

Looking for More Players to Expand the Social Safety Net: Beyond Privatization, New Ways to Engage Community and Faith-Based Organizations in Public Programming

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Abstract

This paper reviews recent US experience attempts to expand participation of community and religiously-based organizations in public programming, drawing lessons that might apply in other national contexts as governments attempt to fill gaps in human services. The paper addresses issues of capacity building for new participants in public programming; strategies for effective contracting and contract management; and consideration of new forms of collaboration between public agencies and small, locally-based organizations both to ensure compatibility with public objectives and to move beyond the singular focus of contractual procurement of services. The paper draws on research on recent US initiatives, including the author’s work evaluating faith-based and community organizations’ (FBCOs) role in disaster relief and in providing employment-related assistance and other programmatic services for a range of social and behavioral health issues. The analysis suggests lessons for partnering with FBCOs and other non-governmental organizations (NGOs), and new ways to engage such organizations in order to exploit different capabilities and to create access to a menu of services in an effective network of local organizations and other professional providers.

INTRODUCTION

We live in an era of government downsizing and privatization of public services—whether because of increasing demand for services beyond public capacities, philosophical shifts about the role of government, or because of the seduction that better-and-cheaper services can be found in the private market. The search for new providers to expand the social safety net crosses borders and social welfare systems. In developed social service systems, shrinking public dollars and increasing privatization has heightened the need for well-honed strategies to select and monitor non-governmental organizations (NGOs) supported by public funds. In less developed social service systems, NGOs may be a very attractive option for filling wide gaps in services absent the easy buildup of public systems; but they pose additional challenges for effective partnership with government. In either context, effective interactions between public and non-governmental efforts, both formal and informal relationships, can be the key to reaching individuals in need and connecting them to appropriate services. Beyond most privatization discussions, this paper considers relationships between government and NGOs, particularly small independent operations, which may be non-contractual but as important as formal contractual arrangements in connecting individuals with needed services.

In the US, state and local authorities have contracted with both secular and religiously-based NGOs for many years, although services delivered with public dollars must be without religious content. Faith-based and community organizations (FBCOs) play many roles, from emergency disaster relief, short-term emergency food and other assistance, to delivering sustained, programmatic services in health, education and other social services. They can be highly professional or simply motivated by a mission to help, operating with lay staff or volunteers and ad hoc and reactive as need presents. They may be locally based or non-native;

the latter is often typical in disaster response. They may have well-developed connections to public authorities and be well coordinated with the larger human service system in the communities in which they operate, or be deliberately independent of other providers and public authorities. These variations are key to understanding what resources they can offer, and how to create effective partnerships between government and non-governmental efforts. The lessons apply cross-culturally and in some measure cross-nationally.

In China in particular, current interest in expanding participation of NGOs in public programming accompanies growing efforts to privatize services that have been characteristically delivered by state authorities. The effort raises challenges in identifying organizations competent to deliver desired services and in cultivating new ones for public funding; challenges in developing solicitation and contract structures for public authorities with little practice contracting out for social services, and for local non-profits with little practice operating under public contracts; challenges to monitoring contract compliance and broader performance measurement; and challenges to evaluation in order to identify programs and practices worthy of new or broader support.

In the US the interest in FBCOs specifically, and especially attracting FBCOs that had not previously received public funding, achieved heightened prominence during the presidency of George W. Bush. This paper reviews attempts to expand participation of FBCOs in public programming following the Bush initiatives, and suggests new forms of collaboration between public agencies and small, locally-based organizations that would ensure compatibility with public objectives and move beyond the singular focus of contractual procurement of services to multiple forms of collaborations that might be applicable across national contexts.

Background

In the US, states have been contracting with a wide range of organizations, from large service providers to small community-based organizations, for many decades and to procure a wide range of human services. That practice has been recently accelerated by two changes in federal law governing welfare and social services policy.

The first was the end to the federal entitlement to cash and other services for low-income children and families and in its place creation of a lifetime limit (or less at state discretion), and devolving the federal program into block grants to the states, thereby granting states wide discretion around the breadth and content of services. With an emphasis on work requirements and lifetime limits to assistance the new law, the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) enacted in 1996, created greater demand for a variety of employment and social services and greater incentive for states to find additional providers at potentially reduced cost to help welfare recipients achieve self sufficiency.¹

The second, contained in PRWORA, created a major change in US policy concerning public funding of religiously-based organizations. The US Constitution prohibits any law that would result in the establishment of a religion and guarantees the freedom to practice any religion as a matter of personal right. These two principles are regarded as ensuring the continued separation of church and state. Public funding, therefore, whether to religiously-connected institutions or otherwise, has historically supported only services without religious content. Many of the largest social service programs in the US are operated by organizations with religious roots (e.g., Catholic Charities, Jewish Family Services, Lutheran Social Services)

¹ PRWORA, P.L. 104-193, replaced the Aid for Families with Dependent Children (AFDC) program, an entitlement to cash assistance to eligible low income parent and children, with the Temporary Assistance to Needy Families (TANF) program, a block grant program, which therefore could be limited over time.

and have received federal, state and/or local funding for many decades, delivering services devoid of religious content and offered regardless of an individual's religious affiliations.

The new provision in PRWORA, commonly referred to as “Charitable Choice,”² permitted religious organizations to receive public funding and maintain their religious character in places where publicly-funded services were delivered (e.g., maintaining religious symbols and iconography, using religious preference in hiring practices). Charitable Choice made no change in other requirements for separation—that is, programs receiving public funding cannot proselytize or use public funds for worship, but it does permit a loosening of the strictures that historically ensured public funding for programs entirely secular in character. The new law also included the right of a beneficiary to an alternative provider (and required notice of that right), presumably to ensure that beneficiaries would not be subject to services whose religious character was discomfiting, offensive, or in any other way implicitly coercive. Whether this loosening in the law, combined with administrative changes implemented by the Bush administration, succeeded in bringing new players into the social safety net or changed the character of services delivered with public funds has been the subject of much research, discussed below.

Charitable Choice drew relatively little attention, and perhaps resulted in little change in local practices, until recruitment of FBCOs, particularly religious organizations, became the centerpiece of President Bush's domestic policy.

Based on the belief that such organizations had been inappropriately excluded from public funding (White House 2001), the administration embarked on an aggressive effort to

² Charitable Choice was contained in Section 104 of P.L. 104-193.

implement Charitable Choice and an unprecedented effort to recruit new, especially religiously-based, organizations into federal programming, using a variety of strategies to assist them in capacity building and competing for federal funding. The White House created offices in eleven cabinet agencies (there are now 15 centers) charged explicitly with advancing the faith-based initiatives, issued regulations to implement the Charitable Choice provisions, created mammoth email lists (at one point a boast of 50,000) to issue alerts of funding opportunities, held multiple national and regional conferences and teleconferences to dispense both enthusiasm and hardcore technical assistance in the ways and opportunities of government programming, and generally made the faith-based initiatives omnipresent in the operations of federal agencies. In addition, the administration created direct grant programs under the Compassion Capital Fund (CCF)³ to support intermediary organizations that would provide technical assistance as well as small sub-grants to local FBCOs for capacity building and partnerships, provided modest (up to \$50,000) direct grants to FBCOs, and provided other funds to state governments in order that they might dispense vouchers for individuals to purchase services themselves.⁴

The Obama administration has continued faith-based and community initiatives, but with an emphasis on partnerships—both funded and unfunded collaborations between government

³ The Compassion Capital Fund (CCF) awarded 1285 grants between 2002 and 2009 through three programs intended to strengthen the capacity of NPOs to provide services to low-income communities and families. The Demonstration Program (2002-2010) distributed grants to intermediary organizations (up to \$1M per year for up to 3 years) to provide training and technical assistance to FBCOs and to issue small sub-grants to less experienced organizations. The Targeted Capacity Building Program (2003-2007) provided one-time mini-grants (up to \$50,000) to NPOs directly. The Communities Empowering Youth (CEY) Program (2006-2010) used training and technical assistance by lead organizations, as in the CCF Demonstration program, to build partnerships among NPOs addressing youth and gang violence and child abuse and neglect.

⁴ The Access to Recovery (ATR) demonstration provided grants to states to provide vouchers directly to individuals to purchase their own substance abuse treatment services. The use of vouchers provided directly to individuals, although with public funds, sidesteps the restrictions on government purchase of religiously-based programming.

and FBCOs, a particular interest in FBCOs' potential role in poverty alleviation, and an interest in evaluation to identify the most effective models.⁵

While the policies continue at a somewhat lower level and certainly lower visibility, it is the full press effort in the Bush years that provides a unique opportunity to examine the mechanisms and limitations of involving new nongovernmental players in a public agenda for delivering human services. There has been much written on privatization and on the utility of using community-based organizations to deliver human services, and a growing literature on the role of religion or "faith"⁶ in serving certain populations, but analysis of the Bush effort provides an opportunity to assess these issues combined in an unprecedented effort to attract new players into the public system.

The discussion that follows here is less about religion—a particular but important preoccupation of the American experience analyzed in detail in other assessments of the Bush initiatives (see Kramer 2010 for a review of the literature on the "faith factor"), and more about bringing small, non-governmental organizations into an effective network to fill critical gaps in human services. That network includes both formal contracting arrangements—using public dollars to fund privately provided services, and other formal and informal arrangements that dispense no public dollars but nonetheless create critical linkages between non-governmental

⁵The Obama administration created the Strengthening Communities Fund (SCF); like CCF, SCF is aimed at capacity building rather than direct services, but uses grants to states, local and tribal organizations to partner with FBCOs, and grants to intermediary organizations to provide training and technical assistance to nonprofit partners. SCF awarded \$46M in American Recovery and Reinvestment Act funding to communities to contribute to their economic recovery, including help with jobs and job retention, and to reach disadvantaged and hard-to-serve populations with information and services. SCF also includes an evaluation component (US HHS 2009).

⁶ The paper uses the term religion and faith interchangeably. In the US, the use of the term faith has become increasingly popular to encompass more broadly both formal religions and other forms of religious or spiritual experience. National polling suggests that religious affiliation in the US has weakened but affinity for and identification with faith or spirituality has not, and the US remains a highly religious society compared with other industrialized nations (Pew 2002).

organizations and government in order to create a continuum of needed services. Some aspects of involvement with religious organizations is relevant to considerations of cultural competence and ensuring access to services for diverse populations within local areas.

The paper addresses issues of capacity building and sustainability for new participants in public programming; ensuring compatibility with public objectives, particularly around accountability and relationships with the larger human service system; and consideration of multiple forms of collaboration between public agencies and small, locally-based organizations, which may be instructive for many contexts, particularly across cultural (or national) contexts.

The paper addresses two questions central to any quest for new players in public programming:

- Did the new initiatives, particularly those aimed at capacity building, recruit new players, or affect the mix of services or who gets served?
- Are there other ways to think about collaboration and partnership that might tap new players, and a blend of capabilities, in order to create a continuum of services for populations in need?

The paper draws on the literature that tracked implementation of the US initiatives, and the author's work evaluating FBCO responses in disaster relief, providing employment-related assistance, and providing formal programmatic services for a range of social and behavioral health services. The analysis suggests new ways of thinking about partnering with FBCOs and other non-governmental organizations, and issues that might inform decisions about how to engage such organizations in public programming.

RESEARCH FINDINGS

Recruiting New Players

The allure of using locally-based organizations to deliver human services reaches beyond interest in reducing the size of government and the cost of public services. There is a rich literature on privatization, including its effects on cost-saving, which is not the focus here (see Winston, et al., 2002 for a review of privatization of welfare services). The rationale for seeking new providers under the Bush initiatives was largely to seek providers with unique talents, which it was assumed had been excluded from public contracting until the 1996 changes in the law. Community or neighborhood-based organizations are often perceived as more legitimate than traditional service providers, which may be larger, more professionalized, more bureaucratic, and overall more off-putting than familiar grassroots operations. Their legitimacy may also come from their familiarity with local custom and culture. Operating often ad hoc and with little or no funding outside funding, particularly in case of religious congregations, they can also be administered with minimal record keeping and minimal attention to vetting potential clients, which in turn may make them more accessible to individuals in immediate need or who are skittish about accepting help and for whom invasive questions might jeopardize the process of establishing trust. In addition, religion or spirituality, which may affect both organizational culture and the style and content of services, has been cited as an important component of program effectiveness, particularly in programs aimed at behavioral change, such as those addressing alcoholism, drug abuse or criminality.

In the US, faith-based organizations, including congregation-based operations, are critical components of the social safety net, particularly in rural and underserved areas, and increasingly

relied upon for food, clothing and other emergency services in time of economic crisis, as they have been since the 2007 Recession. Recent survey work attests both to their essential role in the social safety net and to the precariousness of their funding (Allard 2009a and b).

Because some FBCOs deliberately maintain low administrative burdens, they cannot easily adjust to the strict monitoring and reporting requirements that come with public funding, which makes becoming public contractors considerably more challenging or they simply have no interest. Many large religiously-based providers that delivered sustained, programmatic services without public funding prior to the change in the federal law continued to resist public funding. For example, in an Urban Institute study of employment-related services delivered by FBOs since Charitable Choice, a few, usually large, congregations in the five cities studied provided extensive programmatic services similar to services provided by secular organizations, but none chose to seek public funding (Kramer et al., 2003a).

Effects of the New Policies

With the enactment of Charitable Choice and the emphasis of the Bush initiatives on faith-based involvement, much of the research aimed at tracking the effects of the policies was concerned with involvement of faith-based organizations (FBOs) specifically. Nonetheless, two overarching observations can be made that are more broadly applicable to bringing small programs and those new to the requirements of public funding into the tent.

First, despite the most aggressive and persistent efforts to identify and assist FBCOs who had not previously been involved in government funding, contracting with FBOs was not, overall, dramatically increased, although there are other indications that specific programs and perhaps individual states and local areas might have been more significantly impacted.

Second, there is some evidence of the effectiveness of capacity building efforts for small organizations, which might eventually make them good candidates for public funding or other sorts of collaborations. But the efforts aimed at capacity building did not result in substantial increase in public funding for the organizations that received help. Whether they will translate into a new generation of programs capable of receiving public funds under public rules is a question that will need to be assessed over time. Researchers find several reasons that make it challenging for small organizations to comply with public rules and bringing such organizations fully up to standards that need to govern public funding is an arduous task.

Changes in Public Funding

On the first point, despite aggressive use of technical assistance, through conferencing and using intermediaries to provide direct, hands-on assistance and sub-grants to a range of smaller organizations, participation appeared to be limited by both organizational capabilities and interest. A 2006 analysis conducted by the Roundtable on Religion and Social Welfare Policy, a multimillion dollar multiyear project charged with tracking the faith-based initiatives, found that the FBO share of total social service grants between 2002 and 2004 grew from 11.6 to only 12.8%, and remained a small portion, about 17%, of total funds (Montiel and Wright 2006) in nine federal agencies studied. Another Roundtable study found that only 8% of 140 federal non-formula competitive grants from the departments of Health and Human Services, Housing and Urban Development, Labor, Justice and Education went to FBOs in FY 2003 (Farris, et al. 2004).

While the overall effects of the new policies were modest, changes might vary across different programs and localities. For example, in the 2006 Roundtable analysis, FBOs receiving

grants in the Department of Labor grew from less than 1% to 30% between 2002 and 2004 (Montiel and Wright 2006). Farris et al. (2004) documented that HHS increased the number of awards to FBOs by 41% and spending by 19% in FY 2003, though this was still a miniscule portion of HHS's total budget. Another study of early implementation of Charitable Choice found that contracting to FBOs under the TANF program could range from less than 5% in 23 states, to more than 15% in 9 states, and 32% of total contracted funds in one state, but the last represented only 5% of all contracts to NGOs in that state—that is, a single contract to a large provider operating in many localities can dominate the allocation of funds across the state (GAO 2002). GAO's 50-state survey found that only 8% of the \$1B in 2001 federal and state TANF funds supporting NGOs went to FBOs (GAO 2002). Another study of the early implementation of Charitable Choice in 15 states found that funds spent under Charitable Choice were mostly to small contractors and nearly half were not new to federal contracting (Green and Sherman 2002).

How these shifts affect the mix of services and who gets served was not studied and remains an important question for assessment over time. For example, local congregations have figured prominently in CCF demonstration sub-grantees but how that affected who got served or who might not choose to receive services from these programs has not been studied. On a related point, researchers documented a shift in attitude in some states and localities broadening the embrace of religious institutions in public programming and more interest in programs that would have not been considered for public programming in the past (Sager 2010; Kramer et al. 2005).⁷ As the interest in tracking FBO participation has waned since the Bush initiatives, it is not clear whether interest in engaging FBOs has waned as well. But preparing small

⁷ By 2007, Sager (2010) found that 271 new state laws had been enacted, 39 states had state liaisons and 22 states had dedicated offices for faith-based efforts. Sager (2013) finds the number of state offices is now over 30. In an in-depth three city 2005 study of the implementation of Charitable Choice, some officials noted a marked loosening in attitude toward religion in public programming researchers note

organizations and those new to public funding remains a challenge, whether faith-based or not, as discussed below.

Operating under Public Rules

Several studies point to the difficulty of subjecting small organizations to the rigors of operating under public rules. Burdens attend to both contracting agencies and providers. In addition to detailed record keeping required for financial audits and other program monitoring referenced earlier, many public agencies have increasingly chosen to use performance-based contracts for procuring human services, which require satisfying performance benchmarks (e.g., numbers of clients served, services provided, or time frames for service delivery) as a condition of payment. In reviewing the experience of welfare-to-work programs, researchers found that performance-based contracts created challenges for both sides: contracts need well-thought out goals, well-specified performance measures, and strict contract oversight to monitor compliance—challenges for funding agencies; providers need payment terms that are sufficiently realistic that they can meet them (Kramer et al. 2003b). For small programs with very little financial cushion, any threat to predictable cash flow is a problem. For example, in one study of programs serving high-risk youth, public justice agencies concerned about the capacity of local organizations to deliver services were reluctant to send referrals, denying the organizations the even client flow on which they depended for cost reimbursement (Hartman 2003). Another study cited the large up-front costs and high administrative costs to explain the challenges in FBO involvement in Medicaid-funded services (Fossett and Burke 2004).

In addition, several studies point to the considerable difficulty relating to required separation of religious from other activities (Green and Sherman 2002; Rogers and Dionne 2008;

Kennedy and Bielefeld 2003; Lanza-Kaduce and Lane 2007). Although the role of religion is not a focus of this paper, awareness of steps that have been taken to remove religion from program content may have applicability to operating in cross-cultural contexts as well.

Building Capacity in Small Organizations is a Long Term Project

Three evaluations were conducted of programs operated under the Compassion Capital Fund. All suggest that while capacity building efforts for FBCOs had some measurable positive effects on organizational processes, none resulted in increased federal funding.

Abt Associates (2010a) conducted an outcome evaluation of NPOs that received technical or financial assistance services from CCF intermediaries between 2003 and 2005. These were largely established organizations (nearly three-quarters had 501(c) (3) status) and about half provided direct social services. Sub-grantees made some small improvements in organizational processes (e.g., somewhat more stable leadership, more formalized human resources policies), while some made more substantial improvements (e.g., 46% had written strategic plans at baseline, and 70% had such plans 15 months later; 56% used formally measured service outcomes at baseline, and 69% did at follow-up), all of which might render them better equipped to handle public funds. Sub-grantees developed a variety of financial management tools and governance practices—more characteristic of the new organizations than the more established. How much of the improvements to attribute to the capacity building in the demonstration is not clear: over three-quarters had a prior relationship and had previously received training from the intermediary; others had received financial or technical assistance before. Also, technical assistance and training varied considerably (from 8 hours or less to 100 hours of more, and from 4 hours or less to 30 hours, respectively).

The assistance did not result in new public funding. Fewer NPOs sought new funding sources (75% at baseline and 67% at follow-up). Those that had not previously sought federal funds increased the number of grant applications, but only 32% of the 439 surveyed applied for federal grants for the first time and only 20% received funding. In short, capacity building did not turn the NPOs into contractors for public funds.

Abt Associates also conducted an impact evaluation on 10 intermediaries and 454 NPOs in the 2006 CCF demonstrations, a mix of large and small, but also largely established and growing organizations.⁸ In other ways the NPOs were candidates for organizational development (e.g., had largely part-time or volunteer staff, used paper records). Change in organizational capacity was assessed 15 months after random assignment (Abt Associates 2010b and 2010c).

The NPOs that received capacity building services had higher levels of growth in organizational, program, revenue and leadership development, as well as community engagement (although the evaluation cannot distinguish which of these areas mattered most). Small organizations were more likely to improve in organizational development (e.g., organizational assessments, performance reviews, financial systems). Generally larger organizations showed quite small but statistically significant changes in partnership arrangements (e.g., with business or educational institutions).⁹ This last finding is worth

⁸ The program group received capacity building services; the controls could receive group training as could others in the community but not technical assistance or sub-award. Four-fifths had or were in the process of attaining 501(c) (3) status; a third were less than 5 years old and a third were 16 or more years old; two-fifths had revenues of >\$150,000; over half had added or expanded programs in the prior 12 months; 80% had existing partnership arrangements in the community.

⁹ Significant results were found in 22% of organizational development measures (e.g., written strategic plan, job descriptions, dedicated financial manager), but not, for example, in number or hours of staff or volunteers, or financial management procedures, such as regular budgets or audits. Only 12% of program development measures

emphasizing. Partnerships between FCBOs and the larger human service system likely depend on well developed or well articulated processes on both sides. Perhaps most important, the gains were not likely sustainable without continued assistance.

Finally, nearly one-fifth of the program group received federal funding for the first time—but the control group received significantly more funding at follow-up from state or local government (average \$33,000 compared to \$9,700K). Again, capacity building efforts may help produce important management improvements, but they do not easily translate into new public contractors.

Creating Functional Partnerships

The Communities Empowering Youth (CEY) program, funded under the Compassion Capital Fund, was aimed at building capacity toward ongoing collaboration between a lead organization (generally a larger and more established service provider) with experience in gang violence, youth violence, and child abuse and neglect, and multiple (usually smaller) nonprofit partner organizations who also had some experience in gang violence, youth violence, and child abuse and neglect. As in other CCF demonstrations, the lead organization worked with the NPO partners to build organizational capacity rather than explicit services, although services might have been expanded as a result of strengthening the partner network. Beginning in 2006, CEY provided three-year grants, averaging about \$250,000, to 100 lead organizations (31 were added in 2007), who in turn worked with a number of partners (average 7), most of whom had

showed significant results (percentage of organizations that kept records on services and electronic records on referral sources), but not in clients served or program expansions. Nearly two-fifths (39%) of the program group showed significant gains in revenue development (e.g., written fundraising plan, hired a grant writer, or sent director or staff to fundraising training).

relationships prior to CEY; the leads also re-granted at least 25% to their partner organizations (Abt 2011).

The evaluation of CEY included a baseline and two follow-up surveys over 30 months, and in-depth case studies of 10 grantees and their partners. Capacity building efforts were focused on leadership development, organizational development, program development and community engagement. Evaluators distinguished four types of collaborations: network—the lowest level of integration; support group; alliance; and coalition—the highest level, evidencing varying levels of trust, communication and joint decision making.

The evaluators found that the majority of the partnerships operated only at the network or support group level, with little integration of services or resources. Nine of the 10 partnerships in the case studies took steps to develop themselves as a unit, but by year 3 the partnership was more a vehicle for improving capacity of their own organizations. For small organizations, attending to their own organizational development left little time to focus on the needs of the partnership. While the partnerships helped expand knowledge of each others' services, only two had conversations directly about collaborating on services and joint activities. Roles and decision making did not change over the three years studied; most made only minimal decisions as a collective (e.g., selecting group training topics). Researchers found that at the start, 8 of the 9 newly established partnerships contemplated cross-agency referrals, a new jointly funded or staffed service—and four did so (e.g., new drop-in program, traded space of staff, or a media campaign to promote the partnerships).

Overall, as with the process evaluation of CCF grantees described above, the majority did not expect the partnerships to continue beyond the grant, although the new relationships, services

and referral agreements could “provide a foundation for future collaborative efforts.” According to the researchers’ observations, what is clear from the CEY evaluation is that the program lacked both clear definitions and approaches for partnership capacity building (Abt 2011).

New York City’s Charitable Choice Demonstration Project, operating from 2000-2003 used FBCOs to establish contact with welfare clients who had lost or were at risk of losing their benefits because they had failed to meet work requirements, and because of the consequent relatively small reduction in assistance (for only the adults on the case) may not have had sufficient incentive to clear their sanctions. Neighborhood churches under the leadership of a larger organization were to locate these individuals and help them cure the sanctions. A 2002 study found that reaching clients was more difficult than expected due to their frequent moves and loose connections to neighborhood groups, including churches. Also, similar to other studies cited above, the FBOs were skilled at case management but were less skilled at employment-related activities that might have helped remove the sanctions, and the missions and objectives of the FBOs and city often clashed. Smaller churches were also less able to meet the performance-based contracts under which the demonstration operated, and could not compete with other organizations for new contracts once the demonstration ended (Monteil 2004).

There are three lessons to take away from this last experience. First, the expectation that locally-based organizations are in close touch or more easily accepted by populations in need may be less predictable than assumed. Second, as in welfare-to-work experiences noted earlier, small organizations cannot easily operate under performance-based contracts, in some cases because the terms of the contracts are insufficiently clear for them to meet required benchmarks, because they are less able to withstand uneven reimbursement flow, or simply because they are less able to meet broader requirements than simple hands-on initial case management. Finally,

as with evaluations of faith-based employment programs, FBOs may have particular skills in case management or creating supportive environments but lack specialized skills, such as job training or placement, of professional service providers.

Two examples of partnerships between public agencies and faith-based organizations were more successful and may suggest additional lessons.

Ready4Work, a three-year pilot demonstration ending in 2006, attempted to link offenders returning from prisons to FBOs in order to offer job readiness, job placement, mentoring, case management and other transitional services. The demonstration operated in 17 sites and enrolled nearly 5,000 in services for one year. Participants were majority African American, somewhat younger than the average for ex-offenders and had slightly better education and employment records, but also had a high probability of recidivating (half had five or more arrests). As with other models under the faith-based initiatives, the pilot used a lead organization (six faith-based and three secular nonprofits) and partnerships of local faith, justice, business and social service organizations. Although not a random assignment design, participants showed significantly better outcomes compared to Bureau of Justice Statistics recidivism benchmarks—about half the national re-incarceration rate at 6 months and 34% lower at one year (Farley and McClanahan 2007).

The National Faith-Based Initiative for High Risk Youth, modeled on Boston's Ten Point Coalition,¹⁰ was a 15-site demonstration of partnerships between the FBOs and the justice

¹⁰ The Ten Point Coalition was begun in 1992 in Boston in response to an explosion of youth violence and counterproductive police practice. The Coalition was a group of African American ministers who functioned as intermediaries to mediate between the criminal justice system, the police in particular, and youths at risk. The ministers were trusted in the community, having interceded with youth in trouble and promising to help youths in trouble succeed in school, find jobs and resist peer pressure from gang. Having promised to hold accountable the small number of youths responsible for gang violence and do their utmost to put them in jail, the ministers had also

community to take referrals from the justice system as well as from other outreach efforts, and provide education, employment and mentoring services. As with other partnerships, a lead agency was responsible for planning and managing the initiative. The FBOs were a mix of congregations and other organizations partnered with a primary criminal justice partner, typically the court/probation and in one instance the district attorney.

Researchers found that small and medium FBOs needed to draw on resources beyond their own to form effective partnerships, maintain momentum and expand their capabilities. Similar to FBCO responses in Hurricane Katrina described below and evaluations of employment programs provided by FBOs (Monsma 2004), the FBOs had special but limited skills. They were adept at creating a warm and supportive environment for the youths, but less adept at providing more specialized and sustained programmatic services, such as specific education and employment assistance, and a well developed mentoring program, which requires essential components that are sometimes inadequately acknowledged (e.g., well crafted recruitment, screening, training, and matching, and sustained supervision). Small FBOs would also require help in organizational development, and additional and sustained financial support, as in the capacity building efforts described earlier. Researchers also found that successful partnerships depended on mutually shared goals, mutually shared incentives, and a well articulated theory of change in order to identify the principal program components that would lead to desired outcomes (Public/Private Partnerships, Faith in Action).

Rethinking Partnership and Collaboration

created an “umbrella of legitimacy” for the police to function in controlling youth violence and at the same time limit the most oppressive behaviors of the police (Winship and Jenny 1999).

We tend to think about collaboration in the context of privatization and the procurement of explicit services through contractual arrangements. The emphasis under the faith-based initiatives on building capacity of FBCOs in order for them to participate in public contracting is an expression of this focus. But there are many ways to think about collaboration between independent or locally-based resources and the larger human service system, both public entities and other professional providers. The objective in any collaboration ought to be to create access to a menu of services and a continuum of services as needed. Distinguishing at least three types of relationships may be helpful:

- Formal partnerships or informal partnerships, with or without funding, but typically implying sustained connection;
- Collaboration—on a one-time, episodic or sustained basis; and
- Other forms of networking—from knowledge about each others' presence and capabilities to more active referrals among participants in a local service area.

Much of the motivation behind the faith-based initiatives was the notion that grassroots organizations, particularly religious congregations and others with direct community membership, were often in touch with those in need of assistance but harder to reach by traditional service providers. Thus FBCOs might provide the lynch pin between such individuals and the larger human service system needed in order to obtain sustained and professional services. FBCOs might also operate more modest programs—a potential cost savings for contracted services, but also a potential attraction for those looking for help and put off by larger professional operations. FBCOs might also offer alternative modalities to traditional providers.

The Obama administration has expressed a particular interest in partnerships, both funded and unfunded, with faith-based and community organizations. This is perhaps the most intriguing and least well developed of the new policies. There is relatively little research on partnerships within the faith-based initiatives, and where such partnerships may exist, how they function and how to craft them to get the most productive outcomes for individuals and families. There is very little research that appears to be based on theory about what makes for successful partnerships to improve service outcomes—or models of successful arrangements among partners that might be tested through rigorous design and evaluation. Just knowing what the needs are and who the players might be in a local universe of potential providers is a necessary start. Understanding their relative capabilities, the necessary or desirable links between components in a local service area, and mechanisms for realizing those connections (e.g., knowledge of each others' capabilities, mutual agreement on goals, financial or other obligations among partners, training in partner organizations and cross training among partners), the intricate inputs and outputs that would make them happen, and finally the intended products of the collaboration, are the next steps. Of course, understanding that relationships and needs evolve and change over time also requires mechanisms for continuous feedback and adjustments over time.

There may be useful models from other fields, for example in public health or mental health, which does appear to have informed the initiatives in FBCO efforts. Two experiences illustrate these points.

Hurricanes Katrina and Rita in 2005 provide drew an unprecedented response from native and non-native FBCOs to provide assistance to communities that had been completely devastated by the storms and in which the formal disaster response system was overwhelmed. An

assessment of their roles revealed that while the FBCOs were often the first in with immediate aid, many individuals and families would need sustained assistance with a complex array of issues that few organizations could handle alone (e.g., housing, employment assistance, children and families with PTSD). Researchers found that responders were often ill-equipped to address long-term needs, but even more telling, also unaware of each others' presence or how to connect to address such needs, and often unable to hand off individuals in order to receive more appropriate care (see DeVita and Kramer et al., 2008). This was often true of both the FBCOs that rose to help and the formal disaster response system; both were a combination of local and non-native participants, which added additional complications.

A “natural helpers” model has been explored in the fields of public health and community psychology as a means to deliver a range of health and mental health interventions (e.g., general health education, specific health interventions such as around HIV transmission, or a variety of behavioral health issues) (see Tessaro et al. 1999; Scott 2009). The theory is that key individuals, often lay persons in a social network, with adequate training, can recognize individuals who need help, and by exploiting their unique access to such individuals connect them to help, both professional treatment and other services. Although there is no single model, the theory is that natural helpers are those individuals who are known and trusted (e.g., pastors, teachers, neighbors), can be responsive to the needs of others, and whose assistance is more easily accepted by those who may resist help from less familiar sources.

Opportunities for using neighborhood organizations, especially FBCOs, is a natural setting for development of such a model, particularly for behavioral health issues, including alcoholism and other substance abuse, and domestic violence. Members of local communities, especially local clergy, often recognize those who need help, are sometimes trusted confidantes,

can provide nonjudgmental responses to problems presented, and routinely offer emergency aid (such as food and shelter) which might provide the opening for broader assistance. To test the theory it would be important to learn how to develop effective ways for those local individuals and institutions to become the connection between individuals needing help and the broader network of services—to make effective referrals and hand off those in need to higher levels of treatment or sustained services, as appropriate.

NEBHANDS (Nebraskans Expanding Behavioral Health Access through Networking Delivery Systems) was a three-year CCF demonstration to expand access to behavioral health services in rural and underserved areas through capacity building. As with other CCF demonstration grants, it used an intermediary, the University of Nebraska Public Policy Institute, to provide technical assistance to a wide variety of faith and community-based organizations aimed at capacity building, rather than direct services. The program was not evaluated but would have pursued a comprehensive networking model, an elaboration of a natural helpers concept, and formal evaluation had it received additional funding. Discussions with project staff and a small case study of sub-grantees in one area of the state revealed the importance of articulating the needed linkages between community resources and the professional treatment system, the vectors for reaching the target population, and the pathways between the natural helpers and professional providers—including, for example, training, and informal and formal agreements between those parties, in order to connect to desired services.¹¹

CONCLUSIONS

¹¹ Findings based on the author's experience assisting the NEBHANDS project in 2003 and 2005 to further develop the program.

The research reviewed above suggests that the initiatives described, particularly those aimed at capacity building, were a needed first step in developing new relationships with small and community-based organizations, but that capacity building itself is a long term project. The research also suggests that the demands of public contracting may go beyond the kinds of organizational development that characterized capacity building efforts and concern with capacity building alone ignored the broader question of what recruitment of new players was intended to accomplish and how new relationships with these organizations might accomplish the intended objectives.

In the faith-based initiatives, the motivation was in large part that community-based or grassroots organizations had special capabilities that traditional providers did not—they were closer in touch with target populations hard to reach by traditional providers and they might provide the lynch pin between those target populations and sustained and professional services. Partnerships or collaborations between FBCOs and public human service agencies have not been widely studied. They are hard to do and hard to sustain. The experiences cited suggest that the target populations need a variety of sustained and specialized services and therefore what partnerships can and should be about is capturing the particular skills among the partners to access a menu of services and an effective network for a continuum of services. Beyond capacity building, the necessary first step is modeling the partnership—articulating a theory of change that would result from collaboration and what it would take to get there.

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