academia for cross-disciplinary and collaborative education, for new forms of evaluation to support new forms of interventions, and for dissemination of findings in ways that are of practical use to the field.

- *Policy stakeholders.* Those who set policy, at the national, state and local levels, can support or hinder system reform. Among the policy stakeholders, capacities need to be built to develop and communicate a useful vision and broad strategies to improve outcomes for children; to identify opportunities to promote this vision and strategies through various vehicles (legislation; budgetary policy; initiatives; and regulations); and to build political momentum to support reform.

The next section of this paper highlights some of the lessons that are being learned as these actors and audiences work to build the necessary capacities to support system reform.

II. LESSONS LEARNED ABOUT STIMULATING AND SUSTAINING SYSTEM REFORM EFFORTS

The capacity to put forth a bold vision is a key element of system reform. Used as a deliberate tactic, a bold vision tied to high expectations garners widespread support and commitment to change.

A major topic of debate within system reform concerns the value of establishing a bold vision and high expectations for states and communities engaged in this work. Few would argue against high standards for reform efforts, but there are disagreements about whether the potential benefits of a bold vision are sufficient to take the risk of creating expectations that will be extremely difficult to meet.

Several lessons about the value of a bold vision and ambitious plan were learned through the experiences of states and communities working

Building Capacity for System Reform (cont.)

in The Children's Initiative. The overarching lesson is that a bold vision unites and energizes disparate groups, and, if used strategically, can be a force for sustained efforts in the face of setbacks. But there are also areas where additional capacity to manage change needs to be built among system reform audiences and actors.

In our experience, a bold vision to improve outcomes for children and families has many strengths as a strategic tool for system reform:

- A bold vision has widespread public and political appeal. It excites the interest of neighborhood residents and community leaders and garners high level interest and involvement of key decision-makers including governors and cabinet secretaries and their deputies, the legislature and key private sector leaders.
- A bold vision fosters inclusion, because it defines system reform as a broad effort on behalf of many children and families. The broad appeal of this vision becomes the basis for an inclusive planning and development process. People are brought together who normally would not work together to develop a common set of goals and plans; and they are willing to step outside of their narrowly defined organizational roles on behalf of the bold vision.
- The broad appeal of the outcomes to be achieved fosters commitment to the work necessary to achieve them. Because the vision is worth doing on its face, it motivates actors who may have become cynical or jaded by previous efforts at more narrow reform. Substantial commitments of time and resources are made by many individuals and organizations to the process of making a vision concrete.
- Further, a broad vision has room within it in which to encompass a variety of particular goals for children and families. In the case of The Children's Initiative, the Initiative's broad vision provided a forum within which

champions for other compatible efforts could move their agendas forward and develop detailed plans for integrating, broadening and implementing these other efforts.

We believe that the boldness of The Children Initiative's vision was critical to generating the support necessary to provide momentum. While one could argue, and some did, that such a complex and broadsweeping effort was not doable and spread limited resources too thin, our analysis is that, unlike more narrowly defined efforts, it was able to move beyond being another program for a limited group of people, competing for attention and resources with many similar efforts, to an effort that was part of a framework for thinking in new ways about broad policy issues.

Obtaining and expanding broad commitment to the vision and strategies of system reform is a critical and time-consuming process. It is critical to ensure that the system reform agenda is not owned by one individual or one element of the system (for example, one political party or one state agency). Given that entry into a system often comes at a single point, for example, a particular state agency or in the case of The Children's Initiative, the governor, it becomes even more critical to broaden the base of support immediately and through deliberate inclusion strategies. This process is time consuming because it must allow time for every new actor to weigh and internalize key aspects of system reform.

To achieve maximum benefit, strategies to broaden commitment to the vision should be aimed at building support in multiple communities, among key legislators and private sector leaders, across multiple state agencies and among staff at many levels within state agencies. Private sector leaders at the state and community level and committed communities are essential; they become the force that moves system reform across administrative changes or changes in leadership in key state agency positions. Experience also shows that a broad base of support that includes these

Building Capacity for System Reform (cont.)

constituencies can keep system reform on the agenda through political and funding setbacks. Thus, there are multiple benefits to developing and sustaining broad commitment to a bold vision.

But the boldness of the vision itself poses some special issues. The two most critical, we believe, are the challenge of maintaining a reasonable set of expectations and the challenge of communicating the vision fully but simply.

The experience of initiatives to improve outcomes for children and families, like the experience of other "eyes on the prize" strategies, is that the bold vision creates a set of expectations about progress that must be carefully managed among multiple audiences. In The Children's Initiative, a great deal of effort was expended on developing benchmarks or markers of progress to articulate expectations about progress, and sharing these with all of the Initiative's partners.

In spite of this process, clarity and consensus were never fully achieved about whether or not expectations were being met. In a real sense, the expectations established by the bold vision became both the driving force for the Initiative, and the basis on which some partners could withdraw. Much more attention needs to be paid in initiatives of this kind to negotiating both markers of progress and the consequences of differences of opinion about whether or not they are being met.

In addition, more attention needs to be paid to developing the capacity to communicate a bold vision simply but with clarity about its implications. A key concern is that ambiguity about the vision results in misunderstandings among supporters about the broad sweep of changes required to achieve the goals. Another is that a highly simplified vision appears naive, and thus loses the force of specificity about how children's and families' lives will be improved.

In the experience of The Children's Initiative, individuals at many levels within government

agencies and on the planning teams struggled to determine how to articulate and share the vision and broad strategies, and to understand them at a level to permit specific planning. It took even very highly skilled and motivated system reform actors from six to twelve months to feel that they could communicate their vision and broad strategies for children and families simply but fully.

A commitment to develop the capacity to improve outcomes for children and families at scale (statewide) is critical to keeping system reform, rather than system accommodation, the focus of policy development.

One of the defining characteristics of system reform is that it develops strategies to benefit large numbers of children and families by making fundamental changes in community and statewide systems that serve them. The efficacy of small programs to improve outcomes for children and families has been well documented (see reviews in Schorr; 1988, Wolf and Leiderman, 1989; Leiderman et. al., 1991; National Commission on Children, 1991). But the capacity to embed the best practices of small programs into large systems, *at sufficient scale to make a meaningful difference* in the lives of most children and families, is not well developed. This capacity, commonly referred to as "going to scale," is among the least well understood in system reform.

In part, based on lessons from other system reform efforts, The Children's Initiative called for a commitment to a phased approach with a goal of statewide implementation from the outset, in contrast to a pilot or demonstration strategy. It called for a developmental approach and incremental stages of implementation.

This strategy was designed to move the focus of work from accommodation for small stand-alone efforts to consideration of what needs to be done to make initial efforts sustainable at scale. It was intended to avoid the scenario of setting up rich programs with special provisions that cannot be replicated feasibly. It recognized that

Building Capacity for System Reform (cont.)

some policy changes are only possible and/or efficient at scale (for example, the requirement for statewideness in most Medicaid-funded services, and the burden and cost of maintaining duplicate procedures and systems). The requirement that the service strategy be designed to be implemented statewide prompted consideration of broad policy options, changes in major system processes, and linkages with other reform agendas.

Statewide implementation is of course a risky commitment to make in advance of the evidence of its success. But key actors are willing to plan against this commitment for several reasons:

- Like a bold vision, a statewide system reform effort has value on its face. It engages a wide constituency because it is a statewide effort.
- Some key individuals, with a great deal of influence on system behavior, participate best at the level of policy development or oversight (legislatures, Cabinet secretaries, department heads, school board members, county commissioners). When the intention is to make changes affecting their entire jurisdiction or sphere of action, the reason for their involvement becomes clearer to them.
- The problems to be solved in some cases are easier to address at a state- or jurisdiction-wide level, as noted above. Once this is recognized, planners can see clear benefits to implementing change at scale and to looking for other statewide solutions.

There are obviously several challenges in an initiative that calls for taking a new and not fully tested strategy to scale in a state. The first is to create a sufficiently developmental perspective to allow for mid-course corrections. The second is to develop strategies that would help to ensure that commitments to go to scale could be honored. In the Initiative, a number of policy, governance and financing strategies were being explored whose value is yet unknown. Finally, the experience of other states and reform efforts suggests that going to scale will inevitably call for dual systems for some period of time, while

some communities within a state, or some agencies, are not yet converted. The capacity to operate these dual systems needs to be factored into system reform efforts.

The long time frame for the ultimate payoff from statewide or at-scale system reform efforts is, of course, politically difficult in a climate that rewards short-term and not long-term successes. One of the lessons learned is the critical role that outside agents can play in either fostering the commitment to stay the course, or missing that opportunity.

The true test of system reform is improved outcomes for children and their families. But even in the absence of ideal conditions to measure improvements in outcomes, there is value in an outcomes-oriented planning and implementation process.

A hallmark of recent system reform efforts is their focus on improving outcomes for children and families, with full recognition of the challenges this poses. Translating this focus to an outcomes oriented strategy occurs when decisions about system changes are targeted only to those necessary to improve specific outcomes. This orientation defines system change as a means to an end, not as the end itself.

A true outcomes orientation will work best when the field is able to meet four conditions: when a consensus exists on specific outcomes and a commitment to meeting outcome targets; when clear indicators of these outcomes are widely measured and readily available; when it is possible to attribute changes in outcomes to changes in practice; and when there are sets of incentives that are tied to achievement of outcomes. Though several states and communities have developed the political will to set outcome targets and obtain broad consensus that these targets will drive system reform (Georgia and Minnesota, for example), there are no examples of states or communities in which all four conditions exist.

Building Capacity for System Reform (cont.)

There are several reasons. First, the field has not provided the technical tools to promise a rigorous assessment of impact of a saturation, multi-dimensional intervention on outcomes. In addition, in many outcome areas (for example, school readiness, family functioning, or socio-emotional and cognitive development), the definition and measures of outcomes are controversial or poorly developed.

Partly as a result, in most states and communities there is currently limited capacity to measure and track outcomes for a broad set of children and families, limited by the fact that current information systems generally collect service delivery or input rather than outcome data, are tied to categorical programs that are not linked to one another, and do not link individuals through consistent mechanisms into family units. Finally, there is a general lack of models and experience in devising and implementing systems of accountability based on outcomes. While some states and communities, and individuals in the policy community, are working on addressing these issues, tools and capacities lag behind the demands of system reform work.

Nonetheless, the experience of state and community planners indicates that a deliberate focus on outcomes (an outcomes orientation) has great appeal and benefits for system reform work.

- An outcomes orientation is consistent with private sector, and increasingly, public sector calls for accountability. It fits with outcome goals that have already been articulated (in education reform and health care, for example) by policymakers, advocates, providers, and the business community nationally as well as in most states and many communities. This focus gives credibility to system reform efforts and inspires enthusiasm and commitment in a context of considerable cynicism about the capacity of the public sector to do better.
- An outcomes orientation also provides a means to help system reform partners from

different backgrounds and experiences find a place to begin collaboration. In reviewing outcomes to be achieved, and what it would take to achieve them, actors from different parts of the system have been able to begin to articulate a shared sense of accountability for improving the lives of children and families. System actors use their analysis of what it takes to improve some specific outcomes, increasing school readiness for example, to make the case for the interdependency of their agency on others to achieve agency specific goals. From there, key leaders begin to focus on shared accountability and responsibility as a basis for collaborative action.

These discussions have had two other important side benefits. In the course of discussions about outcomes, and priorities among them, individuals begin to talk outside their specific roles as agency heads, advocates, community representatives, etc. This is a first and important step in dealing with turf issues at the level of planning. The second was that these discussions reveal philosophical differences about family empowerment, community empowerment, the role of professionals, etc. that often go unexamined but influence system reform efforts. An outcomes orientation will put some of these issues on the table directly.

In addition, we have observed the direct benefits of an outcomes orientation as a planning tool for a very complex system reform initiative. For example, in The Children's Initiative, it was among the most useful strategies to keep geographically dispersed partners with different system responsibilities focused on the specific analyses and tasks required to create a reconfigured and reoriented system of services. The outcomes to be achieved, and the analyses developed by planners within states and communities about what would be needed to achieve them, were the guides that they used to identify system gaps, infrastructure needs, changes in policy and regulation; etc.

Building Capacity for System Reform (cont.)

Given the benefits just noted, we argue that system reform efforts should orient themselves to achieving a specific set of outcomes for children and families and should use analyses and planning strategies based on that orientation. But given the constraints, it is important not to overpromise but rather to take advantage of the benefits of the strategy while acknowledging its current flaws and working to overcome them (through, for example, investments in cross-agency information systems and more valid measures of child well-being; see Wolf and Stephens 1993). While this will not be a satisfying solution to many, especially those who perceive a lack of accountability as the key flaw of public systems, our analysis of lessons learned suggests that it would be foolish to abandon an outcomes orientation while measurement tools are being created.

A strategically focused level of prescription, tempered with realism and flexibility, is an important stimulus to the development of capacity for system reform.

There is considerable debate about the level of prescription that is appropriate and necessary for system reform. Some reform initiatives specify outcomes to be achieved but with few detailed directives provided for the design and development of programs to achieve those outcomes. Feedback from these efforts indicates that, in the absence of such guidance, communities and states are often left without sufficient structure around which to plan efforts to achieve their goals and with insufficient information to select the more effective strategies. Many feel they are "reinventing the wheel" at the same time they welcome the opportunity to craft solutions specific to their needs and preferences.

Other initiatives, like The Children's Initiative, define both a set of outcomes to be achieved and the broad framework of a strategy to achieve them, based on research and emerging consensus about next steps to be tried in improving outcomes for children and families. In

the context of an externally-sponsored initiative, they may also impose deadlines and specify benchmarks for continued support. Feedback from efforts with this level of prescriptiveness are mixed. States and communities, and individuals within them, welcome a vision that is consistent with their own agenda; a template that makes the vision concrete and guides planning; and sharing of strategies based on empirical evidence. They are less comfortable with, though they sometimes come to appreciate, requirements that call for specific services whose effectiveness is not fully tested.

In creating reform agendas, we have seen the pendulum shift from very prescriptive approaches imposed on communities to approaches that require communities to develop their own solutions to complex, interrelated and long-standing social and economic concerns. The impetus for this shift is sound — solutions should reflect the experiences and preferences of those involved; the existence of community strengths has long been ignored; since all funding ultimately comes from individuals in communities, individuals in communities should oversee how those funds are used. As part of this shift, there has been an increasing reluctance on the part of funders to prescribe outcomes and frameworks for system reform initiatives.

Our experiences indicate that, despite the concerns that are raised, there is considerable value to a prescriptive approach sensitively applied:

- Providing a framework for a planning process, a service strategy and/or a strategic plan can give states and communities a head start in coming up with specific plans to meet their outcome objectives;
- By explicitly providing evidence and analysis to support the prescriptive elements of the framework, states and communities can better evaluate the appropriateness of elements of the model against their own needs and experience;

Building Capacity for System Reform (cont.)

- Such a framework provides an initial template for a site-specific strategy, a common vocabulary for discussing the strategy, and a way in which to structure internal assessment and planning activities;
- A framework that identifies a set of key decisions creates a sense of urgency and provides points of accountability to others in the system. Fixed deadlines provide points in the process at which progress can be assessed, mid-course corrections made, and gaps and weaknesses in work to date identified and acted upon.
- Finally, in some circumstances, a framework can help bring to closure issues around which there has been considerable planning and discussion but no decisions.

One of the most difficult tasks for planners using a framework that prescribes some elements is to make sure people understand all of the areas that are still highly flexible. Given the state of the art, even the most fully developed model of system reform will have many aspects that cannot be specified in advance (even if one wanted to). This was certainly true for The Children's Initiative framework. But it is exceedingly difficult to communicate both prescription and flexibility at the same time, and experience indicates that different understandings and interpretations of the balance will arise. Clarity, willingness to face the issues raised by prescription, and work on consensus building are necessary to keep lines of communication open and avoid either-or conflict situations.

Our best sense of an appropriate framework is one that specifies outcomes to be achieved and what is known about how to achieve them; specifies appropriate system strategies based on best practices of effective programs; and makes expectations explicit — leaving considerable flexibility in the framework to innovate where solutions are not known and to meet the specific needs and preferences of states and communities.

New forms of partnerships between states and communities can be created to work on reforming child- and family-serving systems. Deliberate strategies are required to change traditional practices of interaction; outside partners can challenge old behaviors and foster new ones.

Systems reform requires that those in control of resources and policy put those resources and policies on the table for consideration. It requires that those who experience the effects of the system and whose lives it is intended to improve put those experiences and preferences on the table to guide decisionmaking. A central challenge for system reform has been to develop strategies that benefit equally from both these perspectives — to get what is sometimes called top-down and bottom-up involvement simultaneously.

The power of a simultaneous top-down/bottom-up approach is that the resulting creative tension can generate new solutions to systems barriers that are outside the capacity or scope of any particular level and can only be developed jointly. The Children's Initiative deliberately chose to require a joint state-community effort to ensure that system changes would both reflect the needs of communities and have the support and input to make them real.

The decision to take this approach was based on lessons learned from other efforts — that it is hard to add either top- or bottom-level engagement and commitment after the fact. If an effort begins initially or primarily from state leadership, real engagement and ownership from communities, families and workers is hard to develop, and the effort is labeled as "government as usual." If a reform effort comes initially or primarily from consumers, neighborhoods or communities, it usually has no authority or power to make substantial system changes, and the changes that are made accommodate local efforts, but do not institute system-wide reform.

A key goal of top-down/bottom-up work is to define a role and set of activities and

Building Capacity for System Reform (cont.)

responsibilities for the top that is supportive but does not give the message that the partnership notion is meaningless and manipulative. Our experience has shown that an appropriate role for states (or other top-level actors) is one of providing nurturance and support, guidance and information, permission and parameters.

While the benefits of working simultaneously at multiple levels are evident, efforts to do so confront the challenges of creating the right balance. Even among people of good will, there is a tendency for the top level (the group that controls resources and policy in the current system - whether the state in relationship to a community, city or county or the community, city or county in relationship to a neighborhood) to back off completely rather than run the risk of appearing to overcontrol or direct the effort. Backing off leaves the other levels struggling to define their sphere of responsibility and the scope of issues and potential solutions that are feasible.

Several aspects of this role are familiar to many state-level staff and officials as extensions of technical assistance strategies. But we have found system actors struggling to figure out how to "give permission" to communities to propose major system changes while at the same time providing some information on boundaries or parameters of what might be considered feasible.

Among state actors, this impasse is sometimes broken by defining system change as core to the mission of a state agency. This engages both state and community players directly in the work of identifying changes necessary to implement service strategies designed to improve outcomes. As a set of principles and strategies for changing systems to improve outcomes is crafted and more widely accepted, state staff can take on more active roles in helping guide the development of specific strategies. However, this is not a linear process and renegotiations about the balance of roles between state and community participants and leaders should be expected.

Participants from other levels are sometimes distrustful of top level involvement and input, seeing this as top-down control in disguise. They may wish to assess options and define strategies on their own, and may be reluctant to ask for or use information or advice.¹ At the same time, participants from the community or neighborhood may not have the experience or access to resources that enable them to engage in discussions as equals with those from the state, or at least have them feeling comfortable doing so.

Dealing with these issues requires multiple strategies. By setting expectations, recognizing the challenges, and intervening when necessary to prompt confrontation of the difficult issues, outsiders can help in the process of negotiating appropriate partnership relationships and responsibilities at all levels.

Other strategies include providing opportunities for individuals and groups at different levels within the system to build relationships of trust and communication — for example, by sponsoring or facilitating conferences or workshops, both in and out of state, and supporting the travel and meeting costs. Attention to detail in making arrangements for such meetings — such as location, in terms of who has to travel and who plays host or convener — also sends messages about the equality of partners. A common vision and focus on outcomes provides an incentive and rationale for working through the process.

Among the most exciting lessons we have learned is that it is possible to use these strategies to challenge historically adversarial relationships between states and communities, and to see new partnerships develop.

The thrust of system reform is to change what is experienced by families, not just the internal workings of the system. The capacity to focus on practice and relationships as the touchstone of system reform requires well developed models of intervention, active participation by

Building Capacity for System Reform (cont.)***consumers and carefully considered human resource development strategies.***

System reform that expects to change what is experienced by families requires cross-system changes in culture and practice, not just reorganization or integration of services. While expansion of critical services is an important component of system reform, it is also essential to change the quality of and interaction among those services. Unless there is some change in the way frontline workers respond to families, there is likely to be little change in real service provision and ultimate outcomes. Workers must be able to respond flexibly, individually, and comprehensively to the families and communities they serve. Without these changes, the current system of categorically provided services will continue to operate in ways that diminish families' own capacities to nurture and develop without solving the specific problems the services were intended to address.

This new way of working with families is intended to reach a broad spectrum of families as well as be more effective in engaging and helping families who are isolated or who face recurrent or multiple problems in trying to nurture their own children. It involves more than making services more accessible or convenient. This new approach to frontline practice works with the whole family, not individuals one-by-one; it does not require that a family confront a crisis or declare itself inadequate in order to obtain the attention and support of the community and its service system; it is holistic in assessing family needs and strengths and in its approach to supporting families; it is respectful of what the family wants and sets as its goals, and uses these as the template for the provision of services.

Since relationship building, modeling, advocacy and support are critical components to working in partnership with families under a new model of frontline practice, workers must have the skills and authority to establish trust and work flexibly with families, including creatively confronting families as they take steps forward and

backward toward their developmental goals. Thus, at the same time the new frontline practice empowers families, it empowers workers and makes better use of human capital in the system.

While this model of frontline practice has been written about and experimented with extensively over the past ten years or so, significant challenges remain to putting it in practice. One challenge is to develop a broad base of understanding about what this new way of working with families actually is and what it will require in terms of changes in the procedures and policies of state, local and private agencies and providers.

Experience on The Children's Initiative suggests that those involved in reform efforts often find it tempting to focus on seemingly more concrete changes (for example, creating family centered locations to deliver services) than on more fundamental but less tangible changes in the way workers deal with families. There is a direct analogue here to systemic reform of schools where actors in the system find it easier to make structural changes than to change the way that teachers deal with students in the classroom.

Based on these difficulties it is critical to provide a broad range of assistance to change practice. Our analysis suggests that several approaches should be expanded and enhanced. First, we believe it takes more concrete examples and illustrations of frontline practice (through videotapes, case studies, role playing, consumer focus groups, etc.) used widely with stakeholders at all levels to develop a solid base of understanding of what this practice is or could be. Further, we suggest that more attention be paid to demonstrating the link between new frontline practice and improved outcomes to build the rationale and the support for making this the cornerstone of system reform. Also, planning and implementation needs to more actively engage consumers (and workers) to realize and maintain the focus on real change at the frontline. At the same time, managers, providers, government officials and business

Building Capacity for System Reform (cont.)

leaders need to be involved in work that connects them with realities of what system reform will require to support new frontline practice. There may be lessons that can be applied to the work of redesigning frontline practice and service delivery from the corporate sector's experience in consumer-driven change.

Creating the capacity to finance reformed systems requires hard decisions about the allocation, deployment and structuring of funds, willingness to broaden and diversify funding sources, and a stable commitment to invest in a strategy to meet new system goals.

One of the most challenging aspects of efforts to reform services for children and families is to create and sustain the investments necessary to implement a more comprehensive and more preventative service strategy. At the same time, the existence of particular financing opportunities should not be permitted to drive service strategy design. Ideally, policymakers should reach consensus on the important elements of a service strategy first, and then develop a financing strategy to support it. However, it is important that the service strategy be perceived as feasible financially, to sustain commitment to the effort itself, to sell it more broadly and to gain the specific commitments necessary to implement it.

The funding strategy of The Children's Initiative built on work of many others, including a number of other foundation-sponsored system reform initiatives. The basic strategies for funding new services for children and families and/or improving existing services include:

- more efficient use of existing resources;
- reshaping the mix of future investments from more expensive services such as institutional or out-of-home placement toward less expensive alternatives or to prevention and early intervention services;
- strategic use of federal funding sources, permitting reinvestment of freed up state and

local funds into prevention and early intervention; and

- investment of new revenues (generated by economic growth, increased general or special purpose taxes at the state or local level, or increased federal funding) into expanded or new services.

Creating the political will and public demand to make broad investments in children beyond the current expenditure level represents a substantial challenge to system reform. The tactic taken by The Children's Initiative diverged from prior efforts in that it attempted to make public the discussion about financing and federal revenue maximization and reinvestment. A public strategy was a natural outgrowth of the Initiative's overall emphasis on inclusive and broad-based planning. In particular, initiative planners in the states and communities wanted to engage private sector and community actors to bring pressure to bear on state government and the legislature where necessary to make commitments to finance system reforms and the newly developing service strategy.

The key lesson learned is that some states and communities are willing and capable of planning broad initiatives that are not revenue neutral; and they are willing to make commitments to redeploy, reinvest and raise new sources of funds to implement them. In The Children's Initiative, public commitments were made to expand the resources available for children and families for basic services (health and child development activities), and to cover incremental costs associated with increased demand based on outreach and breaking down barriers to access of services.

For example, while one state was reluctant to use federal revenue maximization as a component of a financing strategy, it provided evidence of its commitment to fund the Initiative largely from state funds. Other states were willing to increase claims against federal entitlement programs based on the experience of states that had considerable success in expanding services through the reinvestment of

Building Capacity for System Reform (cont.)

increased federal revenues. In some states, a commitment was made by the governor to redirect the vast majority of dollars freed up through federal revenue maximization to broad preventive services. These commitments were possible because of the experience of several states in structuring interagency and interjurisdictional agreements to transfer funds from the revenue-generating agency or activity to other agencies or activities.

Structuring the commitment to invest new resources so that it can endure over time requires careful attention to developing mechanisms to ensure that these new resources do not replace, but supplement future funds. For example, funds can appear to be reinvested in children and family services, but if future budget increases are limited because the "new" money is perceived to meet the need, the net effect is no improvement in overall budget for these services. Controlling future budget processes is difficult, and strategies to obtain and sustain commitments vary tremendously by state, according to the flexibility and authority invested in the executive and legislative branches of government.

Developing new strategies for governance is among the most difficult tasks of system reform. Not only are there few well-tested models to guide this work, but the issues of governance deal directly with the distribution and use of power now vested in the current structure of government. Issues of governance in system reform efforts are a fertile field for experimentation and analysis.

An assumption of many system reform efforts is that continuity of leadership and vision to sustain reform efforts over the long period of time necessary to see the results of change is unlikely to exist absent some formal institutionalized governance structure. Further, many believe that traditional state-level public agency models of governance are not the most suitable to sustain the vision and implement the reforms. Thus, new approaches to governance are often an important part of system reform

agendas, but with few models and limited experience at this point innovation and flexibility are needed.

Specifically, cross-sector (public-private), cross-disciplinary and/or cross-level (state, county, community, neighborhood) governance is often proposed as the mechanism to accomplish critical functions. These functions include the ability to engage a critical mass of leadership committed to the vision and to leading the development of broad-based public support for reform and the investments it requires; to secure bipartisan support and minimize the extent to which reform becomes the focus of partisan or ideological politics; to provide for continuity in leadership and consistency in approach across political and other transitions that affect traditional units of government; to ensure continued meaningful input from all stakeholders, especially families and consumers; to monitor and provide policy guidance to the reform effort, keeping the focus on outcomes as the effort unfolds; and to orient new and expanded leadership and ensure that the governance capabilities and mechanisms adapt to the needs of the effort over time.

The most critical challenge is the lack of proven models of governance that meet the needs of system reform and achieve the expected benefits. In addition, there are a number of challenges that arise when designing and implementing new governance strategies.

A hallmark of system reform is its intention to avoid creating add-on or parallel systems or entities as ends in themselves. This leads to a reluctance to establish separate entities as an immediate response to the governance issue because of the wish to avoid either adding a layer of consultation or recommendation making to existing bureaucracies or marginalizing the reform effort by isolating it from mainstream governance.

The work of governance involves redefining traditional roles, responsibilities and systems of accountability. One of the critical challenges for work in this area is how, within current systems

Building Capacity for System Reform (cont.)

of governance, to obtain permission and create incentives for public entities to trust new governance mechanisms and give up authority and control. This requires new accountability and incentive structures, both for the traditional entities and for the new mechanisms. At the present time, we lack measures of performance or outcomes to support accountability and provide legitimacy for the capacities and functions of governance. What is needed are benchmarks for the execution of governance functions, interim measures of progress in system change and outcomes, and mechanisms for transferring authority and legal responsibility from public agencies to collaborative governance mechanisms. This may involve changes at the federal and state levels where accountability requirements in statutes and regulations are potential barriers to new forms of governance. Further, it means learning how to actively engage and sustain the involvement of non-traditional sectors in governance, while avoiding entrenchment of traditional players and/or *de facto* public sector monopoly.

There is a critical need to support research and dissemination of findings on governance models, especially as these models are developed and applied in practice. What options are being pursued with what results? What are necessary or facilitating precursors to shifts in governance (for example, what role do collaborative bodies play)? What steps or transition points can be expected? What barriers are faced at these points and how can they be dealt with? What are useful benchmarks both in the development of new governance approaches and in the assessment of their implementation and operation?

III. IMPLICATIONS FOR OUTSIDE AGENTS

The capacity to reform systems relies on the commitment, resources and skills of individuals within states and communities. But funders and other external agents can contribute to how quickly and how successfully reform efforts proceed. We believe external agents with clearly

articulated high expectations, who are willing to partner with those in the states and communities with the same agenda, have an opportunity to make a difference in the results of these efforts.

There are three central reasons:

- External agents, because they are generally not associated with any particular political agenda or faction within a state or community, are in a unique position to question current outcomes and call for new ways of doing business in a way that is unifying and not divisive;
- There is considerable pent-up demand within systems for reform that improves outcomes for children and families. But system actors, even when they are strong supporters of system reform, are primarily held responsible for meeting current demand and averting or handling current crises. Opportunities offered by outside agents can be the tool that systems use to permit them to do the work they would like to be doing in any case; and
- External agents have a number of incentives they can bring to the table. These incentives, described in more detail below, are often used to capture the attention of organizations, institutions and individuals who might otherwise stay away.

One of the key lessons learned by the field is how central outside agents can be to building the capacity for reform to move forward against its many resistances. These resistances include intentional or unintentional bureaucratic resistance to change; the difficulty of staffing and financing reform and meeting current demands on the system simultaneously; a healthy skepticism based on the limits of available evidence about the ability of reform to meet its goals; and the limited attention systems and individuals are willing or able to give to addressing difficult problems that take a long time to resolve.

In helping states and communities move forward against these forces, external agents play critical

Building Capacity for System Reform (cont.)

roles that go well beyond the money they often provide:

- One of the most critical roles that outside agents can play in system reform efforts is to hold out a *bold vision* that provides the challenges and incentives for tackling major issues. By holding up the vision as the touchstone, outside agents can continue to call the question when it appears that tough issues are being pushed to the background. As outsiders, they can act as lightning rods, taking the heat for raising sensitive, difficult issues, and providing those within states and communities political cover for taking the risk of embarking on a major reform agenda.
- Similarly, outside agents can bring *heightened visibility to the overall goals* of system reform. The national stature of an outside agent can confer prestige on internal efforts, validate goals and strategies for reform, and provide opportunities for publicizing the reform agenda within the state or community.
- Outside agents can provide the *continuity and long-term commitment* necessary to see system reform efforts through. This role should not be limited to providing a sustained flow of resources for change activities, although that is itself an important contribution. Long-term commitment also gives legitimacy to an effort that may not show clear results within the relatively short time frames generally possible for elected and appointed public officials. The involvement of outside agents can help keep the vision, goals, issues and strategies of reform on the agenda through various political transactions.
- Further, outside agents can negotiate *targets and benchmarks* that would be difficult to impose internally, or if they were, might be met with defensiveness or hostility on the one hand or ignored on the other. Thus, outsiders can create a sense of urgency, impose deadlines that catch the attention of decision-makers, and in general give a sense of movement to the reform process.
- Another critical role for outside agents is to *support the development of internal leadership and capacity* for system reform. A high profile agenda and strategy promoted by an outsider may be the catalyst for individuals looking for new challenges and opportunities to exercise leadership. Outside entities often provide funds and other resources (such as time away, convening, travel expenses) for policy development and collaborative planning that are otherwise not available.
- Related both to development of internal capacity and support for reform strategies is the role of outsiders in making available *cross-system expertise and experience*. Outsiders can be an important source of *information and technical assistance*, by investing in the research necessary to identify proven or promising strategies, next steps and areas of innovation and proven experts with the necessary skills to apply that information to the needs of individual states and communities. This work puts internal efforts into a broader context and, not only potentially reduces the resources expended within each state or community to glean what is known about what works, but also reduces the likelihood that resources will be invested in less than optimal approaches.
- Outside agents can provide those in states and communities working on system reform with *links to other individuals or organizations with the power to facilitate change*, for example, agencies, lawmakers, and policymakers at the federal and state levels. Further, links can be facilitated with other system reform efforts across the country, providing both the stimulation and the forum for conversations and debates about learnings and potential mutual support.
- Outside agents can *model collaborative behavior and new forms of partnerships* between those with resources and those who are using those resources to reform systems. This is no easier for outside agents than for any other institution or organization with its

Building Capacity for System Reform (cont.)

own identity, mission, agenda and culture. But it is reasonable to expect that every participant in system reform will struggle with these issues internally, and in their partnership with others.

As the above list indicates, recognition, legitimacy, knowledge and technical support broadly defined are just as critical for system reform as additional and flexible funds. The systems that are the target of reform currently expend many times more than any external funder can provide; even the internal investment in change during planning and early implementation far surpasses any resources an outsider could commit.

At the same time, investments by outsiders are essential to create the capacity for systems to reform themselves while still meeting their day-to-day demands. Our observation suggests that necessary investments are of several kinds:

- Investments in building the skills of those involved directly in systems reform work;
- Investments that provide additional capacity to do system reform work — staff, commitment, political capital;
- Investments that are a catalyst or lever to stimulate redirection or reinvestment of system dollars toward the service strategies called for by system reform plans;
- Flexible funds that can be used to finance aspects of reformed systems while system funds are being reallocated or raised to provide long-term capacity; and
- "R&D" investments to support the development of new technologies, and new financing, governance and public will strategies that can benefit multiple communities and states.

These investments, informed by lessons learned from those who are at the front lines of system reform, can help build the capacity to improve

outcomes for children and families on a broad scale.

APPENDIX:

THE DESIGN OF THE CHILDREN'S INITIATIVE

The Children's Initiative defined systems reform against a broad set of outcomes for children and families: improved child health, improved child development, reduction in barriers to adequate school performance, and improved family functioning that promotes children's healthy development. The Initiative promoted principles and service elements that were deemed necessary to achieve those outcomes, based on available research, best practice, and emerging consensus about next steps to be tried.

In particular, the Initiative asked participating states and communities to develop broad capacity to:

- Create *a system of inclusion* by which every child in a community and his or her family will be visible to a caring professional and receive services to ensure safe and healthy development.

This system would include broad and effective outreach to pregnant women and families with children — at a minimum contacting all families of newborns and at school registration — to conduct appropriate screening and provide necessary information and follow-up services.

- Create an *appropriate continuum of services* for children and families.

This continuum called for universal access for children to health care as well as critical health, education and social services of sufficient quality and quantity to meet demand — including nutritional supplements, child care and child development services, and family preservation services.

Building Capacity for System Reform (cont.)

- Carry out a *new form of frontline work* with families under a new model.

This model was family- (rather than child-) focused, started from family strengths and goals rather than from family deficits and system goals, was comprehensive in addressing family needs, and provided services in accessible, family-friendly environments such as family centers.

- *Change procedures* associated with determining eligibility for and delivering services to families to make services more accessible, acceptable and appropriate for families, including streamlining application procedures and sharing information across systems.
- Support *capacity building and linkages* with other programs and services necessary for families to nurture their children and improve child outcomes — including housing, substance abuse treatment, and employment and training programs.

Critical to the system reform goals of the Initiative was the expectation that the Initiative's service strategy, as developed and modified over time to meet local and state needs, would become the child-serving approach across the state and be available to serve all or most children and families.

The Children's Initiative, in calling for a reoriented and reconfigured system of services for children, also called for the necessary changes in policy, financing and governance to support it.

To improve outcomes and create necessary service capacities, the Initiative called for a new form of partnership designed to change the rules by which rules within systems serving children and families are made. The goal was to expand and shift the locus of decision-making and resource allocation for those systems to include substantial partnership roles for local communities and the private sector (both for-profit and non-profit), moving significant

authority to cross-sector and community-based entities. One of the critical roles for these partnerships was to identify and respond to system issues that limited or posed barriers to good frontline practice, and ultimately good outcomes. These issues included financing issues related to the generation and allocation of resources, system capacities (for example, training and supervision of workers in new forms of practice, or information linking or sharing across systems), and policies and regulations that inhibit flexibility and accountability at the worker and/or community level.

This approach to system reform was bold, innovative and by its nature risky. There were few models to draw upon for experience. For this reason, the Initiative was designed to be implemented as a partnership between the funder and the states and communities, together crafting a new way of serving and supporting children and families — guided by a framework but with the support and encouragement to assess and innovate. Participants in the partnership recognized from the beginning that this was a pioneering effort, that much would be learned from the initial decisions and mistakes that would aid both the participating states and communities and the broader policy community.

Notes

- 1 This may be true even among equals—for example, urban and rural communities within the state may feel they are facing very different circumstances and are on an uneven playing field in terms of getting state-level attention and resources.

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