

→ END OF ONE WAY

The McKnight Foundation



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END OF ONE WAY

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FOREWORD

These organizations help people and communities make positive change by working in partnerships with them on their journeys rather than by following some blueprint for community change.

OUR PURPOSE

This is a book of extraordinary stories about ordinary people. The setting is South Minneapolis, the home of those people and of the three organizations they have shaped: Freeport West, Hope Community, and the Powderhorn Phillips Cultural Wellness Center. These are stories of vision, courage, tenacity, and, on occasion, breathtaking creativity—set in neighborhoods usually left behind.

Few would argue that our inner cities are challenged. Our times are characterized by widespread disinvestment in deteriorating neighborhoods and an attitude that a downward spiral is irreversible. We doubt that residents' lives can be changed for the better. We tire of old problems yet continue to promote conventional solutions. Systems overhaul seems impossible. At the same time, society is demanding alternatives—in social programs, in healthcare, in urban core revitalization—and calling for comprehensive, complex strategies. Have our one proven ways of creating community change run their course? Is it time for new ways of working?

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As funders, we at the Annie E. Casey and McKnight Foundations are congenial optimists—and trained skeptics. We ask questions, examine policies, learn about public systems and nonprofit organizations, and talk with people in our communities. As we search for new ways of working, we hear stories of certain nonprofit organizations, such as the three profiled here. Although we can't easily explain it, we believe something important is happening in these organizations, something with enormous potential.

Traditional labels would describe their work as human services, community development, and health education and delivery. But at a deeper level, their work is about restoring, creating, and sustaining community. By “community” we mean the web of relationships and interconnections among a group of people, including shared experiences, history, cultural identity, and a sense of belonging. These organizations act on the belief that everyone—including those with meager resources, or those who are isolated, under stress, and demoralized—can build connections with other community members that allow them to share strengths and resources and improve their lives.

The title *End of One Way* describes the three organizations' work and its fundamental challenge to our assumptions about how to engage with communities. As these stories demonstrate, these organizations help people and communities make positive change by working in partnership with them on their journeys rather than by following some blueprint for community change. They do this through profound connectedness, vital engagement, and sharing leadership with their communities. These themes are integral to the organizations' identities. They share them with us through their stories.

HOW WE BEGAN

Freeport West, Hope Community, and Powderhorn Phillips Cultural Wellness Center have been learning from each other for a long time, working for years in the same Minneapolis neighborhoods. In some ways, the leaders are on similar journeys. They have become for each other trusted advisors, sources of insight, supporters in the face of challenges, and members of each other's boards.

They also have shared their struggles to communicate what they do and why. Because theirs is a new way of working, they haven't always had a language for it. But they wanted to write, talk, and engage with one another's stories as a pathway to learning about their own organizations and what they have in common. That desire became the basis of this project.

We were delighted to be their partners. The three nonprofits and their leaders have histories with the McKnight and Annie E. Casey Foundations and with the project's advisers. McKnight has tried to be more than a funder, to build relationships of mutual respect and learning. Annie E. Casey became connected to the organizations in selecting Freeport West as one of the honorees in Casey's *FAMILIES COUNT: The National Honors Program*. Michael Patton and Marg Walker are longtime organizational consultants in the foundation and nonprofit sector who have worked with the three nonprofits and with the use of stories for learning.

We all brought to this endeavor diverse experiences and perspectives. But we shared the desire to promote critical thinking about these organizations' unique approaches to the challenges of modern urban life. We also shared a belief in stories as a source of knowledge. Stories seem especially suited to our purpose for four reasons:

STORIES ENABLE LEARNING. Telling one's story allows meaning to emerge and contributes to the storyteller's understanding. The authors wanted to write, talk, and engage with one another's stories to understand their own organizations.

STORIES COMMUNICATE NATURALLY. These stories give the reader a glimpse into the inner world of the authors, who, as one said, wanted to "put into language what we put into action daily." They wanted to find a way to illustrate the answers to questions they are often asked about their work and to communicate with others who hold different assumptions about community and culture. By writing, one author said, "We want to find the words in between theory and anecdote."

STORIES ARE AN ANCIENT FORM OF TEACHING. Stories both reinforce a culture's traditional knowledge and present it in a form that conveys meaning to people in their own and other cultures.

STORIES REFLECT THE DAILY REALITY OF THE ORGANIZATIONS. These organizations are evolving daily, and stories convey their fluidity and complexity. These pages record stories at a dynamic point in their unfolding.

Early in our work together we agreed that ownership of each story and the authority to present it should reside with those working directly in their communities. Language is a tool of power, and this project is an opportunity for each organization to represent itself directly, without interpretation. As a result, the authors paint self-portraits with their own palettes; no templates, categories, or sets of questions were created. The three presentations have differing balances among conversational, chronological, philosophical, and personal elements.

We also agreed that the stories should contribute to a wider understanding of the work of community engagement. When the three stories were near completion, we talked about the meanings they shared and tried to deepen our own learning. The result is the set of themes explored in the final section of this book. We hope the stories of these three remarkable groups, their points of intersection, and their distinctions inform, inspire, and draw you into conversations about what it means to collaborate with individuals and communities in new and creative ways.

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POWDERHORN PHILLIPS CULTURAL WELLNESS CENTER

Cultural Reconnection and Community Building for Personal and Collective Health



➔ POWDERHORN PHILLIPS CULTURAL WELLNESS CENTER: CULTURAL RECONNECTION AND COMMUNITY BUILDING FOR PERSONAL AND COLLECTIVE HEALTH

INTRODUCTION

The purpose of this story is to describe the role and position of the Cultural Wellness Center in the field of healthcare and medicine.

The Powderhorn Phillips Cultural Wellness Center is the first Minnesota nonprofit organization created for the sole purpose of bringing together cultural communities to recover their old ways of healing, to study and to document their particular experience with sickness and disease.

The Center operates with the philosophy that health results from the process of people's active engagement and participation in life, in defining the standards of health for themselves, and in addressing sickness and disease on the community and cultural as well as the personal levels. Our methods of organizing the people from many cultural heritages who live in the neighborhoods around the Center are based on a deep conviction that people's personal and collective experiences are rich sources of knowledge that will bring forth solutions to their health problems.

Since the Center opened in 1996, we have sought the people's understanding of their chronic conditions of poor health and limited well-being. Our information-collecting techniques are grounded in the cultural practices of "each one teaching one," and individuals speaking from and studying their own experience for the knowledge it brings. The techniques are possible because of old, trusted relationship networks within the geographical community and culturally specific community groups. In hundreds of study groups over the Center's seven years, rigorous attention has been paid to developing participants' capacity to voice ideas and articulate solutions to the problems of their long-standing patterns of sickness and disease. As organizers of the groups, we have worked to change from a confrontational, victim-based problem analysis to truth telling and strategic assessment of problems, aiming to correct wrongs and prevent future problems. We use self-correction and strategic thinking as organizing principles.

The health indicators of public health agencies, such as infant mortality and diabetes, commonly are mentioned in discussions of health status in cultural groups. But the people themselves consistently describe a deeper, more fundamental sickness. Our participants express a sense of deep loss, grief, and trauma. They talk about isolation and disconnection from community and heritage, of identity loss and cultural deconstruction—all leaving people without a sense of community belonging and well-being. With such social and emotional instability, their health deteriorates. The people state that individualism, loss of culture, and loss of community make you sick. This produces a downward-spiraling process that can be reversed only with a penetrating re-education strategy for the person, family, and community. At best, the existing healthcare system, with its medically based remedies, can treat only the symptoms of these conditions.

The Center's participants articulate approaches for recovery, healing their wounds, and reclaiming cultural systems of healthy living. One form of health is having the ability to provide for one's self and family and creating a path to self-mastery by building and belonging to community.

Each cultural group in the area incubates ideas from the culturally specific study of disease and sickness on a community and cultural level. The ideas become models for education and provide health support services within the group and across into the healthcare setting. Today the Center offers kinship building, identity development, ancient wisdom, and cultural knowledge/competence classes. It offers cultural and clinical disease diagnoses that are twin healing tracks, capturing the wisdom of the elders for addressing the root causes of the sickness and the expertise of conventional practitioners for relieving immediate physical pain and discomfort.

As the lead guides in the Center, we have merged our life experiences with the study of cultural heritage and health to execute our vision. Together we, an African in America and a European American, represent the struggle for healing and harmony between Blacks and Whites in America and between systems and community. Our leadership creates the space for this struggle to include other cultural communities and other ways of knowing.

THE CENTER'S VALUES

- Cultural reconnection, cultural integrity
- Self-support, self-correction, self-study
- Community-engaged scholarship
- Personal responsibility
- Collective action
- Community accountability
- Culture as a profound system of beliefs that emanate from the conditions of the people's spirit
- Experiential study for knowledge creation

The Center partners closely with healthcare institutions, medical schools, nursing programs, social service agencies, government leadership, and community development organizations. The resources controlled by these partners, combined with our knowledge, experience, and competence as groups in community, create a blueprint for the health of the cultures, the communities, and the people.

Atum Azzahir

President/Executive Director, Elder Consultant in African Ways of Knowing

Janice Barbee

Director of Knowledge Production, Consultant for European Thought and Traditions

I. WHO WE ARE AND WHY WE DO THIS WORK

Atum's Story

I am the lead guide and Elder for developing and now directing the Cultural Wellness Center. My organizing skills, decision-making philosophy, capacity to collaborate with many different people, commitment to culture and community—all stem from my personal heritage and my people's history.

After 40 years of working in one movement after another and fixing one organization after another, I entered the work of building an organization to facilitate rebuilding community and restoring culture. In my lifetime, I have watched as my own people have lost culture, community, and the cultural threads that have tied us together through four centuries of enslavement and destruction. I have also watched as the period of enslavement ended and the onslaught of sickness and disease fell upon us as a people like a curse.

Without a communal or collective mind to counteract, protect, and help the people respond, the disease patterns have interwoven themselves into the fabric of culture and family life.

As only the fourth generation following the end of slavery, I have experienced the destruction and the deep losses but survived. For knowledge and for healing, I have studied our experience by traveling throughout my life to meet other Black families in and outside of the United States. My family story is illustrative of a broad range of my people's experience in recent times. Our approach as a group to survive in life's most difficult times has a through-line that connects back to before the 1600s and has lived underground up through today. Therefore, as I observe our Cultural Wellness Center members' growing capacity for taking responsibility, gaining personal empowerment, and achieving higher levels of self-mastery, I am deeply rewarded.

I believe that our state of health cannot be judged on an individual basis but must be tied to a bigger context of culture, family, and community well-being.

In the daily survival strategies of my parents and their peers, I learned that the spirit of resiliency was naturally rooted in my Blackness. This Blackness, which was hated and cursed by outsiders, was cultural, spiritual, political, educational, and social.

After studying my own life and now seeing others come forward to study theirs, I believe that our state of health cannot be judged on an individual basis but must be tied to a bigger context of culture, family, and community well-being. The interplay of these three created a safe, stable environment for my life experience that worked like an

incubator for my spirit from birth. They protected me from forces beyond my understanding as a child and beyond my personal control even as an adult. This incubator of a caring community—an enduring set of beliefs, customs, mores, values, and attitudes—and a grounded, self-defined family system followed me like a shadow in and out of society’s traumatic insults against my humanity.

I saw these insults and atrocities leveled against my dearest loved ones in the particulars of finding work, seeking formal education, attending church, and getting medical attention or social service support. My family members built a life without such support and counteracted the serious effects of such forces by fortifying this incubator. Inside of the incubator, well-being was guaranteed and protected from the outside. This was and is the case for my 60 years, as well as for the 400 years of my family’s history.

Without culture and community as incubators, a family is increasingly vulnerable to sickness and death. No amount of outside help can replace this incubator or protect individuals from the damage of not having it. The evidence stands before us that certain patterns of disease are most prevalent among African people in America. Here I speak of preventable health conditions such as homicide, suicide, and early death related to heart disease, diabetes, and kidney failure. We can look at the infant morbidity and mortality rate among African Americans today and see children dying before their first birthdays at an alarming rate. Associated with the morbidity and

mortality rate is the rate of premature births and low-birthweight babies born to African American women. C-sections and induced labor have become common. To me this indicates a deep loss of community as a symbolic incubator for healthy pregnancies and healthy pregnancy outcomes.

Those of us who created the Cultural Wellness Center see ourselves returning to daily caring for each other again. We are returning to the basics of old systems of caring that, although forgotten, are not really lost. This caring is the only internal response a group can initiate that can be sustained over periods of weakness. The system regenerates itself because those who are cared for will care for others. People long for this community caring because it also contains a natural space for revitalizing the person, the family, and the community’s capacity for restoring the health of its members.

Preparation for the work: I have a difficult time ascribing a starting date to the healing work of the Center, because for me the work began even as I experienced “coming of age.” It was there in the Mississippi Delta that the ideas of personal responsibilities and community belonging were planted in my heart and head. In the daily survival strategies of my parents and their peers, I learned that the spirit of resiliency was naturally rooted in my Blackness. This Blackness, which was hated and cursed by outsiders, was cultural, spiritual, political, educational, and social. I was taught the honor in Blackness, that Blackness was the social capital for the business of living instead of a reason for dying.

It was in a hotbed of hatred, segregation, and uprootedness that I learned how to create a space where well-being can happen even under the most devastating circumstances. This lesson was taught religiously by my mother, who cared for my father during his frail times. She worked as a maid and a babysitter from sunup to sundown. She retained her grace and beauty because her sisters, mother, and daughters provided an ever-replenishing source of support. Her long view of life refreshed her spirit when the demands of maintaining the life support of other people weighed on her. She gave me this way of valuing life, just as her mother and other mothers had done before her. It was the tradition to teach, transfer skills, and assure that each generation survived.

The practice of transferring a way of thinking, survival skills, and beliefs about life informed our attempts to create the space for health in Mississippi. We organized activities and ordered our steps in such a way as to limit the external forces' capacity to infiltrate our psyches and demolish our spirits. We resolved personal conflict and family disturbances by going to church, dancing, storytelling, and singing. We saw a relationship between a strong community and personal strength, harmony, and survival skills. Many of the old people talked in codes to each other, averted the dangers, and stood constantly in vigilance and prayer. The children were granted childhood and allowed to escape the burdens of life, at least through adolescence, at which point they entered the work force.

It was at this stage in my life that I began to organize people and ordered my own steps in a way that gave rise to the vision, skills, talent, and dedication on which I now fall back in guiding the Cultural Wellness Center. I am trying to create for others the good experience I had growing up. Once I moved away from my community and left my family, the teachings gave me the strength to endure. Protection has shadowed me through life.

The foundational experience of organizing, caring for others, and sharing in the plight of my people moved with me from Grenada, Mississippi, to Milwaukee, Wisconsin, in 1962. I was 19 years old. As more of our people from Mississippi moved to Milwaukee, we began to share our limited resources. But this practice was short-lived as we found our lives affected by the forces of societal change.

The period 1962 through 1970 was one of great change, from a segregated society to an integrated one.

With a "more open" society, we slowly began to pursue outside jobs and schooling and learn outside values. The pressures of keeping up with each other soon replaced sharing and supporting each other. We moved into separate households. The movement for human dignity became a movement for equal rights. We demanded our own national rights. As the movement raged around us, we were swept along with the

wave of integration within schools and other public facilities. External integration exposed us to the places to which we demanded access but also, unintentionally, to daily life practices that challenged the old, culturally embedded values of our community.

My children would be among the first generation of Black children in America to have many unrestricted social and emotional relationships with White children in America. This change was unsettling to both groups. Both worlds were unprepared for the waves of change in the values, beliefs, and customs of living that spread among families. The close interfacing of groups produced a surge of efforts to homogenize the society, to make us think of ourselves as "all the same."

The only problem was that the Black psychological, social, cultural, and emotional infrastructure that had endured through unprecedented brutality of slavery and Jim Crow was now not valued but devalued and redefined. The family system based on women's leading and teaching was renamed a "single, female-headed household." Men who were denied employment were now "unemployed males" who left their children fatherless. Women were sent out to work, children were bussed to schools, and many sang the song, "We are free at last, free at last, thank God almighty, free at last."

Our households operated according to a "survival of the fittest" mode. Each household had its own money but also suffered the difficulties that came from making the money. We soon knew many stress-related difficulties that led us one by one into a more individual survival mode. So now it was not so much the case that each household cared for its own members but that each individual was caring for just him- or herself. The community as the container and culture, the glue, disintegrated.

I began to know the difference between the legal segregation of the South and the emotional and spiritual isolation of the North.

In 1964 I accepted a job as a ward clerk in a county hospital. Here I met and began to see into the lives of many more Black people. I saw the deep levels of suffering without reprieve. I saw the aloneness and isolation that come from the incapacity to experience the human caring, sharing, giving, and receiving of the old community.

I began to know the difference between the legal segregation of the South and the emotional and spiritual isolation of the North. As I became a nursing assistant, I began to organize others who had the same concerns for the people in the hospital. I organized the nursing assistants and began to demand better working conditions and better care for the patients, especially those in the tuberculosis (TB) unit.

For example, housewives and wise men or women were prepared for these roles from childhood; they were brought up to think of themselves as having a role in, and responsibility for, community.

The TB unit of the county hospital was a sanitarium where patients were separated by race, even though by now the law of separate but equal had been challenged and the general political climate gave the impression that healthcare as well as all other public resources were available for all. Not only was this untrue but, as in the South, Black lives were important only to Black people. The few of us

who worked in the TB unit now had the real job of caring for the patients, shielding them and their families from daily insult as well as intentional neglect by the hospital staff. While the many political activities were rising up around the country, in my own little circle I began to challenge the treatment of people inside healthcare institutions. I began to look back to my Mississippi life to understand what I was seeing.

In Mississippi my needs were met by close, personal relationships. People were prepared to fill roles that kept the community functioning. For example, housewives and wise men or women were prepared for these roles from childhood; they were

brought up to think of themselves as having a role in, and responsibility for, community. The responsibility was passed from one generation to the next. Responsibility and honor were interchangeable. Caregiving was built into the community and systematically developed over time. Thus, its absence in the hospital setting became clear to me. I recognized that the danger to the well-being of the African American was deeply embedded in the community's incapacity to provide for its inhabitants. To be Black carried certain liabilities in the society, but to be Black, poor, and outside of family and community rendered one completely vulnerable and nakedly open to victimization. Without a protective shield, immunity to dis-ease and disharmony was lost.

As this new life in Milwaukee evolved, I soon noticed changes in foundational things, such as eating habits. People began eating more processed and fast foods such as sandwiches, soft drinks, chips, cookies, and ice cream. They no longer cooked dinner or sat together listening to stories of daily survival. Now that every adult in the household held a job outside of the home and children began attending childcare centers, our lives transformed. We needed money to support our new lifestyles and consumption practices. We began looking at what each other had and did. Instead of being accessible and open as a community, we were asking questions of ourselves such as "Am I different?" and "Do I belong?"

What does all this mean for the work 30 years later to develop the Cultural Wellness Center? I must examine the lessons that I have learned over the last 60 years. I must also accept and apply the wisdom of surviving with my intelligence intact. From this I am obligated to build a place for future generations to express their fullest potential. How? The strategies for organizing and building the Center answer this question in detail.

The Center's Emergence

Sometime in the early 1990s, when we first initiated this effort, I had a conversation with a representative from Medica, a health maintenance organization. As I reflect upon what he said, I can see that his challenge to me enlivened my vision for the Cultural Wellness Center. He challenged me to design something to confront the African American community's sickness and disease patterns. I realized, with this challenge, how shaming it was to hear the terrible statistics on Black health. I immediately turned to the other side of poor health for what I knew which was: How did we stay healthy, considering our experience? We didn't discuss the implications of this model for other cultural communities, but now I can see the value of this design across other communities.

In the beginning, I organized groups with members from many cultural communities. The expressed level of disconnection from culture and community in my colleagues across all cultural groups had a deep impact on me. I know of the collective aloneness of the African American because I am a member of this group, but to hear the Dakota, Lakota, Nakota, and Ojibwa people, Mexican and Hmong American people speak of their deep sense of disconnectedness and aloneness has amazed me. I thought these groups had culture, language, and a home base, even if they didn't control their home base. This was a deep "Aha!" for me and, as I later learned, also for those working with me. I became more and more driven to be a part of and, as a matter of fact, give direction to an effort to alleviate this condition for these great people of ancient heritage.

This includes people of European heritage. One of the most profound teachings came from the work of the European American community members. Janice Barbee is the lead guide for this work among people of European heritage. She is a gentle-spirited woman who, by her own admission, has been on a path of studying the spiritual heritage of her people. Like her colleagues in the Native American, African American, Latino, and Asian American groups at the Wellness Center, Janice is working to sort out and synthesize the patterns, themes, and systems thinking that flow throughout the Western tradition and European-descent communities in Powderhorn and

Phillips. Also, like the Elders and guides in other groups, Janice is tracking these themes as they have played out in her family experiences with the healthcare-delivery system and within medicine and law.

Janice's Story

I have been working with Atum for nine years, since before the Cultural Wellness Center was formed. As a woman of European heritage, I know that it is sometimes difficult for people to understand how people of European heritage fit into this work of reconnecting to culture and community. After all, it is a commonly held view that we are the healthiest of the cultural groups according to the common health indicators.

My own life story illustrates the effects of the development, in the United States, of extreme individualism, the loss of the extended family and community, and the increased dependence on professionals who cannot possibly provide all that is needed.

I grew up in the 1950s in New Jersey, in the metropolitan area of New York City. My paternal grandparents, aunt, and uncle lived across the street, and my maternal grandparents lived in Queens about 25 miles away. My sister and brother and I had the run of the neighborhood, and we lived in the kind of community where anyone on the block would rush to help us if we got hurt playing.

In the early 1960s my father was transferred to a suburb of Denver where we knew no one. When my brother was diagnosed with schizophrenia a few years later, my parents had no one to turn to but a psychiatrist. At that time, the prevailing theory among psychiatrists was that schizophrenia was caused by a traumatic experience in youth inflicted by the parents, usually the mother. So my parents and my brother were subjected to regular sessions with a psychiatrist, trying to remember what could have been the terrible thing my parents did to my brother. My sister and I were never informed what was happening. I just remember a feeling of an enormous, weighty black cloud hanging over us—a feeling of fear and dread and guilt.

We are undermining our own health and continue to undermine the health of other cultural groups by not understanding the significance of cultural and community as resources for health.

My brother ended up leaving town, angry at my parents, never to see them again. When my parents were dying of cancer about 10 years later, I repeatedly asked the public health worker, who I suspected knew where my brother lived, for any bit of information to give to my parents about my brother before they died. Over several conversations she insisted that she couldn't tell me anything about my brother, not even his address, because of confidentiality laws. After my parents died, I called to tell her my parents' lawyer needed my brother's address because of the will. I expected her to give her own address so the lawyers could send her the papers to forward, but as soon as I mentioned the word "lawyer," she gave me my brother's address over the phone.

This story illustrates for me one of the simplest but most powerful lessons that I continue to learn at the Wellness Center. In our quest to uncover the secrets of nature and the immense complexity of the human being, we often forget to look at the most basic systems that we need to be healthy. All the theories about how to cure schizophrenia are nothing compared to the effects on the spirit of the support and love of a family and community.

My anger at the ways of thinking, the practices and theories that tore apart my family has turned into a passionate desire to help people of European heritage to be aware of their culture—their values, assumptions, and practices—and examine how culture is a factor in health. We are undermining our own health and continue to undermine the health of other cultural groups by not understanding the significance of culture and community as resources for health.

I continue to meet with people of European descent (the term "White" implies we are colorless and cultureless) who come to the Center with the same feelings of homelessness and alienation as people of other cultures have. Many of us are taught that we don't have a culture but that we are individuals who have to figure it all out for ourselves. We go to oncologist appointments by ourselves, we don't have anyone to talk to about despairing thoughts, and we end our lives alone in nursing homes.

Creating community and studying our roots bring us a sense of wholeness, meaning, and purpose, and we grasp hold of the tools we need not only to be healthier ourselves but to work with people of other cultures to create a healthier society.

When Atum and I first started working together in 1994 she told me she hired me because I wasn't looking to "help" her people, in the "missionary model," but was interested in changing the ways of thinking for the benefit of my own children as well as for society in general. The ways of thinking—the values, priorities, and concepts that have produced the barriers and disconnection for her people—have also undermined my community, contributing to increased stress, anxiety, and depression.

As Atum has unfolded her vision of a place for the restoration of community and cultural ways of thinking, I continue to learn about the great wisdom that African and other indigenous people have about health and healing. Together with leaders from many cultures, we have created a place where the discussion about health and the resources for creating health have been greatly deepened and broadened.



The People's Theory

II. WHAT WE DO

Organizing Principles

For the last few generations in the society as a whole, and for many generations in the African American, Native American, and other non-European American communities, the capacity for community members to support each other has eroded. Many needs that once were addressed within communities by cultural elders, midwives, teachers, apprentices, and extended family have increasingly been left to professionals as the community's social, educational, and spiritual resources have been weakened.

The Powderhorn Phillips Cultural Wellness Center is a model for re-engaging community members to care for themselves and build community. This model includes ways for systems and institutions to partner with families and community. Enfolded within is a type of leadership that engages the energy and ideas of "ordinary" citizens to sustain their community and preserve their natural life support network.

Three primary principles behind the work of implementing the model are: (1) People are responsible for their own recovery and healing, (2) community provides the container and the resources for living a healthy life, and (3) connection to culture and a sound identity transform the historical trauma of race.

As groups study themselves to compile the book of historical practices that have assured their survival, they exchange notions of healing, recovery, and caring.

Our Beginnings

The Center has defined health according to the World Health Organization's 1994 working definition :

The extent to which a [person] or group is able, on the one hand, to realize aspirations and satisfy needs; and, on the other hand, to change or cope with the environment. Health is therefore seen as a resource for daily life, not the objective of living. It is a positive concept emphasizing social and personal resources, as well as physical capacity.

The Powderhorn Phillips Cultural Wellness Center was created seven years ago after two years of gathering hundreds of people into Citizen Health Action Teams (CHATs). The CHATs took place biweekly and monthly. Careful notes were taken and great ideas were celebrated at each meeting. Ideas were solicited for solving the community's problems. The gatherings examined such topics as sickness and disease levels, health and medical practice, crime, violence, race, class, religion and spirituality, family education, jobs, sexuality, and age. Of these topics, sickness and disease levels and health and medicine drew the broadest responses and also affirmed the emphasis we had placed on these topics before we began organizing. This highly active process of bringing together many different people from many different cultures to solicit solutions to a community's problems became our trademark. It is now the approach we use in the Center for sustaining people's engagement, as well as generating organic knowledge that helps solve the problems facing community residents.

The Center is on the border between the two city planning districts that are populated by the largest combined concentration in Minnesota of African/African Americans, Native American Indians, Asians, and Latino/a Americans. This is important because the interfacing of these groups with each other, and their struggle from within to restabilize themselves after several generations of uprootedness and loss of community, culture, and health, makes the Center's work particularly relevant. As groups study themselves to compile the book of historical practices that have assured

their survival, they exchange notions of healing, recovery, and caring. The Center would not be what it is if it was not rooted in this diverse neighborhood.

Our Work

The Center's work engages people to strengthen themselves by rebuilding community and by creating and teaching new knowledge as it is understood from the experiences of people's survival.

The organic care systems of the community, when functioning properly, will place these disease patterns in a context that requires people to take personal responsibility for their health.

It is about increasing people's knowledge of themselves as they survive, not as isolated individuals but as members in community. A safe and stable environment requires that the interests of the individual members are the interests of the whole community,

and the interests of the community are the interests of its members.

To recover and restore the natural support systems within cultural communities, the Center's organizers and participants have created the following:

- Elder Advice Councils for each cultural group
- Curriculum and classes for reteaching cultural practices
- Parenting circles and language classes for community learners
- Birthing teams for pregnant women
- Encouragement teams for people having surgery
- Practitioner and patient support circles
- Medical student and medical residency coaching
- Seasonal celebrations
- Culturally specific rituals for healing
- A farmers' market
- Male and female initiation ceremonies and rites of passage for contemporary lifestyles

- Seminars, colloquia, and briefings
- University classes (which we have co-created, and one of which is now approved for a two-credit master's level course in holistic healing)

Unlike the current systems of delivering care, these activities do not replace family and cultural practices but equip family and community to care for themselves.

Our staff members are cataloguing the experiential knowledge that is most effective for healing from loss of culture, loss of community, and disconnection from family. These three conditions are most frequently mentioned as giving rise to the better-known *dis-eases* that mainstream groups track for understanding health status in cultural groups. The diseases that have established damaging trends in cultural communities are those associated with lifestyle, such as diabetes, heart disease, kidney failure, hypertension, and, of course, homicide and suicide.

The organic care systems of the community, when functioning properly, will place these disease patterns in a context that requires people to take personal responsibility for their health. We believe that each disease brings a message for deep self-reflection and correction. As this learning happens, behavior changes. The care system gives person after person tools and techniques for helping himself or herself.

Each cultural group has practices to be considered, examined, and carried out to create health. People who have lost contact with these practices must be and are introduced to them through individually designed educational curricula. We teach people about themselves before we teach others about them. This creates an empowered, informed person who then teaches others and speaks up for the practice that best supports the person and others around her.

The Cultural Wellness Center is also becoming a primary source of culturally specific practices, beliefs, and norms for solutions (models) for city, county, and state government leadership, and social service and university professionals. As they are challenged to develop innovative solutions to improve conditions that weaken family, community, and personal livelihood, these groups are looking to traditional cultures. Preparing these professional groups to function as facilitators and providers of resources (rather than as angry, surrogate parents, as they are often perceived) is a powerful parallel blueprint for creating community well-being.

People involved in the Center who come to learn from others, teach others, or help build a sustainable operation share a love for creating new knowledge that expands the limits of entrenched mainstream beliefs, customs, practices, and attitudes. We are expanding the limits of existing knowledge that controls health, culture, and community.

Our Operation

Our philosophy of community and cultural connection is reflected in how the Center operates. The positions or job titles are “faculty guides” and “Elders” to honor the cultural descriptions of those who are helpers. The Center’s governance structure includes Elders Councils from each group, who provide counsel to the board of directors. The board is composed of community residents, with advisors offering professional support. The personnel policies relate back to the focus on cultural wellness. Employee benefits are generous for an organization of our size. For example, full health coverage is offered to employees and their families. Employees may choose their own holidays, and sick time and vacation time are also generous in support of staff wellness.

Money is a constant challenge for our operation. We seek to work with investors who understand the connection between the conditions in our communities and emerging conditions across society. The Wellness Center, like our members, wants to take responsibility for our future by producing solutions to problems that plague our society.

The organization contains the work and the workers but must never become the reason for the work. It is physically located where the conditions that produced its existence surround it. We are watching for more ways to be an image of healing, recovery, and hope. The structure gives continuity until the activity again becomes a natural part of community life.

III. HOW WE ENGAGE COMMUNITY

Cultural Obligation, Personal Responsibility, and Community Health

The Wellness Center educates members about the resources of health, education, and human service systems in the broader community in a way that increases the capacity of these resources, prevents a collision between them and a member’s culture, and nurtures the member’s connection to community. Many join us who feel paralyzed by the stress wrought by finding a job, getting a good education, or navigating the welfare system.

People describe the distance each institution creates between them and their family and cultural community. Getting a university degree is presented as a way to get a good job. But, according to one Elder at the Center, the impact of getting a degree on your relationship with your family and your people is like getting head lice. “If you get too much education, people stay away from you,” she said. She said there is a fear of education within her cultural community because it “takes you away from your people” or “it takes you away from being real.” In other words, “those credentials take the place of true credibility. With them you seem to have no attachment or personal accountability to your people’s experience—only an analysis of their condition. When you have no connection to the condition, how can you make a change in these conditions?”

Three Examples

The person who shared the above story is now working to establish herself as a devoted apprentice to her people. She is articulate and clear that she has emotional, cultural, and community responsibility that she will meet. She is using her education and the

resources to which it gives access to give back to her community. As she enters the education system, which is outside the system that guides her life, she continues to work with the Elders to learn how to apply the old life ways to the new situations she and others are struggling with.

After three years of hard work within her community, this guide and teacher is now honored with the role of young Elder by her Elders. She is working with other Wellness Center guides to create an Indian women's movement class; a language class that teaches Dakota language to Dakota, Nakota, and Lakota people; a Grandmothers' Support Network; coaching for Native patients and non-Native providers in hospitals and clinics where she offers Native spiritual rituals and healing ceremonies; and encouragement for Native women to institute birthing teams for pregnant Native woman.

As a young Elder she teaches her people; as a trained healthcare provider she can also teach healthcare providers. The title of young Elder carries more weight and gives her

more access to facilitating health and well-being for Native people than her credentials as a respiratory therapist or her master's degree in community health. As a Native teacher, she is documenting the many survival strategies to which Native people have turned over the years. But most important, she is relearning Native life ways and reactivating them through her work in the Center. The Center is a space for teaching and learning. Here she is strengthened to give back and rebuild community in the surrounding area and in her people's homelands.

The Center's strongest relationships exist with the cultural groups and teams made up of Elders, grandmothers, teachers, cultural activists, and constituents of specific community groups, such as our young Elder and Native groups. These relationships are necessary for the Center's work to effect changes in the well-being and strength of

cultural communities. This young Elder can synthesize the ways of her people and the ways of the healthcare/medical world. It is this synthesizing of knowledge from the different worldviews that creates a space for health and well-being. As she survives the conditions that have come upon her people and herself, she can teach and build.

At the Center, each cultural community engages in this practice. We incubate the lead guide and the team of people who will implement ways of recovering and building community on a larger and larger scale.

The need for synthesizing knowledge across cultures is also exemplified in the story of a woman who had been struggling with her dissertation for her Ph.D. for 10 years. The stress of it was affecting her health. Her family insisted that with or without the Ph.D., she was their best hope for a better future. Her adviser at the university warned her that she was almost out of time. If she could not produce an acceptable document, she would have to withdraw from the process.

She requested permission from the Center's African Elders Council to document the African group's work on reclaiming heritage and culture to bridge the trauma of a stripped identity. She spent the year immersed in the organized activities of the group inside and outside the Wellness Center. After more than 100 interviews, deep personal contemplation, and many hours of writing and rewriting the thesis, she was awarded her Ph.D. and recently received word that her work will be published.

In her words: "The classroom and the process limited my intellectual capacity. This active learning process at the Center nourished my spirit, which infused my mind. My personal life, my family, and my community were brought together instead of separated. The process here made me feel whole, and I can be useful to the Center in fortifying its credibility." The African Elders Council at the Center is happy about her success and is contemplating the benefit of her dissertation to the community.

The person's linkage to guidance, systems of accountability, support, nurturance, and opportunities to contribute all create and reinforce well-being.

The themes of this member's dissertation—identity, cultural endurance, community, and family connectivity—are living principles embodied in the community care system that is the model of the Cultural Wellness Center. A wide range of people benefit from participating in the Center's process. The emphasis on personal responsibility, immersion, and interdependency is applied in each situation where a person has been limited in contributing and giving back.

The major success in this area is in the patient's increased understanding of heritage and responsibility for health and family. A circle or kinship team is put together to chart the healing that takes place with the return to culture, heritage, and community.

The situation of a woman who has reached the limit of her capacity to depend on government income subsidies seems on the surface to have no relationship to the situation of a Ph.D. student. But this woman on welfare makes the same case for attaining her renewed sense of personal power and wholeness. After a year of implementing goals she had developed

at the Wellness Center with an Elder guide, she said, "Even though I knew deep inside of me that I wanted to work, that I wasn't lazy, I felt limited in my capacity by the very process that was supposed to be helping me toward self-sufficiency. I kept finding reasons not to work. I know how to do so many things, but I couldn't focus my energy. I was mad at everybody, including myself. This process makes me feel whole, strong inside of myself, and not so mad. I can focus, I am working, and I can give back. I can reach my dream. I am not crazy."

These three examples—the young Elder, the Ph.D. student, and the recipient of welfare support—illustrate the power of cultural connectedness to both personal health and well-being and community health and well-being. The person's linkage to guidance, systems of accountability, support, nurturance, and opportunities to contribute all create and reinforce well-being.

IV. WHAT CULTURALLY BASED HEALING MEANS

The Cultural Wellness Center's definition of culture:

The totality of our spiritual beliefs, behavior patterns, attitudes, arts, knowledge, customs, practices, styles of communication, and all other products of human work and thought.

Personal Participation

After seven years of organizing Citizen Health Action Teams and operationalizing the knowledge from learning circles, we have 12,000 visits from local residents per year, and thousands more attending circles of healing and celebrations outside of the Center. People become members of the Center because they are engaged and are actively putting together the pieces of their personal, family, and community life.

We place a very high premium on participation. No one is an observer or bystander. To measure success, we created a scale of marking members' engagement. Success is tracked for the member and the guide according to visible signs of growth in self-worth, conversation with others, problem-solving skills, and personal lifestyle changes. An engaged member has more questions to ask himself or herself than to ask others. It is to the teacher or guide's credit when the member is more informed, more confident, more connected to support systems than before. The member is then increasingly able to come into the Wellness Center not to receive help but to offer help.

The steps and stages of engagement are laid out clearly for members and guides. While stated in simple language, each step is highly weighted so that one can see success immediately. For example, with each visit we list and celebrate certain measures of responsibility and engagement, including being on time for meetings, coming prepared to meetings, tracking one's own personal achievements by listing them, following the self-defined steps between meetings, and initiating self-corrections. This builds the confidence and value that nurture well-being.

One of the core activities for members is a Self-Health Assessment, a process that leads to a Map to Wellness. In this process, an Elder, physician, guide, navigator, or social worker meets with the person one-on-one. She listens to the person for a

longer period and at a deeper level than ever before. The goal is to hear the possibilities inside a person and to make sure the person can hear and value his or her own possibilities.

These two groups describe a disease, such as clinical depression, from the medical model and the cultural model.

The guide carefully crafts the questions to free up insight and messages that have been locked away under pain, fear, or misunderstandings. What is said is written and presented to the person in the form of a map. As the Map to Wellness is executed, a kinship network is formed, or a support group or a Health Action Team is composed, creating a holistic healing experience. Center staff and faculty guide more than 500 support group sessions annually.

The Program: Connecting with Culture

As the name implies, the Cultural Wellness Center's core programming emphasizes examining the health and wellness customs, beliefs, attitudes, and behaviors of people who live in the geographical area of Minneapolis called the Powderhorn and Phillips Planning Districts. The participants will tell you, "We exist to unleash the power of citizens to heal themselves and to build community."

Each quarter the Center develops a catalog of class offerings. They include cultural competence for professionals, old ways of parenting, developing a family tree, eating the food of your ancestors, cultural ways of understanding end of life, heritage as a key to self care, and so on. These classes are taught in the Center's largest program, the Invisible College. The teachers are the Elders and other people who are knowledgeable about the cultures' ways of knowing. Teachers are selected and groomed within the experience of the cultures and their traditions. Many hours are spent listening to and documenting the knowledge held by the Elders, who are

learning once again that there is value in their experience. These Elders become empowered as teachers, advisors, and experts on the culture. On one council, the oldest woman is 89. This group of 20 Elders brings joy, fun, and powerful teaching to teens and other adults. Each cultural group is cultivating this kind of council for teaching in the Center. The "Keys to Self Care" class is another place where old and younger people give voice to great wisdom coming from survival, struggle and endurance in each person or group.

The second program, Core Member Services, includes cultural health practices such as yoga, martial arts, and movement and dance. Many members from the community, as well as Center staff, offer their skills and knowledge by teaching these classes. Community members also organize initiatives and support groups, such as African American Men's Support Network; Coalition of African Women Rebuilding Our Communities; Lakota, Dakota, and Nakota Grandmothers' Society; and European American Mothers' Circle.

The Health Institute, the Center's third program, is guided by a medical director who, after 20 years of practice in the conventional medical system, began her learning transition within an old cultural healing system in 1996. She describes her personal struggles in medicine as she was pressured to leave her Haitian heritage and knowledge outside of her practice. She is now guiding the Center's teaching of other health and social service professionals along with the Cultural Elders. She is in demand as a speaker among her colleagues, and she offers the Self-Health Assessment to more than 150 people a year.

She focuses on people who also have a conventional physician, a diagnosis, and a treatment plan. The major success in this area is in the patient's increased understanding of heritage and responsibility for health and family. A circle or kinship team is put together to chart the healing that takes place with the return to culture, heritage, and community.

This woman worked with an Elder and medical faculty from the University of Minnesota Medical School to create a monthly “advice clinic” for members of the Center and broader community. Attendance is excellent, but the best lesson from these clinics is the rich sharing between the physicians and the cultural Elders. These two groups describe a disease, such as clinical depression, from the medical model and the cultural model. The participants learn how to understand this condition and how to manage or in some cases master the conditions because the stress of not knowing what is happening is eliminated. The physician and the Elder also benefit from the exchange of knowledge. Each is affirmed as a teacher; neither person is expected to do the work alone.

A Healing Space

Inside of the Cultural Wellness Center, the space is warm with cultural references. Hanging masks from East and West Africa and textiles from all over the world create a welcoming and relaxing environment. Many people describe a magical peace that comes upon them the moment they enter the space. There are water fountains and candles, and the smells of cedar and sage or frankincense and myrrh envelop you and heighten your sense of security. Each person who enters is offered a cool, clean glass of water. There are many plants that love the windows and always seem happy and healthy. A meditation room is open to members who need it. Without words or other direct interaction, the staff make the point that each person entering is important and valued. The symbols speak to people.

The Center’s location is critical in its success because we are either within walking distance of our members or on a bus line, so transportation is convenient and inexpensive. We have a deliberate strategy for building a bridge between cultures, listening to and valuing the story of each culture. From this strategy we establish a united effort for saving not just ourselves but each other from further deracination. Collaboration is possible and necessary to uphold the vision of wholeness and health.

Center staff and community constituents have been transformed in many ways through the intentional study of this interfacing experience. We are finding in working across cultures that every area of life and living has a cultural interpretation. Given the atrocious acts of brutality each group has suffered historically, this interpretation has taken on other layers of meaning. As we experience each other working daily under one roof struggling to unravel the pain of our own history, we gain compassion for each other.

Having compassion and empathy for the recovery work each group has to do places us in an even position and on an even playing field. To compare the volume or depth levels of each group’s work is an exercise in futility.

Profound learning has taken place and continues both among European Americans and between European Americans and those of other cultural groups. When we convene the annual “Healing from the Four Directions” gathering or other cross-cultural gatherings, we hear people describe the impact of knowing these cultures beyond the constant reminder of the responsibility they are asked to accept for past atrocities. People are longing for an exchange of ideas for healing individual and collective traumas.

A cultural council of European descent is pulling forward old beliefs, customs, and values that provide not only for accountability for self-treatment but accountability for the treatment of others. Our members of Jewish heritage continue this dialog. These members, in the courageous tradition of the other Wellness Center teachers,

From the moment of diagnosis, the patient never has to face alone the disease or its effects on her and her family. a team of supporters surrounds her. Her cultural rituals are done with her; her Elders are consulted for advice and interpretation. The provider can respond to specific questions and understand the need for ritual and family support.

Without the Elders' teachings and guidance, each generation starts from scratch, always reinventing the wheel of sorts.

have begun to put forth the cultural beliefs, customs, values, and rituals that underpin the healing and survival of the Jewish communities. This is both rewarding and difficult but, as in each cultural group's work in the Wellness Center, this knowledge is essential for personal, cultural, and community well-being. Each group also studies past situations where these dialogues have derailed efforts to work together.

The main lesson is, again, that we must know ourselves and love and support ourselves in order to know and support others. We now move together to create new knowledge from our interfacing efforts that will spread into health and human services, education, and the political and economic arenas.

The Healer and the Healing Process

Many people now see disease as a sign that great loss has occurred. This loss without proper grief leaves people without immunity or healing ways.

We have heard many stories of the effects of this loss, such as the following: A Native woman is diagnosed with cancer. She goes to see the oncologist alone. The oncologist details the problem and in eight minutes is done, leaving the patient's room. She doesn't understand and doesn't agree with the aggressive treatment that is recommended for her. She returns home in silence. She doesn't tell family members because she doesn't want to burden nor frighten them. Several weeks pass, and she doesn't know what to do, but she knows the physician's plan is not acceptable, even if there are benefits.

By the time of her next visit to the provider, she has had a medical crisis and the situation is grave. The physician sees the patient as uncooperative and figures, "What can she expect but this crisis?" The patient and physician don't understand each

other. Treatment efforts are strained and the patient-provider relationship is stressed. Neither has support; both are judging the other through a lens of historical pain and fear. Because the patient is weakened, she suffers visible consequences. The physician doesn't suffer immediate or visible consequences but harbors resentment, which carries over to other Native patients in the future. Unresolved, this creates a vicious cycle in the relationship between providers and patients of different cultures.

At the Cultural Wellness Center, this patient's experience would be very different. From the moment of diagnosis, the patient never has to face alone the disease or its effects on her and her family. A team of supporters surrounds her. Her cultural rituals are done with her; her Elders are consulted for advice and interpretation. The provider can respond to specific questions and understand the need for ritual and family support. The provider functions not as the sole helper but as a team member with limited but valuable resources. The kinship team and family members strengthen not only the patient but also the provider by extending the provider's resource base and placing healing in the hands of the person and family. This is the "circle of healing," a practice with lineage in the Native heritage.

In the Wellness Center we practice many circles, such as talking circles, encouragement teams, and support groups that lend themselves to eliminating aloneness and isolation. The tradition of circles mirrors the cultural ways of knowing that place the body in the context of the greater universe. All parts of the universe are called upon to work together in healing.

To reduce infant mortality among African American women, several women members of the Center have tested the creation of birthing teams to restore the circle of support in the natural birthing process, which, they say, will improve birth outcomes. The birthing team concept can be traced back to Mississippi, and more profoundly back to Senegal, West Africa. Through the Wellness Center, a group of women have organized 30 birthing teams with enormous success. Twenty-eight of the 30 pregnancies were delivered in the hospital in record time; the longest took eight

hours. The other two were slightly longer—one nine and a half and the other 12 hours. They were all natural. The mother has three women by her side from the beginning to the end of labor, and one person visiting each day up to six months after labor. Up to one year, women visit regularly to prepare food and help with housework, childcare, and parenting. Foot, head, and shoulder rubs are frequent. The culturally specific birthing teams are now led by a trained birthing coach and are also being implemented in the Native American group by the Center's Native American guides/Elders.

The birthing team strategy has the potential to decrease infant mortality and increase healthy birthing outcomes. The effort is possible only within a community with strong relationships among women. As the Cultural Wellness Center continues to build these relationships and caring circles, we envision formally restoring this practice throughout the geographical area. These 30 pregnancies and deliveries have given us the opportunity to test the concept. We know it is effective. We have stories from mothers, and we have people prepared to support a widespread effort. The birthing team supports the mother and her family, and the healthcare team cares for her medical needs as they arise.

The Link Between Culture and Health

The mistreatment of Elders is a primary disconnect in the threads that unite the fabric of community. Cultural Elders are walking libraries but have been dismissed as useless or relegated to babysitting children who now speak a new language that the Elders neither speak nor understand. The Elders have been a bridge connecting generations. They offer hope for solving the dilemmas of the time. Without the Elders' teachings and guidance, each generation starts from scratch, always reinventing the wheel of sorts. The children and young adults do not have the benefit of the tried and tested practices of the old people, and the old people do not have the benefit of transferring their customs. The transferability of customs fights the phenomenon of shrinking borders and becoming a global community of one. The local groups in Powderhorn and Phillips are learning how to be in a foreign location and retain a sense of stability.

The sense of stability is possible because of the cultural infrastructure of custom, rituals, ceremonies, and practices. To lose these means to lose your own well-being, with nothing to replace it.

According to the U.S. Census report, over the past 10 years, of the more than 40,000 new arrivals from East Africa to Minneapolis, 95 percent have been placed in Powderhorn and Phillips and surrounding areas of Minneapolis. Our new East African residents joined the longtime residents of Native heritage and African American heritage who have lived for several generations in this geographical

space. These longtime groups have attempted to establish themselves over the years but, upon closer examination, we hear their statement of a serious dis-ease with their residency status. Many African Americans, Native Americans, Hmong, and Latinos say, "This is not my home. I do not feel welcome. My family is not here; I am alone. My nation is not honored, my people, my language is lost." These statements have laced the landscape of the Powderhorn and Phillips geographical areas and are manifest in the level of crime, homelessness, drug abuse, and child neglect for which this area is notorious. As the new residents join others in the space, this pervasive isolation and aloneness become magnified. People are visibly living with intense stress and collective grief and trauma.

Modern medicine and conventional healthcare delivery's treatment of sickness and disease in these cultural communities follows the historical track of the mainstream society's treatment of these groups in other areas of their lives. There are grave, long-term disparities between the health of these groups and that of the mainstream population. The Cultural Wellness Center was created by members sweeping across cultural groups in the area as a means of taking responsibility for themselves and

The work of mothering can be very hard and isolating, especially in the way our society is set up in the modern cities in which we live - i.e., living in nuclear families without a strong extended family and community to help raise a family.

engaging in a process that is empowering them to heal, to better care for their families, and to make positive connections within the community they are creating.

The work of the Powderhorn Phillips Cultural Wellness Center is about restoration, recovery, reconnection, and rebuilding. It is now time to go beyond surviving to thriving, creating, and giving.

V. WHAT OUR MEMBERS HAVE LEARNED

Members' Voices

“As we gathered for our monthly grandmothers’ meeting, we reflected on the things we had discussed over this past year. One of the grandmothers said, ‘We are building something.... Now I can see that what we have been doing over this past year is really about restoring our roles in society as grandmothers.’ Today she said that she can reflect back on all that we have done and the things we want to do in the future, and can see good things coming for our people. To hear this articulated so clearly really touched my heart and lifted my spirit so high that I felt as though the ancestors were truly smiling upon us and blessing us. The process of rebuilding and reconnecting is about engaging and re-engaging as we continue through the ways of our people. We are grateful for the space to do this work.”

—*Native grandmother*



“[The Mothering] Circle has helped me to feel empowered as a mother to my son and as a mother in community. The work of mothering can be very hard and isolating, especially in the way our society is set up in the modern cities in which we live—i.e., living in nuclear families without a strong extended family and community to help raise a family. It has been helpful for me to gather with other mothers to build a community of mothers, to support each other wherever we are on our paths as mothers, to help each other with practical aspects of mothering such as emotional support and spiritual support, childcare for when we need extra help, and sharing food together.

“Many Caucasian people do not grow up with a sense of having any culture. This leads [us] to appropriate others’ cultures or simply to walk through life without a sense of where we came from and who we are. The more disconnected we become from ourselves and each other, the more families, neighborhoods, and cities suffer. The work...to help European Americans connect with their roots is important to help us to be strong within our own culture so that we may better live in our communities and be in more meaningful connection with the cultures within the communities we live in.

—*A European American member*

Three Physicians' Voices

“After my work at the Cultural Wellness Center, I feel like I now have a foot to stand on within a community that is able to support each other and celebrate some aspects of European American culture (those worth celebrating—and there are many!) while at the same time recognizing the atrocities we have committed against our own people, against other peoples, and also the earth.... Sometime during a discussion...I realized that while my ideas of what needed to be fought against were well developed, I did not always have a clear idea of just what I was fighting for. Building a constructive vision of community will be an ongoing process that I have only begun during my time at CWC.... After all the ups and downs of these eight weeks, I feel like I have been healed in some way. I have a greater appreciation for my own skills, and far more important, a greater appreciation for my own heritage. The work...has made me feel like a stronger person and, by extension, I suppose, a better doctor.”



“I want to go back to the philosophy of pulling from people the unlimited and untapped resources that are lost within them, and the acknowledgement that I don’t have enough resources to save them. This is a great philosophy and practice not only for community organizing and public health, but also for my future as a physician.

My medical resources will be able to heal and save some people, yet there will be limits. I suspect that most of my ability to encourage/promote healing will come from the practice of working with individuals (and perhaps populations) to heal themselves.”



“As a newcomer to the United States of America, I observed that the majority of health professionals have good intention and goodwill. But when it comes to changing the intention into action, they lack the genuine commitment and passion, because they have not accepted the concept of power sharing with the communities. The professionals still work for the communities and not with the communities.”

SUMMARY

In our personal family histories, we, Atum and Janice, have uncovered the unspoken teachings that glue us together in the work of the Cultural Wellness Center. While one of us carries on a lineage of surviving through systematic community caring, standing up in the face of unprecedented turmoil, and initiating a practice for self-healing, the other carries forward a lineage of seeking spiritual knowledge as a bridge to change the systems and institutions that for so many people have replaced the person, the spirit. We are daily examining the intersecting of our lives as illustrative to our people.

The strategies to address isolation, aloneness, and disconnection from culture and community begin with bringing people together again to talk, remember, and share with one another. These simple activities, done in an environment that is warm and nurturing, have proven to have a powerful impact on everything from diabetes and heart disease to asthma and depression. We are studying the experience to sort out why simple things like talking, remembering together, and sharing with each other reach such deep places inside of our members’ minds and hearts and bodies. Upon

request, the stories pour forth from them of how long it has been since they have felt valued. Being valued then becomes the reason to value others, which strengthens them to participate in the Center.

Today we are honing in more and more closely on health, culture, and community. To restore these three will give us the strength to recover, reclaim, and rebuild a sense of well-being for us all.





HOPE COMMUNITY
The Power of People and Place



➔ HOPE COMMUNITY: THE POWER OF PEOPLE AND PLACE

INTRODUCTION

Hope Community has undergone sweeping changes throughout its almost 30-year history. But the core stays the same—belief in the power of people and place. Beginning with a hospitality house and shelter for women and children in a 100-year-old Victorian house, Hope has lasted through neighborhood devastation and disinvestment, believed in possibility, and created a working model for change. Hope has become a respected community developer that owns and manages 86 units of affordable housing and involves hundreds of people from surrounding neighborhoods each year. Our larger vision is becoming reality—250 additional units of housing, neighborhood commercial space, and a Hope-run community center that will transform all four corners of a long-abandoned major intersection in Minneapolis.

Ours is a dramatic story that's far from finished, but even more important are the ongoing stories within it. We are learning and teaching how an entrepreneurial approach can enable new models to evolve organically out of the community. Our belief in people led us to ground our work in community dialogue. Nearly 1,000 people have participated in this dialogue. Our core work emerges out of our listening and living in our community. Through our model of “relational

space,” we create not just housing but community. Using organizing, community building, and education, we relate to people as citizens, not clients. The talent and commitment of our staff who

create this web of leadership humble us. Through experience we have learned that consistent strategic thinking grounded in relationship and partnership can make major change possible.

As each day unfolds, we remember our guiding principles: that we believe in people, in possibility, in potential, in surprise, and that citizens—not only “experts”—can shape the future. We have come to understand that community revitalization demands both significant capacity with bold strategies to make real change possible and deep community connection at the center. We understand the potential for a dominant social service model to focus on individuals and negative assumptions—and to cause isolation rather than community. We understand the institutionalized power of racism and classism and other stereotypes. We believe in the power of people coming together around common goals.

Acting on our values and helping to build powerful teams with other ordinary people is very rewarding. We are surrounded by people on our staff and board and in the community who bring the best of themselves. We work with diverse groups brought together (and overcoming challenge) by common purpose. It is rewarding to see results, to see changes in systems and power dynamics, to see the growth in ourselves and others, to enjoy victories that lead to new questions, and to bring new questions or issues into public dialogue. The most rewarding of all is seeing both staff and neighborhood people recognize their collective power and build their hope for the future. We have big ideas that cannot be accomplished alone.

Hope Community was founded more than 27 years ago, but we have been working together for 10 years. Instinctively, we have focused this story on our work over the past four to five years, when Hope became a much larger, more public organization with a well-defined strategic vision for the future. We have come to believe in learning—learning from those around us and learning from our struggles, challenges, and successes. We don't seek to give definitive answers but rather to learn by telling our unfinished story. We welcome others who want to learn with us.

Deanna Foster
Executive Director

Mary Keefe
Associate Director



Hope Community Exterior

I. WHO WE ARE AND WHY WE DO THIS WORK

Deanna's Story

My working life began in high school at my mother's restaurant, located on Franklin Avenue in Minneapolis, only a mile from what is now the Hope Campus. After college I did many things, including teaching, directing a drop-in youth center, doing relocation work for the St. Paul Housing and Redevelopment Authority, directing a statewide social service membership association, and working as a lead organizer in a church-based citizens' organization in Minneapolis-St. Paul. I was driven by a passion for change and the creation of environments that opened new possibilities for people to act on their own passions. I wanted everyone to have the power to change what isn't working.

I first became familiar with Hope Community (then St. Joseph's House) in 1984, when I got involved in the peace movement with Char Madigan, the founder of Hope. Many of Hope's volunteers and workers were doing peace and justice work, including getting arrested for trespassing at a local company that manufactured weapons of war. A few years before that I had earned my M.B.A. while working full-time in a county administrative job. I was searching for some way to better use my creative energy for change. I remember well the answer to a question I asked at a seminar about advancing one's career in corporate America: "If you really want to advance based on competency, you need to run your own business."

Soon I started a company that helped women entrepreneurs stay focused on their dreams of owning successful businesses. But I was always looking for new ways to use my skill and live my passion. Because of that I became acquainted with Hope. I worked as a very part-time consultant on Hope's monthly newsletter, finances (I computerized Hope's books in 1990), and troubleshooting staff and volunteer relationships. In 1992 I agreed to a temporary co-directorship while the founder took a leave of absence. The following year I was hired full-time as executive director of Hope Community, marking the end of a long courtship with this extraordinary organization.

My long relationship with Hope gave me a deep understanding of the organization's roots, shortcomings, and potential for introducing real change in a neighborhood sorely in need of

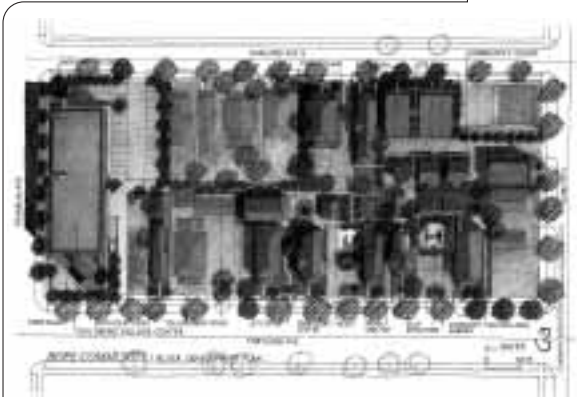
leadership. When I became executive director in 1993, I hit the road running. That first year I strategically started to plant the seeds for change and growth. I began looking for a community organizer immediately, and that is when a good friend suggested I talk with Mary Keefe.

Mary's Story

In late 1993 I was running the strategic planning phase for a multi-sector St. Paul Children's Initiative after moving back to Minnesota from New York. I had been in that job a

year and was looking for a way to get back to a community. A mutual friend introduced me to Deanna, who hired me as the associate director. I saw the potential for change, and I wanted to help shape the future. I developed and continue to direct Hope's Community Engagement work, raise corporate and foundation funds, and help with overall strategy and management.

Like many lower-middle-class women, I had gone to work, not college, when I was 18 and married young. I stumbled into church-connected activism as a young mother. When I discovered professional community organizing in the late 1970s, it became my passion. I organized for a multidominational church-based citizens' organization in Minneapolis-St. Paul that was connected to the Industrial Areas Foundation national network. In 1983 I was asked to move to Queens, New York, to organize with a large church-based organization with 10 denominations and a multiracial base. I worked with hundreds of community leaders on such issues as housing, drug-connected violence, the absurdly high cost of water in a large African American neighborhood, even potholes in the streets. But the issues weren't at the center—the people were. I was constantly energized by the power of everyday people and the possibilities in everyday public life.



Hope Community Block Development Plan

I also witnessed and experienced the reality of deeply institutionalized injustice. I learned about my own place in this work. In one sense it is my work—because the work exists to create the future of the larger community that includes me. But I learned that the work is not about my power; it is about helping to create opportunities for people to act out of their own power.

I became convinced that people can learn about their own power and build one kind of community as they work together for change. I came to believe in a style of organizing that is strategic and can be confrontational but is not the hard-driving, always polarized stereotype, nor is it soft or deferential. I believe in building capacity and possibility for the long term instead of always reacting to the latest crisis. I'm convinced that we must recognize the need for personal balance and health in this work. I learned about the power that's possible when people have opportunities to build relationships around what they have in common and value the differences they bring to each other—and when they have opportunities for consistent reflection and learning from experience.

After four years in New York I began to re-create my public self again. I was a part-time administrator at a large, creative adult-learning center while completing a bachelor's degree at New York University. In the late 1980s and early 1990s, as a contributing editor for *City Limits Magazine* in New York City, I covered stories about low-income women and children during the time welfare was “reformed.” I learned much more about the destructiveness of the welfare system—for both individuals and communities. I brought all of this to Hope. I try to really see what is in front of me, believe in people, contribute something useful, and always know that what is happening is much, much larger than me.

II. WHERE WE WORK

The Birth of Hope

It all began as a shelter and hospitality house for women and children in a three-story, red Victorian house about a mile south of downtown Minneapolis. In 1977 three Roman Catholic nuns started St. Joseph's House (St. Joe's), adopting Dorothy Day's philosophy of “comforting the afflicted and afflicting the comfortable.” The sisters took their passion public and convinced individuals and churches throughout

the metro area to support them. Over the years thousands of women and kids found compassionate shelter, dozens of volunteers came to the inner city, women and children who were and had been homeless built a community around St. Joe's hospitality, and the sisters became leaders in fighting against violence and injustice.

The Hope Block

What we now call the Hope Block surrounds the original house where Hope Community began. It is a piece of land central to our vision and our story. The block is adjacent to the intersection of Franklin and Portland Avenues, major arteries through the city. There are now Hope buildings on all four sides of the block and common space in the middle.

But back in the early 1990s, the block surrounding St. Joe's was a desperate place. The crack cocaine epidemic had claimed the streets, and many landlords had abandoned their buildings. St. Joe's guests and the families living on the block hid their children inside. Police regularly ran through the block with guns drawn, targeting drug dealers and prostitutes (desperate themselves) who broke into the deserted buildings. At the north end of the block where two major Minneapolis streets intersect, gas stations and a minimart were havens for drug deals. Just a few years later businesses had abandoned the intersection entirely.

But if you knew whom to talk to and what to look for, you could glimpse the future. Neighbors and volunteers connected with St. Joe's demonstrated against drugs and took action. By the end of 1993, Hope owned five buildings on the block (most were abandoned properties acquired for a dollar) and had recruited volunteers to fix a house and a duplex for rent to low-income families. In 1994 St. Joe's was renamed St. Joseph's Hope Community (now Hope Community, Inc.) and took on Hope's first publicly funded housing revitalization project.

As we began to work together, we quickly immersed ourselves in the neighborhood and its people. We listened and watched. We asked: What would make it work here? What would work better?

We didn't hold meetings to ask, “Do you want a playground?” We watched the mom go outside to give her child an

opportunity to play in an area that was in no way conducive to children's play. And we saw the barriers. People wanted to relate to each other, but they couldn't get from one yard to the next. So we took out the fences. And then we put a playground in. One pregnant mom was out there with her 2-year-old trying to sit down on some narrow railroad ties. We knew we needed a place for her to sit. If the kids got a playground, where would the adults be? So we built a picnic pavilion and some benches.

One horrible drug house had been in the neighborhood for more than 10 years. Because of that house, longtime residents on the block wouldn't even come out to talk. They said they had tried for many years and failed. They were burned out and weren't going to try again. Hope renovated a beautiful duplex next door, and the porch shared a driveway with the drug house. We finally had to put a fence around the porch, because the drug dealers boldly ran through it to get around the other fences.

The drug house was a triplex, with several small children living there who were terribly neglected and abused. The children were so desperate for something to do that they would climb onto the garage or climb over the fence, anything to try to reach our playground. The playground system had a crawl tube on the ground that was five or six feet long. We cut a hole in the fence and put the tube through it to give the little kids their own doorway into our place. The drug dealers would have to embarrass themselves to crawl through the tube, and some did. But the kids themselves were delighted. The kids' private door powerfully expressed the idea that drug dealers are not welcome here, but children are always welcome.

One day in desperation we called several of our donors and raised the money to buy that house (it felt like we were paying ransom), and now there's a new duplex in its place.

Step by step, house by house, Hope took back the block. Over a 10-year period beginning in 1990, the block was completely rebuilt. Gradually the destruction and violence began to give way to a new reality. The Hope Block has become a model for our Children's Village vision and a much larger-scale development.

Ten Years of Work

On June 8, 2002, the community celebrated a milestone. Hope broke ground for Children's Village Center, a four-story Hope building and the first phase of the rebuilding of the abandoned intersection. Hope youth formed a chorus and practiced for weeks to sing "We Are the People of the 21st Century" at the event after leading a procession around the block. Youth, not dignitaries, took the first shovels of earth, and two Hope tenants spoke about power, gentrification, and their hope for their community. More than 500 people celebrated, played, and shared a meal of ribs and chicken.

The celebration took place on Portland Avenue, on the west side of what has become the Hope Campus—two square blocks with revitalized Victorian houses, flower gardens that bring beauty and a sense of respectful caring, and brightly colored playground equipment that invites children to have fun together. A sidewalk winds from house to house, playground to garden, picnic pavilion to community room.

Low-income people live with negative perceptions about their neighborhood, substandard housing, and abandoned or neglected public spaces. People move often as they struggle with challenging conditions, and they are often isolated from their neighbors. Hope's quality housing is a welcome change, but the model goes further. Hope's "relational environment" draws adults and kids out of their homes to safe, attractive, and welcoming gathering places. When people come together, the seeds of community are planted and nurtured.

The kids' private door powerfully expressed the idea that drug dealers are not welcome here, but children are always welcome.

In 2004 Hope Community owns and operates 86 low-income rental units where more than 100 children live. Hope tenants represent the cultures in the increasingly diverse broader neighborhood, which is now 70 percent people of color: African American, Latino, American Indian, African immigrant, and Euro American. Hope's Children's Village Center has 30 new affordable rental units and Hope's new offices and community center in a four-story building.

There are another 10 new affordable townhouses and carriage houses at the south end of the Hope Campus.

Community Engagement is central to Hope's work. As we rebuild our physical neighborhood into a place that nurtures children and families, we create opportunities for Hope tenants and others in the surrounding neighborhoods. Hundreds of people each year are involved in youth

and family activities, leadership and organizing, art and community projects, community-based education, and community and cultural events. Hope's Community Listening model has engaged close to 1,000 people in small group dialogues about their community.

Until the fall of 2003 Hope's offices remained in the red Victorian that originally housed St. Joe's. (The shelter was closed in 1996.) A diverse, committed staff of 23, including an eight-member management team, is now based on the first floor of Children's Village Center. The building also houses community space—a large community room with a portable stage, activity rooms, a commercial kitchen, a wireless computer network for community use, and a children's play area with a large play structure visible from the street—a long-awaited sign of hope.

Children's Village Center is just the beginning. Hope Community has formed a partnership with another nonprofit developer, Central Community Housing Trust, to develop all the land at the intersection. When finished there will be 250 units of housing and more than 20,000 square feet of neighborhood commercial space.

We had talked about "going to scale" for many years. We didn't know what would emerge—what shape it would take. But we knew that all of the work we were doing, the creation of models, the learning, the whole process that we were going through, was leading to something.

We relate to people as citizens, not clients—this is central.

III. WHAT WE VALUE

Belief in People

The difference between Hope Community and many housing developers is the way we engage people in the neighborhoods surrounding us. We relate to people as citizens, not clients—this is central.

Hope is located in a low-income and diverse community. The median income is only one-third that of the overall metropolitan median. We have asked area residents about how they think outsiders perceive their neighborhood. They tell us, "They think we are all drug dealers and carry guns, that we are all bad parents and are all on welfare." Such negative perceptions can have the effect of a self-fulfilling prophecy. Those with political and economic resources limit investment of resources. Insiders affected by negative perceptions and the reality of poverty, substandard housing, and unhealthy conditions lose hope. The social service system that tends to focus on individuals and problems can reinforce the negatives.

Instead, Hope's approach focuses on community. Our staff has experience with a variety of models, but our living model has come out of our actual experience in the community. We apply what we know, and learn from what happens. We work in a multicultural environment where culture is always present in the strengths and relationships people bring, sometimes in the tensions among people from different cultures, in language, in people's perspectives and stories. We work to create an environment where culture is respected and where people can relate to each other across culture through what they have in common.

Hope is not an official representative community in a governmental sense, nor is it the only community in people's lives. We know that people build communities around their culture, history, religion, work, school, and so on. But people also tell us they want more opportunities for community in their daily lives. In our neighborhood, destruction created isolation. Hope's physical model offers safe and inviting spaces that challenge isolation. Our Community Engagement work creates opportunities for people to come together, build relationships, and build the future together. There is

a dailyness about this work. There is no one answer. The long-term building of community is a multifaceted and cumulative process that evolves out of lived experience.

We have learned to offer a variety of ways for people to connect with Hope. Often someone will come to Hope for one thing and get involved in another. Our community space is filled with our afterschool and summer youth program, special youth leadership opportunities, English language learning on Saturdays, intensive adult education during the week, art and community projects, and organizing and leadership opportunities. Our Community Listening Projects give people opportunities for leadership and dialogue with each other. At the same time they deepen Hope's relationships in the neighborhood and help to inform Hope and others.

An Alternative to Gentrification

The interrelationship between our revitalization and Community Engagement strategies is complex. Our Community Engagement work—especially our youth work—builds relationships and ownership among our tenants. When youth relate to each other across the many cultures at Hope, families begin to relate to each other and trust begins to build. We never create opportunities only for our tenants. We want to create long-term community, not a private club.

From the beginning our work in the community was much larger than the few people connected directly to our housing. We knew we wanted our community to extend to all the people around us. We have always joked that we didn't want to create the most expensive block club in town. We wanted a different kind of power dynamic in our community.

The political situation in the neighborhood was and is an important context for our work. There's a very real tension in this neighborhood. In 1994 we met with community residents and asked, "What do you think about the future? Will this neighborhood get better? One woman replied, "If it gets better, it's not going to be for us. We will be gone, because we won't be able to afford it." She was expressing a common viewpoint for a neighborhood dominated by renters and now 70 percent people of color. In the city as a whole, city-sponsored neighborhood governance roles were (are) held largely by homeowners—with relatively few

people involved overall and especially few people of color. Local politics are too often driven by narrow anticrime agendas, lack of imagination, and a vision of a gentrified future.

That governance scene intimidates and angers many low-income people from a variety of cultures. They perceive racism and stereotypes about low-income people. They say, "This isn't for us. Why should I participate? Life is a hassle anyhow and nobody seems to care about my concerns."

Instead of full-blown gentrification that would push out those who live here now, Hope has a different vision of the future. We see a mixed economic neighborhood with significant affordable, healthy housing for those who live here now and others like them. Our overriding goal is to revitalize community for the long term, with diverse, low-income residents developing roots and taking on leadership for the future as part of a mixed-income community.

Community Listening

We knew that we had to reach out to the community broadly. We also knew that very few people respond to "business-as-usual" public participation methods such as public hearings. We have invested deeply in our Community Listening model that creates opportunities for relational community dialogues.

The listening process is not simply a group facilitation method. We connect to adults and youth across many cultures through relationships in the community.

We wanted to get people truly representative of the neighborhood

to raise their voices publicly and talk about the meaning of community.

The discussion

was not going to be about what house was going to be where but about how people understand community. It would be about what people need to live stronger, healthier lives; about people's fears; about struggling with culture and language. It had to go past stereotypes and sentimentalism.

We use "listening sessions" that build trust and engage people around challenging questions that are important to them and their community.

We have completed three major Community Listening Projects, each including from 18 to more than 30 small dialogues. In each of these projects, people from the community help shape the process. We use group “listening sessions” that build trust and engage people around challenging questions that are important to them and their community.

A case in point is the Listening Project focusing on education and jobs, which started in 1997. We worked with other organizations and groups in the area to organize more than 30 dialogue groups, mostly with low-income people from diverse cultures. The project deepened our relationships throughout the community. We learned that people want to be part of discussions about things important to them. We don't promise that Hope will act on all the issues that are raised, but we invite people to be part of our effort to make a difference. People who were part of the dialogues helped write a report that went to everyone who participated. What we learned about people's experiences with and hopes for education and jobs still helps us shape our community-based education work.

As our revitalization role in the community grew, we began to apply the process to questions more directly connected with community development.

A Listening Project called “Community: Taking a Closer Look” focused on the meanings, struggles, and hopes people attach to neighborhoods and communities. It involved more than 300 people in more than 30 listening sessions with multicultural groups including youth, adults, and elders. People talked with each other and learned from each other about what community means to them. The published report lifted up people's voices about the multiple communities in their lives, about the strengths of cultural connections and the power in building relationships across cultures. The report talks about the importance of public spaces and opportunities to come together and the power of relationships and working together toward common goals. Anger about misperceptions and stereotypes is a strong thread in the report. And there is wisdom about threats to community, the critical role of youth, and specific ideas for strengthening neighborhoods.

We used our listening model in a collaborative project with the Minneapolis Park and Recreation Board around the future of Peavey Park, an inner-city park two blocks from the Hope Campus. Hope organizers involved almost 200 people, again multicultural and multigenerational. The principles that emerged were used by a group of community residents who worked with an architect to create what eventually was accepted by the Minneapolis Park and Recreation Board as the park's master plan.

The superintendent of parks took the risk to give Hope organizers the power to design and implement a process very different from business as usual. We didn't want fighting over specifics. Here was another opportunity to get people talking. We had to start with central values. We put dialogue about community at the center, because the park had to be part of the community.

Why Listening Works

The dialogues are always intended to bring people together for change around common values. People tell us our listening dialogues feel constructive. Too often, community dialogue happens in the midst of crisis and is divisive.

Organizers can be challenged by a listening process that takes many months; it feels like postponing action. But we have learned that listening is critical action. The listening sessions are always energizing. They remind us why we believe in people. People bring their deep thinking to a space you created. You develop the vision, you find the resources to make it happen, you find the people and build the trust. And it all comes down to this group in front of you. But the picture is bigger than the group in front of you. And so you keep going and have many more of these over many months, and then figure out how to bring that multitude of voices together.

The park experience offers a good example. Hope's organizers worked hard at good basic organizing. They initiated dozens of one-to-one meetings with community residents who used the park and/or lived or worked close to the park. They learned who some of the natural, everyday leaders were. They recruited a leadership group for the listening process by inviting 15 strong people together for the first listening

session. Some were from storefront churches across from the park; some were on teams at the park or had been involved with park projects. Most agreed to be on the leadership group; others were added as the process moved ahead.

The leadership group participated in shaping the dialogues, inviting others, facilitating the dialogues, and bringing together a report and list of principles for the park. At the center of the principles that emerged was the belief that the park must serve, welcome, and reflect the broad diversity of cultures in the neighborhood. The principles also reflect people's pride in their community and their anger about outsiders' negative perceptions. They wanted a renovated park to represent a public commitment and investment in their community as strong as that in any other community in the city.

What made it powerful and more than focus groups or "public participation" was the dialogue about the park as part of this community. People talked about the role of a park, and they talked about their neighborhood. Real community tensions were present in the dialogues. They talked about their anger as well as their hopes. In the end the dialogue was about their vision for the future of their community and the future of their kids.

IV. HOW OUR VISION GREW

Children's Village

What we heard through our listening projects was invaluable as Hope's plans for growth were maturing. In the context of our listening and our growing work on the Hope Block, we began to develop what became our Children's Village Vision. We came to call it an agitational vision, and agitate it did, outside and inside Hope. Inside Hope we were challenged to figure out the roles of housing development and organizing (but that comes later). Outside Hope the vision challenged people's view of what was possible.

Remember that the Hope Block in the late 1980s and early 1990s was representative of the worst of the illegal activity and deterioration in Minneapolis. By the end of the 1990s we had totally transformed it. We felt really good about that, but when we visited with then-Minneapolis Mayor Sharon Sayles Belton about it, she said, "Your block is fine, but that is not going to make the difference. It's not enough." She went on, "What about those places across the street?"

At the time she was getting a lot of pressure about our neighborhood, so she constantly took the opportunity to challenge us. Soon we produced the Children's Village vision. When she saw it she was shocked. "I didn't think you would go that far!" she said.

The Foundation of the Vision

We had started a group called the Franklin Collaborative in 1998 by going up and down Franklin Avenue (the major street that runs along the north side of the Hope Block) trying to meet owners of property and other business people.

Although hardly anyone was thinking about Franklin Avenue, Kurt Schreck was. He was the mastermind

behind Bruegger's

Bagels, which had its bakery on Franklin. When we told him the area could be redeveloped for housing, he said, "This area could be redeveloped for business." It was an "Aha!" moment. We could do this! We began working to create a new neighborhood model we would later call Children's Village.

Hope has always been resourceful at finding the players and motivating them to get together to start something new. Children's Village was no exception. Kurt Schreck was especially important because he understood the power of neighborhood business developments to transform an area. The Franklin Collaborative people understood the power of the Hope model and started saying: "How can we take the Hope Block model and expand the vision?" Together we pushed for a bigger picture.

As we were developing the Hope Block, we drew on volunteer work from professional architects and students who had participated in the American Institute of Architects' Search for Shelter, an annual weekend charette focused on designing buildings for those in the business of housing the homeless. Hope had used this resource many times. We earned a reputation for being one of the few places that actually built what was designed. Dennis Grebner, a professor of architecture at the University of Minnesota, met Hope through that process and wanted to work with Hope after he retired. He became the design architect for the Children's Village model. Dennis

Real community tensions were present in the dialogues. They talked about their anger as well as their hopes.

brought us Brian Wessel, a trained architect who has more than 30 years' experience in real estate development and is currently Hope's director of development.

In 1999 Hope Community publicly introduced the Children's Village vision for more than 16 square blocks in the area surrounding Hope. Six-foot-high, colorful drawings showing a revitalized neighborhood with infill housing, carriage houses on the alleys, pocket parks, and playgrounds hung on our community room wall. A "yellow brick road" pathway connected the blocks to each other and to Peavey Park. On a bridge over the freeway that had divided the neighborhood in the 1960s, the drawing showed hundreds of units of housing built.

Children's Village was always meant to be an inspirational vision, not a development plan. With city officials counseling us not to build on Franklin Avenue because it was a wasteland, we wanted to show another way. But the drawing included the Hope Block, declaring it a real place in the city. The reaction was strong. There were those who were ready to sign on, and others who thought we were crazy. Our challenge was to begin to make it real.

The Money that Made the Difference

Hope's individual donor base, nurtured by Char Madigan,

Hope's founder who has stayed with us, has been a critical source of funds for our entrepreneurial work. From 1994 on we built relationships with

foundations and corporations as well. (Because our work is not traditional social service, we don't receive government program funding.) We built relationships around the reality of our work as it evolved. Our strategy has been to stay focused on our mission and funding that supports it, and not be distracted by program funds that would pull us away from the mission. Many funders—more than 30 each year—have invested in our journey. The McKnight, Bush, and Minneapolis Foundations made a critical difference. Smaller foundations have invested

significantly as well. The Jay and Rose Phillips Family Foundation played a key role in moving the Children's Village vision to reality.

Pat Cummings was the executive director of the Phillips Family Foundation, which had funded our youth work for several years and had helped us buy the drug house on our block. She called to say her board wanted to do something significant about affordable housing. She set up a visit to talk about our Children's Village vision. She asked what would most help us begin to realize the plan. We told her we needed an "opportunity fund" to respond quickly when real estate was available on the open market. She asked how much we needed in the fund, and we replied, "A half million dollars."

Pat knew Hope well. She and her board knew that our plans would go somewhere. Shortly after we met with her, Pat called to say the foundation board was inviting Hope to apply for a special grant for an Opportunity Fund. When we asked how much, she said, "Oh, the whole \$500,000." The call came during lunch, and the whole staff was in the room. Everyone screamed.

We didn't fully understand at the time, but it was a unique vote of confidence in Hope. One day a handwritten check for \$500,000 simply arrived in the mail. We put it in the bank and lost sleep: How would we be good stewards of this gift? This serious investment called our bluff. We had a big plan, and suddenly someone believed in it and backed up that belief in a big way. We had to refine our own understanding of how we were going to shape our future. It's one thing to have an idea; it's another thing to be responsible for actually nurturing that idea and bringing it forward in a responsible way.

We never promised to build the whole thing. Children's Village was a vision. But it shocked people. Some were pleasantly shocked and then said, "Well, that was fun," and went on their way. Others were critical, saying we were unrealistic. Suddenly we were out there in the public eye, and we didn't know how Children's Village was going to happen. We only knew it would.

Usually when an organization gets a half million dollars, it has spent a lot of time thinking through what it will do—the goal, the cost, the staffing needs, the community input,

It's one thing to have an idea; it's another thing to be responsible for actually nurturing that idea and bringing it forward in a responsible way.

and so forth. Children's Village didn't quite happen that way. We got the money and had to create the strategy to make it happen.

Getting It Done

Today Hope is a co-development partner in the Franklin-Portland Gateway—the four-corner, two-plus-acre development at the intersection of Franklin and Portland Avenues, adjacent to the Hope Block. We first envisioned building at that location in 1995, and in 1996 purchased a large parcel of land on the southeast side of the intersection. After the Children's Village vision emerged in 1999, the abandoned intersection was the obvious target for expanded development. But property values had skyrocketed (partially in response to Hope's work), and private owners were holding the land.

Then in 2000, with our Opportunity Fund in hand, we were able to purchase another large site on the southwest corner. Now we had half the land at the intersection and something to leverage. That led to our partnership with Central Community Housing Trust and plans for the Franklin-Portland Gateway. Children's Village Center is a Hope-developed building whose Phase I was completed in 2003. The building encompasses all that Hope stands for, with affordable housing on the three upper floors and space for our Community Engagement work on the first floor. The housing was funded publicly; our capital campaign raised private investment for the first floor.

The very presence of the Children's Village Center makes a statement. It provides a visual reminder for neighborhood residents and others who couldn't imagine it before. The building also continues Hope's strategy as an alternative to gentrification. All of the rental units are affordable, which at the time we were planning for it was not possible. The city calls this an "impacted" area because there are already large numbers of low-income people. They said, "We don't want any more affordable housing here, and the maximum we'll let you build is 20 percent of the project." We just kept saying, "Well, we want it to be 100 percent affordable," and we kept going along acting as if it were possible. Over time, largely because of Hope's credibility, it became the accepted plan. (About 50 percent of the housing in the entire Gateway will be affordable.)

V. WHAT WE'VE LEARNED

Integrating Real Estate Development and Organizing

As the Children's Village vision was taking shape and getting attention, our Community Listening, involving hundreds of people, was giving us credibility with those who make decisions about public money for housing and other needs.

But internally we struggled with tension created by our dual mission of community development and

organizing. That tension is not unusual in community development organizations. The questions are about how a vision emerges from the community. There are questions about the roles of organizers and those who plan development in the organization. There are the challenges of needing to act on land purchase, design and other development decisions—and questions about when and how to involve people from the community. We faced all those questions. Because we had decided pretty early on that we were creating an organization that would involve land and housing at a scale that could have significant impact, we knew it was important to deal with those questions.

The Children's Village vision and drawings had emerged from Deanna's work with a small group of people. Many Hope staff asked, "What does this [Children's Village vision] mean, and how do we even talk about this plan that seemed to come out of nowhere?" We valued connecting to neighborhood people and creating opportunities for people to have power—both because of Hope's history and because it is our motivation for this work. We had to bring people—especially staff and board—along around all of that while we dealt with the realities of acquiring land, gaining credibility, and maintaining our organizational integrity.

Calling Children's Village an "agitational vision" just seemed to make sense. We needed to jolt public officials and others with power and resources out of their negative assumptions about Hope's neighborhood and its residents. In fact, the vision was grounded; it didn't come from nowhere. Hope's reality came out of a long history of immersion in the neighborhood. As we worked among neighborhood people, we watched, listened, and learned daily, both informally and in our Community Listening Projects. From that came the

We needed to jolt public officials and others with power and resources out of their negative assumptions about Hope's neighborhood and its residents.

Hope Campus and our model of “relational space.” The potential for major neighborhood change was becoming real, the stakes were bigger, and the new reality was emerging from many directions.

The Children’s Village explosion created many more questions: How does Hope’s organizing relate? Should we get neighborhood people to all of these meetings related to development? Our big real estate plans made it necessary

for us to attend meetings with the city, the state, the Metropolitan Council, and so on. So we had to figure out what organizing meant in that context. One thing we

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learned is that our listening is critical to our power. Our history of accomplishment gave us credibility, and our connection to the people in the neighborhood gave us respect.

We also learned that people in the community surrounding Hope want to know about the important things—they want more housing and they want it to be affordable; they want healthy neighborhoods. But they aren’t clamoring to be part of planning the buildings once the development begins. We have learned that community residents want to talk about and act on many things that have nothing to do with what Hope is doing at Portland and Franklin. For example, as we write, Hope’s organizer is working with people from the community (Hope tenants and others) to keep the local library open. Hope’s education and community-building work matters to community residents.

So we don’t try to get people to every public meeting or every meeting with the mayor. Organizing and listening develop their own rhythms. Organizers and community people take the lead on issues they initiate. Staff working to implement Hope’s housing development are guided by our extensive experience in the community. Our Community Listening continues to be critical to our future.

Shared Leadership

When we began to work together, Hope was so small that it wasn’t hard to be in constant communication. But as Hope

grew, the demands were greater and the challenge of shared leadership became more difficult. Each of us was focused on a part of the whole vision at Hope—Deanna on the physical environment and Mary on the Community Engagement strategies. We were on parallel and complementary tracks, but this comfortable division of labor could have left the organization divided and limited the future strength and impact of our shared vision.

Through a steadfast commitment to long weekly meetings, we built personal trust and professional respect, along with a strengthened partnership. We are still specialized in our focus within the organization, and our styles of leadership are different. But we are driven by our desire to make a difference to build an organization integrated around core values and a common vision. Many others have come to Hope driven by the same values, vision, and desire.

Our strong, talented management team continues to build shared leadership.

What makes it work is a creative tension that keeps it in balance. We don’t have two separate programs, but two critical parts of the organization to be integrated—and both have to be very strong. It happens because there’s a strong organizational commitment and investment in both areas.

Power Spaces

This is an organization built around power. We believe in people. We insist that people in the community be seen as potential leaders who have opportunities and possibilities. Now, that doesn’t mean that there aren’t problems. There are problems all the time. People have family problems; some are “bad” tenants now and then, and all that. But people are never to be typed. This is not about being Pollyannas. It’s not about ignoring reality. It is about a worldview that recognizes human complexity. We never diagnose and label people as social problems. Anyone can do bad things sometimes and good things sometimes. We relate to people as part of a community. Respect is at the center.

One 12-year-old showed us he understands community. He had lived across the street (not in a Hope apartment) for several years was a troublemaker. We continued to invite him into the community, asking him to leave when he was destructive. Increasingly, his leadership emerged and

surprised everyone. One day, challenged for overzealous behavior with an invitation to go home, he responded, “But I am home!”

We have learned we create “power spaces”—opportunities for people to do positive, powerful things and create community together. These are not neutral spaces. They are rich in values about community and accountability and respect and opportunities to learn and do important things. People have to be taken seriously. Every staff person can talk about our “standard” for treating people who come to Hope. In fact, the people who are here are constantly teaching the newcomers. It is something we feel and live. It is something we recognize when it is not there.

Our listening process is one kind of power space. Others are our community events, a potluck, a class, a youth or family activity, a park action, a community art project. We are always creating opportunities to recognize the reality of power. At our big groundbreaking celebration, two tenants spoke about gentrification and their anger about outsiders’ perception of their neighborhood.

Reflection is an important part of our work with all events, classes, and projects. One story we tell is about a community meeting with Paul Wellstone several years ago. When our staff was asked how they were feeling, one person said, “Fine.” But we asked her to go deeper, to think about what she had learned, what she felt, what she observed. We still bring up that story because we know going deeper makes it work.

Focused reflection helps people think from and act out of a bigger place, out of their core values. We ask people to talk about what happened, why it was important, how it relates to community, what could have been different or better and why, what should be different next time. We create an environment where people are given the opportunity and the structure to think and express themselves. In the world there is little space for that. The questions are never asked. We look to experts to interpret the world, but we don’t interpret it ourselves. At Hope we believe in learning from our own reflection.

There’s another way that the people at Hope speak every day. The people we rent to and those we work with create their own voices by creating their own history of being wonderful, healthy, vibrant members of the community. Conventional wisdom about poor people is turned on its side by the successful, thriving community of neighbors at Hope.

A Committed, Connected Staff

It’s important to have the right people in the right places to do the work that needs to be done in a way that’s connected to the vision. One longtime staff person says all the time, “We’re all very different here, but we’re doing something important together so we just work together.” That’s a wonderful statement about a diverse group of people hanging in there together, working through the struggles and making something happen. We are always trying to figure out how people who do all the jobs, from organizing and teaching to property management and bookkeeping, can connect to the vision and act out of it. Many become visionaries and strategists themselves.

There were very few times when we said, “We need this position; let’s go find somebody for it.” We have general positions in mind, and we develop plans and work inside budgets. But we have planned to develop a position and then haven’t hired for a year and a half. We needed to find the right person. A lot of people who have come to us, interestingly enough, also felt they were looking for something and decided that Hope was for them.

New staff members meet one-to-one with all 20 part-time and full-time staff to learn who their new colleagues are, what they do at Hope, and why they are here. After that, we often hear that “amazing people” work here. None of us is a genius, but people are amazing in their commitment to a vision. They are often willing to challenge themselves and take on things they hadn’t dreamed of doing.

Many on our staff have had many different jobs at Hope. We learn about their talents and interests and look for opportunities for them. One woman is now on her fourth position. She hadn’t ever worked in one place very long. She said, “As soon as I get business cards, that’s when I leave.” She made it past that. We ask her what interests her

and tell her what we need, and we ask her to think about doing the job. And she comes back and says, “Yes, I think I could do that.” She’s become a core leader.

We are clear that we have to act internally out of our core values, just as we expect people to do in relationship to the community. If you don’t see it internally, if you don’t see it here, we’re not doing it out there. That’s the bellwether. Even in the very early days, we talked about core values and relationships. That’s how you bring people together—through core values and a common vision.

After people have been around for a while, they figure out that we really are about uncovering, discovering, and creating in the community. One woman on the management team has totally internalized that. Five years ago when she started, there was much less structure in place. She would always say, “Just tell me what you want me to do.” Her values and her experience kept her here, and now she’s learned she’s free to get out in the community where she finds the opportunities and ideas. The energy from that process feeds her, and she brings enormous creativity and teaches other staff. That’s only one story of many.

Almost every person who comes to work at Hope—especially those who work in the community—is drawn here because of their values and because it seems like a good work community. But then they find out that the work is challenging, and often they need to learn to do things differently. It feels

risky to work with a team around core values and creativity instead of having a comfortable silo to work in, with specific tasks assigned. We work

hard to teach another way, and most people break through.

We learn from the challenges as well as the easier successes. For example, a relatively new staff person was working with kids in the community. She told a story about three kids. One kid insulted a girl. The girl’s brother got mad, but knowing he’s not supposed to fight, he found a younger boy to do it for him—to beat up the kid who had insulted his

sister. It happened to be the second day in a row that Henry, the younger boy, had been in a fight, and we learned the older kid had egged him on. (At least we knew we had partly gotten our message across, because the older kid knew he shouldn’t fight!)

Our staff person was struggling with the amount of violence in the kids’ world. Her question was, “What do we do? How much energy should I invest in counseling these kids?” We advised her that the bigger principle is not about one kid. This is about building a community. So when we talk to kids, we need to talk to them about community. They have to learn how violence destroys community. That doesn’t happen in one conversation, and it has to happen in relationship and in ways that make sense to kids. Our staff works constantly on this kind of thinking—translating our values to the real world. The staff person here is learning that you have to stay connected with your team, because that is where things get worked out. It won’t work if you think you need to do it alone. That is the nature of the workplace. It surrounds you. It is a very different way of operating, and most people haven’t experienced it.

That is why it is so important that we have this web of communication. We eat lunch together and are constantly meeting in the hall and talking and relating. We keep trying to get people to talk about what is happening. In that environment you plant the seeds for opportunities. Someone might come up with a different way or a different viewpoint or a new insight. To teach people to think this way, we find opportunities for people to learn and create together as they change what is into something that can be.

Examples and Stories

Kids’ Time: Many children and youth come to Hope’s Kids’ Time for years at a time. It is their place in the community, a place just to be together and enjoy new experiences. They can talk about their struggles and to work out extended relationships. They relate to many different people. This year, for example, in addition to our youth coordinator, a white woman who is a former teacher, a young Latina mother, and a young African American man are youth workers. Our community organizer and program director have worked with the older kids on special projects and youth listening sessions. Older kids help with younger kids. Kids plan special events, such as an end-of-school celebration.

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They study nature and go hiking. They take leadership roles. As one Hope kid said, “When you are at Hope you can’t fight; you have to do things differently.” Another, asked about what he has learned at Hope, said, “I learned I have to apologize when I am wrong.”

Art and Dialogue: We collaborated with Intermedia Arts, a community art organization, on issues around gentrification. Sixty youth and adults (some Hope tenants and other neighbors) worked with two mosaic artists on three community mosaic art pieces. Several youth took formal leadership roles, helping with planning, design, setup, and recruiting. Everyone involved learned to do mosaic art and identified themes related to culture and community. The completed pieces are installed over the doors of Hope houses. Youth helped plan a celebration to present the project and the art. After the eight-week project, Hope staff organized three reflection sessions for youth, adults, and the staff and artists involved. Youth talked about creating tradition. One young woman said someday she would bring her grandchildren to see what she had made.

FATA: In response to concerns stated by parents and youth during Listening Projects, we conducted dialogues with Somali and African American adults and youth. The dialogues were an opportunity to share stories, history, and concerns, as well as ideas for community building and organizing between cultural groups. That led to a youth leadership group named FATA (First African Then American). Over many months dozens of youth became involved and participated in leadership and organizing training, as well as social activities and working in some public high schools where tension existed among cultures. FATA became an important public power space for youth, many of whom return to Hope periodically. The group has spun off from Hope and is currently exploring the possibility of creating an independent organization.

Education: Our English Language Learning Program, a collaboration with the Minneapolis Public Schools, has been recognized as a model because of the supportive community environment created by Hope staff. Hope runs a strong adult basic education program for people who want to continue their education or get better jobs. The program was developed at the University of St. Thomas and was moved to Hope when the university decided to close it. A longtime connection

with the College of St. Catherine led to a writing class for Latinas at Hope. Work with St. Mary’s University of Minnesota led to a collaborative class, “Understanding Power and Strategy.”

Peavey Park: Community residents on our Peavey Park Leadership Team asked the Minneapolis Park Board to approve their plan as the master plan for the park. That meant training sessions, strategizing, and meetings with key commissioners. Finally they enlisted their neighbors to attend the park board meeting where 40 community people supported them as they presented their plan and cheered as it was unanimously approved.

Franklin Library: In March 2003 Hope began to work with community members around the sudden proposal to close the Franklin Community Library and Learning Center, an active, community-connected place. A Hope organizer has played a central role in training and developing strategy, with community members taking on several related issues.

A Hope tenant story: An immigrant family with five children came to live in a Hope apartment after surviving difficult times made worse by past deportations of one parent. At Hope the children, parents, aunts, uncles, and grandparents found a place in the community. Their children were consistently involved in youth activities, and the mother helped organize Mexican cultural celebrations that other community members attended. After five years, in 2001 the family purchased a home, and in 2002 one of the boys who “grew up at Hope” returned as a youth worker.

Tenants into leaders: Hope tenants become community leaders. For example, a Somali tenant whose kids were the focus of racist attacks by a few Latino kids talked to the staff and then insisted on talking to the parents herself. She told the parents, “This is a place where you just work things out among yourselves. This is a community. We can’t let this happen here.” Another Latino father still struggling with learning English has been on a Hope safety committee and has been a spokesperson at meetings with top police officials. He has also been a leader in the Franklin Library work and has gone door to door to talk with other tenants. He was a student in our “Understanding Power and Strategy” class. He says what he’s learned has made a difference in his family and his work.

Personal empowerment: Three women among our tenant families began at Hope several years ago in a transitional shelter we no longer run and moved on to our rental housing. All three have been stable, involved leaders. They have gone to school and moved along in the job world. Two still live at Hope and have been on the Hope board. They gave public talks at our 2002 groundbreaking celebration.

We have always recognized the importance of building capacity for the long term. We said that if we're going to make these kinds of promises in this neighborhood, we need the capacity to do something about it.

Strength from stability: All of our tenant families have incomes below 50 percent of the area median income—most are closer to 30 percent. Our experience is that very low-income families, even

when they don't significantly increase their incomes, can do well in our affordable, attractive, healthy rental units supported by

our community-building work. Families often stay in the apartments for several years, adults keep stable jobs, and children stay in the same schools.

Uncover, Discover, Create

We are criticized for not having a linear, goal-directed approach. We don't assume where we are going. We ask: Who's here? What are people experiencing? What are they believing and hoping? What is their understanding of community? And what is our understanding of all the things we've done? We keep trying things, building understanding, and building community around ourselves. We are about uncovering, discovering, and creating. The process is natural. It grows organically.

But it's more complex than that too, because at the same time there's strategic thinking going on. We also have to ask: Where is the land out there? Where's the money? What are the opportunities? Where are the potential partners? What are the potential pitfalls? How could all this fit together? What would happen if we did this?

We may try things that don't necessarily succeed on their own but end up teaching us something and creating other opportunities. We bought a house and ended up selling it a short time later, but we recouped our money, learned about the block the house was on, and from that house came one of our best tenant leaders. Another lesson came when we were smaller. We tried having our own construction company, learning quickly about the limits of that strategy and acting accordingly. Sometimes we create community opportunities and few people show up—even when people have said that's what they want—and we have to learn from the experience instead of blaming those who didn't show.

Intuition is important, but intuition isn't just a random thought. It grows out of strategic, integrated thinking. We operate in a huge matrix of reality. We don't focus just on relationships with people in the neighborhood but also on the real estate developers, the people buying and selling real estate, and, yes, often ripping people off. We immersed ourselves in that community because we had to—it was going to have a big impact on our neighborhood. We have to deal with the city departments and a multitude of other public agencies. We immersed ourselves in the whole picture and learned from it so we could strategically respond to opportunities.

We have always recognized the importance of building capacity for the long term. We said that if we're going to make these kinds of promises in this neighborhood, we need the capacity to do something about it. We figured out how to get a computer network very early on. We are always on the lookout for staff talent. We hired a controller when we saw the organization growing large enough. We look for partners to make possible what we can't do alone.

One of the dangers is to get compromised and drawn off course by new things that come along that don't build on our strategy. Things that emerge have been thought about and nurtured for a long time. Either the work is building toward an opening for a new opportunity, or we have talked and strategized about something over and over again. When that's the case, we're right there. If the opportunity's there, we're on it and it's done. People think that's impulsive, but it's totally the opposite—it is strategic.

We constantly reach out to other organizations and look for partners. Sometimes it's a major partnership like the Franklin-Portland Gateway, but most partnerships are informal, long-term relationships. We look for people and organizations that believe in people. Partnerships, even informal ones, are always challenges, but we know we can't do it alone.

When we were building up the Hope Block, we intentionally did not let our PR get ahead of the reality. We were building relationships with funders and other strategic partners, building community relationships. We let our work speak for itself as it was built. Building a strong organizational base with the capacity for major action takes time. If we had done the Children's Village plan the second year we were working together, we would have been crazy, because we didn't have enough capacity.

In the beginning we would listen deeply to what was there, and the way out would come clear—the way out of the blindness and the broken spirit and the loss of hope. It's easy to think, "We won't even try anymore." Over and over we heard that. So we knew that it required what we've come to call *profound patience*. We took things slowly. We couldn't preach to people or pretend to have the answer, because that would only provoke people into remembering all the times when nothing worked. Instead, we had to be subtle. We really didn't have the right to call people to a bunch of meetings. It wasn't that we were so brilliant that we necessarily knew that wasn't the way to do it; we just knew it wasn't the way to build trust. It wouldn't create what we wanted to create. We didn't want to be responsible for more dashed hopes. So we just continued to believe that there were other options and we would continue to build a reputation.

Profound patience is the key because challenges and past disappointments are large. We are relentless in pursuing change, but it will not happen overnight. Our work is about the future of communities; tensions around race, culture, and poverty; and challenges our entire society will face for generations. What we can't change, or what we can't accomplish, or what is still broken can weigh us down. But we have to

believe that what we *can* do is important enough for our passion and best thinking and action. And we have to own and celebrate the changes, accomplishments, and victories.

We think about what would have happened if we had demonstrated and tried to force people with power to do the right thing. People with power would have had no idea what to do. One person said, "What you have done here is really what a city planning department should do. You've done some major neighborhood planning just out of this little organization." We had to shape the vision and then make our vision happen. We stirred people up. And it's working.





FREEPORT

Culture, Community, and Personal Change



➔ FREEPORT WEST: CULTURE, COMMUNITY AND PERSONAL CHANGE

INTRODUCTION

From the beginning, Freeport has been guided by the principle that participants in our programs, if given adequate resources and opportunity, are capable of identifying and articulating their own needs and goals and orienting their lives in positive directions.

Founded in 1970 by a group of activist youth as a shelter for runaway teenagers, Freeport West is now a multifaceted, community-based human services organization. Freeport's Project Solo works with young people who are homeless or from unstable homes, teaching life skills, providing education and employment support, and working to reunite and strengthen families. Freeport's Family Assessment and Support Services program also works to reunify children with families and strengthens family systems by offering parenting and life skills support.

In these programs, Freeport is committed to asset- and resiliency-based approaches to helping community members better their lives by drawing on their own abilities. We focus on community members who have become—or are at imminent risk of becoming—entrenched in high-cost intervention- and crisis-based service systems.

We build on individual, family, and community strengths and natural networks of support to help those we serve see themselves as people with something to bring to their families and communities rather than as individuals with problems to resolve. We also strive to provide them with knowledge and tools to avert crises in the future.

Experience has taught us that, though the people we serve face many challenges, they also have a deep reserve of resiliency and creative energy they can tap to change their lives in significant and enduring ways. Our role is to support and assist such changes. The voices of community are our guides.

We believe that our strength comes from understanding our history and the principles at this agency's core. As an agency dedicated to (1) supporting and following community direction, (2) addressing cultural realities, (3) providing strength- and outcome-based services, and (4) maintaining a commitment to learning, we also look to the future and consider strategies for innovation and human services reform.

Repa Mekha
Executive Director

Kathryn Rosebear
Development Officer

I: WHO WE ARE AND WHY WE DO THIS WORK

Repa's Story

I came to Freeport in 1990. When I applied to direct the Group Home at Freeport, the hiring process included an interview with the people living there. Even then, four of five youth in the home were young black males from Minneapolis, in and out of placements and corrections. As we walked through, I heard one of the young guys, a leader in the group, say, "Yeah, that's what I'm talking about." It was a strong sign to me. I came to Freeport with a deeper purpose than those who hired me sensed.

I have always had a strong sense of personal mission. Almost 25 years ago, as a young man, I was in a locked-up facility in Wisconsin. One day as I was thinking about my future, a question came to me: "What was my purpose for being, my reason for being?" And as quickly as the question came, the answer did too, in a language and words not common to me then: "The enhancement and the perpetuation of black people."

When that young man said, "That's what I'm talking about," it told me I was in alignment with what I was supposed to be. I came to my work with young people and their families knowing I was meant to be their advocate, to ensure the consideration of what they value of their lives, their heritages, their culture. I came to Freeport with a strong belief in community, far greater than the organization then held. My reality

said that people exist in context of family and community, that community develops individual and communal personality, and that community holds people and their culture. I believe that community and culture keep people rich and nurtured. Belief in people has shaped all my thinking and feeling and work.

I see my work as being greater than me and greater than Freeport, just as the wisdom is not bound by me or Freeport but lives within something greater.

I was the first person of color on Freeport's management team. I joined Freeport just as the organization was beginning to examine some of the traditional assumptions behind youth work and social work. I brought a cultural and philosophical orientation—quickly valued by then-Executive Director Jan Berry—that focused on the collective good and interest of family and community. My first job was to redesign the group home into an emergency shelter, reducing the amount of time young people spent in this transitional setting.

My sense of and experiences with community and culture often reflected the experiences of Freeport's program participants, who in all Freeport programs were most often of African descent. For instance, in the community where I grew up, there were no "homeless youth." Though the youth may have fit the standard social service definition of homelessness, youth who were not living with their parents were not necessarily considered homeless in my community. They might be staying with a grandmother or aunt, with an older sibling, even with the woman down the street who had always had affection for them, or perhaps, in any given month, with some or all of them. With extended families came extended solutions to youth who could not reside with parents or had no guardians. Even today you will hardly find the language or concept of "homeless youth" in the daily conversations of community members.

As early as 1983 Freeport was already thinking about family systems and the impact of family on the youth served. Occasionally we hear other youth providers talk about creating a "youth culture." But youth is an age, not a culture. Culture runs vertically

across generations and horizontally through a broad range of integrated experiences. Neither aspect is bound by age. Our youth need access to and support from their communities. Too often they are already too isolated, in almost exclusive contact with each other.

If we were to be more effective, we knew we needed to change Freeport's culture. We took one step in 1993, when we brought in People's Institute training, which helps organizations and communities "undo" racism. During the training, Ron Chisom, the leader, asked us to help him draw a picture of what a "poor" neighborhood—the "ghetto," the "barrio"—looks like. We added many of the pieces you would expect: the railroad tracks, run-down homes, lots of convenience stores, check-cashing bureaus, liquor stores, red-lining banks, lots of social service agencies, a freeway dividing the neighborhood, and so on. He went further to detail how these institutions were intricately connected and depend upon each other to survive, deploy valuable resources from the community, and sustain conditions of poverty and dependence. Ron called this a "foot analysis," or an example of the "foot" of the dominant culture on the neck of the "poor" community's people, holding them down.

It was our first full-blown, clearly articulated view into "systemic" racism. This was especially enlightening for staff members of African descent. Until then we had framed our experiences as an ongoing collection of "race-based, negative episodes," as opposed to an integrated system of race-based oppression. Staff members of other cultural backgrounds talked about how it had changed their thinking too. This training is now mandatory for new staff.

We also looked at the language we were using. For example, we got rid of the term "client" and replaced it with "customer," to reflect the partnership between the organization and the people we serve.

Language is one of the most powerful mediums I know of. It's often the bridge between what is and what can be. Most people don't realize it, but there is "potential" that lives in the language that transcends the idea or expression that the language is being used to describe. The idea created at a point in time may come to pass, but the seed potential buried in the language used can settle into your personal or organizational soil and become part of your foundation. This constant conveying of potential is critical to our work.

Kathryn's Story

What brought me to and keeps me in the nonprofit world, and at Freeport in particular, is the chance to work "where I live" — and to live what I believe and feel. For more than 30 years I have had the privilege of working in ways that are consistent with my spirit and values.

I have been at Freeport since 1991. Over the years, the demographics of the kids and families we serve haven't changed much, but the way our organization has responded to them has changed dramatically.

I believe Freeport would never have become the agency it is now without Repa's influence and leadership. We were a "dominant culture" organization, trying to be at the forefront of our work but basing our approach on our learning and experience as members of the dominant culture. Right from the start, Repa steered us to a different course, putting family, community and culture first. He suggested — he promoted — a different hierarchy, a different set of priorities. That changed Freeport at its core.

The change brought about by the People's Institute training is a good example. This wasn't the kind of "diversity" training, unfortunately pretty common in those days, that asked us to accept and celebrate our differences. The People's Institute definition of racism — "race prejudice + power = racism" — originally made most of us who

were white really squirm. By accepting the definition of racism, we had to accept that we were racist — benefiting, whether we were conscious of this or not, from the power and the privileges of being white. I struggled with that definition well beyond the three days of training. Ultimately I believed it. When you believe it, it changes the way you think about your world, and that changes the way you act in it.

I think the role I play here is that of a watcher, a listener, a learner — and then a translator. I have tried to find ways to talk about Freeport's work among families in our communities, to bridge the language between traditional social service systems and Freeport's more organic, community-based approach. I want to be a keeper and teller of Freeport's story, using it to help others understand the meaning of our work.

II: HOW WE EVOLVED

Freeport Group Home

The seeds of what would become Freeport were there from the beginning. A group of young adults established Freeport as a shelter for runaways in 1970. After returning to Minneapolis from a youth conference on deinstitutionalization in Freeport,

Massachusetts, they held a few fundraisers, talked a few professors and judges into supporting them, found a house, and opened their shelter, basing their work on this premise: that if you engage young people, even young people in crisis, in a discussion about what is

important in their lives, they can tell you. And if you have the courage to walk with them down that path a little further, they can contribute to solutions and strategies that can get them to where they want to be.

What brought me to and keeps me in the nonprofit world, and at Freeport in particular, is the chance to work "where I live" — and to live what I believe and feel.

This founding principle has become a part of the spirit of Freeport and has driven the agency in its work with youth and families for more than 30 years. Although the initial shelter that was called Freeport closed in the early 1970s, it was more for lack of management skills than lack of vision. The board of directors remained focused on its vision and determined to keep the agency's ideas alive. Recognizing a broad range of needs among youth, the directors wanted to develop services for those who do not fare well in more traditional service settings. They stored the furnishings and other property from the shelter in a board member's garage and continued to meet. In the mid-1970s, Freeport was reborn as a group home for adolescent boys leaving correctional facilities and moving back to their homes and communities.

During the 1970s, while Freeport operated the group home, board members and staff were persistently frustrated that boys who developed a new, better sense of themselves, their lives, and their potential while with Freeport were sent back to their families, the original setting for many of their problems. Most boys in the group home came from families with too few resources — emotional, social, and/or financial—to care adequately for their children. Common stresses in these families included persistent poverty, inadequate education, long-term unemployment, and unstable family relationships. Many boys came from single-parent families headed by mothers who had given birth as teenagers. Boys returning to these families could not get the support, mentoring, and modeling they needed. And nothing was being done to help their families.

Family Assessment and Support Services

In 1983 Freeport started Family Assessment and Support Services to provide youth and their families with services aimed at keeping families stable and intact. Staff conducted family assessments to provide insight into the families where young people would return from the group home. At this early stage in Freeport's development, the agency's approach was primarily therapeutic. Freeport did not yet recognize that families possessed powerful insights and the capacity to guide the agency. But even at this stage certain principles were well established at Freeport: Families were asked to identify their needs and to talk about what would make a difference in their lives.

The initial program employee, George Kressin, is still with Freeport today as clinical director. He brought a family systems approach to the program that eventually led us to provide family services. These services were aimed at keeping families together by building on family strengths and assets.

In the late 1980s Freeport began working under contract with government funding to provide intensive in-home and community-based services to families with children at risk of neglect or abuse. Family Assessment and Support Services' staff worked to help families learn to care for their children and keep them safe, avoiding the costly alternative of out-of-home placement.

Project SOLO

Freeport staff were becoming aware that some youth in the group home—those in particular with families facing deeply entrenched relational conflicts, chemical dependency, mental illness, or other barriers to stability—were not likely to live with their families again. Staff were also aware of a growing number of youth who were homeless, living in abandoned buildings, parked cars, or more dangerous, exploitive situations. Freeport started Project SOLO to teach these youth what we then called “independent living skills.”

We no longer call them “independent living skills,” because we know that nobody really lives independently, youth or adults. We are all members of community, interdependent.

Though informal, SOLO was not a “drop-in center.” Youth visited the SOLO house, an informal gathering place in one of Minneapolis's near-south neighborhoods, to meet with case workers and participate in the formal life skills curriculum. The house was a center of teenage energy, and anyone visiting could find, for instance, young people cooking and eating in the kitchen, playing a group game of “STD Jeopardy”

in the living room, working independently on a life-skills lesson, or sitting in a dining room chair while the program director cut their hair for a job interview. Young people found the program by word of mouth and often arrived knowing others already there. The changing program demographics reflected this trend. For a while, SOLO would have large numbers of teen mothers, for instance, and then another group of youth, such as young men of color, would take over.

These three programs—the Freeport Group Home, Family Assessment and Support Services, and Project SOLO, comprised Freeport during the 1980s.

It is important to emphasize that each Freeport program evolved

from those that preceded it, in response to the experiences and reflection of staff and needs identified by the community.

Legacy Shelter

In 1990 we proposed to Freeport's government funder that the Freeport Group Home become a program more broadly accessible to youth in need. We were especially concerned about those youth who had been churned through the social service system from placement to placement and ultimately had been rejected by most of them. We converted the group home to Legacy Shelter, and it became a part of the government's "emergency shelter system," serving fewer residents for a shorter time. Though technically an emergency shelter, Legacy was actually used for sheltering youth whose behaviors had made them unwelcome in other care settings, including other shelters. Legacy agreed to a "no reject, no eject" policy for youth in the program.

We questioned the degree to which prior placements had recognized and understood the impact of cultural identity and racism in boys' lives

Although Legacy agreed to work with those youth rejected by the system, too often government staff—desperate for any housing for some youth under their jurisdiction—interpreted this to mean that Legacy would have to accept any young person sent to it. This sometimes meant that the mix of youth in the shelter was uncomfortable. For instance, youth who had been victims of sexual abuse shared the house with hard-nosed street kids, and youth who were suicidal were placed in a facility adjacent to a bridge over the Mississippi River. It also meant that youth whom the government staff found difficult to place often stayed at the shelter for up to a year or longer rather than the 45 days initially intended.

We began to look for reasons why these youth were so often "lost" in the system. We tabulated demographics for youth in the program over time and looked at the cultural backgrounds of the youth, their communities of origin, the placements they had already been through, and plans for their future placement. Legacy youth were generally younger adolescents of African descent with repeated out-of-home placements. In nearly all placements, no attention was paid to the impact of culture and family systems for people of African descent. "Diversity" was often expressed solely through Martin Luther King Day celebrations or wall posters.

We questioned the degree to which prior placements had recognized and understood the impact of cultural identity and racism on the boys' lives. Despair at seeing these young men cycling repeatedly through the social service system led us to examine racism and the role of culture in serving youth and families and, ultimately, to revisit our own mission.

The Impact of “Isms”

In 1992 Freeport began to investigate the systemic origins of racism and its impact on the youth and families served in our programs. We began with training on multicultural issues and “isms” (racism, sexism, ageism, and so on) to help lay the foundation for a more multicultural, inclusive organization.

The trainers recommended we keep learning—and transform the agency, starting with a Diversity Committee with representatives from all levels of the agency and from each program. Noting that the majority of staff saw racism as the most pressing issue, they recommended we first develop a plan to confront racism within the organization. We called our committee the Equity Leadership Team and charged it with leading Freeport toward a stronger multicultural climate.

A second recommendation was to establish cultural affinity groups for staff to support each person’s cultural identity and voluntary leadership roles within the organization. Two groups emerged immediately: Jahi, for staff of African descent, and Green on Mondays, for GLBT staff. Staff in these groups shared experiences and concerns about their cultural identity within Freeport, worked to make sure that the cultural values of employees were addressed and included, and eventually began to look at ways to work together in the community to share their collective cultural strengths.

The first Jahi meeting was held off-site, at Repa’s house in the community. But staff with a stronger cultural identity were a benefit to Freeport, bringing the cultural perspective of the people served here. So after a few meetings, Jan Berry agreed to let this and other support groups meet on Freeport time. This policy was important to acknowledge the cultural realities of our staff, and to recognize that our agency and the cultural identity of our staff could not be separated.

In June 1993 Freeport staff participated in training on undoing racism led by The People’s Institute for Survival and Beyond, a group originating in New Orleans, which not only trained but organized communities to “undo” institutional racism.

This training, conducted by the Institute’s leader, Ron Chisom, provided us with a working definition of racism—“race prejudice + power = racism”—and a framework for understanding how racism is institutionalized in American society. The People’s Institute training remains mandatory for all Freeport staff members.

Until we began work on the systemic nature of “isms,” Freeport was largely defined by the dominant culture. Now staff were beginning to think about the idea of “multiple realities.” We applied this new learning to our work with youth and families, understanding better the day-to-day challenges that people of color endure. Understanding the systemic nature of racism also gave us a sense of the interconnectedness of people’s challenges and struggles. This shift in our work and thinking positioned us to move closer to our community and was critical to our transformation.

III: HOW WE CHANGED

A Positive Mission

As we looked at undoing “isms” within our organization and at integrating and sharing the innate strengths of staff and agency into agency programs, we also looked at our mission. Freeport’s mission at that time was to eliminate the effects of abuse, neglect, institutionalization, and violence on youth and families, a mission decidedly rooted in reducing or eliminating negatives. As we acknowledged the cultural realities of youth in the program, we began to question and change some of the language Freeport (and most social service agencies) used to describe our work.

A board/staff committee began to look at revising the mission. The committee held focus groups and one-to-one discussions with community members and program participants. After nearly a year’s worth of discussion and drafting, with particular attention to language, the board of directors adopted a new mission statement in 1993:

- Freeport’s mission is to support the efforts of families and communities to create environments where all children can thrive.

- The children, families, and communities with whom we have joined guide our efforts.
- We contribute resources and skills and actively support the efforts of youth and families.
- We work with those youth and families most likely to experience poverty, oppression, institutionalization, and violence.
- Because we believe that poverty, oppression, institutionalization, and violence are barriers to the creation of healthy environments, we actively challenge these conditions.

The new mission indicated clearly that children and youth would be considered within the context of family, and families within the context of community. Also, the mission stated that the community must have the lead in agency initiatives and that Freeport must take direction from the community. Also, for the first time, the mission declared that Freeport's role would be to challenge the very real but invisible systemic barriers—including racism—that stood in the way of healthy, resilient lifestyles for our program participants. Freeport's new mission statement acknowledged that community was bigger and more powerful than Freeport, that community had inherent strengths and resources, and that Freeport intended to learn from community.

Worded in strong, positive language, our new mission statement moved us away from a deficit-based approach to our work. We no longer defined our work as the service necessary to eliminate abuse and neglect; instead, we were now supporters and partners in the creation of healthy families and communities. Inevitably this led to discussions about how we watched for and marked the progress of participants' growth, how we defined staff job responsibilities, and how we measured and determined the effectiveness of our efforts.

The “Outcomes” Challenge

Government contracts remained at the core of all three Freeport programs: Family Services, Project SOLO, and Legacy Shelter. All of these contracts purchased “services,” not results. In our Family Services program, for instance, we recorded every quarter hour of service to document that we had spent public money wisely. We detailed service delivery in the following categories: advocacy and consultation, assessment, community resource development, counseling, basic needs provision, parenting training, and respite care. We documented that the families who received our services and had a history of child abuse or neglect became better able to parent their children or meet their children's basic needs, but we did not have a methodology that matched our emphasis on participant-directed, strength- and community-based services.

Project SOLO and Legacy documented similar services, using similar systems and categories of services.

In the spirit of our founding and new mission, we often argued with our contractors and funders for the right to do things with program participants that would make real and enduring differences in their lives. For example, at Legacy we had to document that the boys in the program were going to school and getting jobs, taking care of their chores, and coming back to the shelter on time. Although these were behaviors worth capturing, they fell far short of what it would take to build the strong, culturally confident, and resilient qualities needed to manage change in their own lives—specifically up against the larger cultural odds facing them—and to see themselves as contributors to something larger than themselves: community.

Just as we were thinking about ways to better document the change in our participants' lives, there was a move among many government entities to fund “outcomes,” rather than “input.” Proponents of “outcome-based funding” suggested public dollars

should be “invested” in a product, whether a garbage pickup or the problem of homelessness. The return on investment would then be measured in “changes,” not expenditures, and tied to real outcomes. While we supported this change and believed that both program participants and funders would be better served by outcome-driven systems than by traditional funding mechanisms, defining what would be considered “meaningful documentation” in terms of actual outcomes remained problematic.

Jan Berry, the executive director at the time, was particularly concerned that if we did not take the lead in defining hoped-for outcomes for program participants, they would be decided for us and our participants, without much, if any, input from us. We were also concerned that the outcomes defined might not reflect the personal, cultural, or community experiences and knowledge of our participants.

Our experiments in defining and measuring outcomes began with Legacy. First, however, we needed to address the cultural realities of youth in the program so that outcomes would match up with the experiences and expectations of their community. Some of our greatest challenges were the result of cultural assumptions: The agency had viewed its work through the lens of the dominant culture, as had its larger social service community, including county and state human services departments.

We had addressed the need for culturally competent programming by providing all staff with People’s Institute training to help them understand the ways our society discounts the culture and values of people of color. We had provided ways to help staff better understand different cultures and cultural values, and we had addressed specific instances of systemic racism within our own organization and community. But culture had not yet become one of the strengths to which we turned in our programs. Legacy was our first attempt to ensure that our services, resources, approaches, and methods would align with the cultural realities of our program participants.

The Legacy Story, Part 1

Many of the boys Freeport saw in Legacy Shelter were caught in a variety of loops. Some moved from foster placement to treatment setting to Legacy to new foster placement to treatment setting again. Some terminated their foster placements by running and living on the streets until they were picked up and returned to the shelter and then a different foster home.

As young teenagers, they were approaching the age when the “system” would give up on them. If they ran away or refused to

cooperate with family or foster family, they would be permitted to fend for themselves, provided they didn’t appear in the juvenile corrections system. Whether living in one of a series of placements or on the streets, without anything to bridge and integrate different placement settings, these youth became alienated and isolated. They frequently dreaded their next placement, because it meant they would again be among strangers.

Youth who came to Legacy for temporary shelter frequently reappeared following yet another unsuccessful placement. During the shelter’s five years of operation, some came back several times, finally “aging out” of the juvenile placement system. They were likely, of course, to reappear as young adults in other correctional, medical, or social service programs.

Yet little attention had been focused on helping these youth build relationships that would give them stability, hope for the future, and the possibility of a permanent home.

Many of the boys in Legacy were in touch with one or more parents or siblings. Most knew at least some members of their extended family, and nearly all could identify—and had stayed in touch with—adults who had been significant to them at some point: foster parents, teachers, community elders, pastors, or youth program leaders, for instance. Yet little attention had been focused on helping these youth build relationships that would give them stability, hope for the future, and the possibility of a permanent home.

Freeport staff were particularly concerned about documenting how different cultural realities led to the changed lives that were our program outcomes. In 1992, concerned that with the emergency shelter we were merely warehousing youth, we began meeting with government social workers to discuss how to provide more effective services to youth and families. We wanted to remove the artificial walls between services and programs, look to the community for solutions, and involve youth and families in creating their own vision of a path to better lives. Over many months, these discussions evolved into a vision of a transformed program, a new model of comprehensive care for youth and families.

A new Legacy was key to this transformation. Because the youth we saw in Legacy most often, or for the longest stays, were usually of African descent, we realized we had to make Legacy a culturally specific program serving only boys of African descent. Often these youth had experienced numerous out-of-home placements. The average was eight out-of-home placements, though one 14-year-old had experienced 40.

This cycle of repeated placement was isolating. It prohibited the development of lasting friendships and ties to school and community as the boys moved from one residential or treatment setting to another. For youth of color, in particular, many such settings cut them off altogether from their cultural heritage and ties. Because those placements had no sense of the youth's cultural heritage, they had no sense of the role of culture in capacity building to strengthen young lives.

We saw Legacy not as emergency shelter but as a gateway out of the placement loop and into stable placement with family, extended family, or foster homes in the community. According to our vision, Legacy would continue to provide midterm shelter but in conjunction with long-term, integrated, and community-focused supporting services to Legacy youth—and their families or foster families—as they return to the community and build lives for themselves there.

It was important to honor community in the decision-making process, because community permission and ownership were essential. The key was to ask members of the community whether the strategy made sense.

Between 1993 and 1995 we negotiated a new Legacy model with our primary government funder. Though our direction and support came from within the community, we understood the value the dominant culture placed on academic research. To ensure that we could justify our suggested approaches to working with youth and families of African descent, we hired three consultants of African descent from the community—Dr. Glenda Rooney from Augsburg College, Dr. Geraldine Brookins and Dr. Theora Dodd from the University of Minnesota—to research and design systems consistent with the values and family systems of people of African descent.

We also knew that very little written about people of African descent, particularly from an academic perspective, was written by people of African descent. Working with Legacy staff, our consultants built an evaluation system based on outcomes, interviewing both youth and families to design intake, assessment, and evaluation systems.

It was important to honor community in the decision-making process, because community permission and ownership were essential.

They also conducted a national literature search to ensure that developmental assets and resiliency factors targeted and measured by the new evaluation system were consistent with the culture of people of African descent.

We knew that many community supports useful to building community capacity exist outside of the formal social service provider structure.

Legacy Shelter became the Legacy Family Reunification and Preservation Program on September 1, 1995. The new Legacy emphasized support in the following arenas:

- A focus on client-defined goals and achievements
- A focus on family and extended family
- A focus on the youth's community
- A focus on helping the youth identify his existing intrinsic strengths and resources

- A focus on African American youths, their families, neighborhoods, and cultural heritage

The coalition of Freeport staff and consultants of African descent, with community members providing advice and insight, defined Legacy's purpose and established outcomes for each youth, as follows:

The purpose of the Legacy Family Reunification and Preservation Program is to

- reunite youth with their identified family or
- assist them in establishing an alternative permanent living situation in their community in a manner that provides a sense of connectedness, stability, and mastery.

A Lesson in Collaboration

As we were working toward a more culturally driven and outcome-based approach, we were also looking at ways to work with others in the community who shared common values and goals.

In 1994 Karen Trondson, then director of Freeport's Project SOLO, learned about two organizations on the West Coast that were coordinating their outreach, or "streetwork," for a scheduled period in an assigned geographic area, providing services to address the immediate needs of youth in high-risk situations and vulnerable to exploitation and violence. She invited representatives of local youth-serving organizations with outreach programs to discuss collaborating on outreach to youth on the streets, using a variation of this model. Nine agencies responded, and the collaborative has since grown to 14.

The collaborative members envisioned not only coordinated street outreach but also a collaborative approach that would combine the skills and resources of the participating agencies. She proposed that agencies come together to train outreach staff, share resources for homeless and runaway youth, and increase communication—and thus referrals—among members. Karen also proposed a Code of Ethics to guide outreach workers in their difficult, high-burnout jobs.

It was important for the initial participants of what we called StreetWorks to come to the collaborative table intending not just to gain resources for themselves but to offer resources to benefit the whole collaborative. The strength in the StreetWorks model is that decisions about the distribution of resources are based first on the needs of youth.

Through StreetWorks, regularly scheduled staff worked “on the streets” as helping professionals, reaching out to homeless youth. Outreach workers (also called streetworkers) served as advocates and positive role models. They provided youth with many kinds of assistance: listening and relationship building, food and other basics, problem-solving dialogues, crisis-intervention counseling, referrals for services, and printed information about services. Outreach teams gained identity by carrying “green bags” easily identifiable to youth on the street. These “green bags,” or duffel bags, held commonly needed resources: bus passes, quarters for phone calls, first-aid supplies, personal-hygiene items, underwear and socks, snacks such as granola or candy bars, and duct tape for repairing tennis shoes or backpacks. Over time, youth came to understand that anyone carrying a green bag was “safe” to approach and could provide help.

In December 1994 Freeport and the StreetWorks partners learned that they would receive a three-year U.S. Department of Housing and Urban Development grant to expand the number of outreach workers and buy supplies for youth. The grant allowed StreetWorks to establish a schedule ensuring that an outreach team would be on the streets every night of the year from 5 p.m. to midnight. The teams rotated among many Twin Cities locations frequented by homeless youth, such as malls, typical late-night “cruising” spots for youth in prostitution, and recreational and neighborhood spots, such as beaches along the Mississippi and the city lakes, as well as commercial streets.

StreetWorks has been by far the most broad-based collaborative effort of youth-serving agencies in the Twin Cities’ history—and perhaps in the country. But it is not its scale that has made StreetWorks unique. It represented a new collaborative model that combined the resources of member agencies to increase both their individual and their collaborative effectiveness. It also established a complicated but effective structure involving all those with ownership in the collaborative. Different decision-

making groups were established for executive directors, supervisors, outreach workers, and youth stakeholders. Each has specific responsibilities, but all must agree on policy and practice.

The collaborative model is an effective approach for Freeport. Over the past 10 years we have used similar collaborative approaches to provide transitional housing to homeless teens (in a two-agency collaborative also funded in 1995 by HUD) and a social service/community collaborative with the Sabathani Community Center and the Hennepin County Division of Children and Families.

IV: WHAT WE’VE BECOME

Community Building

By 1995 the experimentation at Legacy, including the threads of community-driven, outcomes-based, culturally oriented work, had resulted in a new orientation to our work with families and communities, which we called community building.

Community was already integral to our mission. In all of our programs and activities, we strove to be community driven and outcome focused. We often joined with other public and private agencies in strategic alliances to support the efforts of youth and families. We wanted to move a step beyond that, using the following principles to guide our community efforts:

- The systems and strategies we design to support youth and families must replicate those systems and strategies that are *natural in the community*.
- Program dynamics must be *shaped by community members*.
- Programs and activities must be *sustainable within community* and, with community nurturance, can continue to be replicated by community without our agency’s involvement.

We knew that many community supports useful to building community capacity exist outside of the formal social-service-provider structure. They include individuals with skills, talents, and experience, as well as formal and informal business, citizen, religious, and cultural organizations.

As a social service provider, however, Freeport was not structured to work effectively on a community level, whether community was defined geographically or culturally. Our staff were most knowledgeable about, and probably most comfortable with, other social service providers and systems, and then with related community providers and systems, such as the educational system and the justice system. They were also most knowledgeable about the difficulties facing program participants. They were less knowledgeable about the natural support practices and strategies indigenous to communities.

Most of Freeport's program participants came from economically challenged communities defined by their deficiencies and needs. They typically entered our program when they reached a state of crisis: They had been refused shelter from all other placement options, or had been kicked out of their parental home and were living on the streets, or were faced with the possible removal of their children from their home by the court. They became part of a social service system that often identifies needs and solutions for program participants without considering the perspective of the "client" or those things "clients" value. Often, program participants, social service providers, and social service funders, even when they superficially share the same values, define those values differently.

At our Legacy Shelter for teen boys, for instance, we wanted "stability" for the boys who resided there. The youth and their families also wanted stability. Our primary funder, however, defined stability as a single home with an adult couple acting as guardians for the youth, whereas families of African descent might define stability as a connected world made up of three or four different households willing to provide

the youth with a place to stay. There is a real strength in this second model, which incorporates a community's assets and validates the cultural reality of the program participant.

Sometime during the mid-1990s we stopped using the word "client." The evolution of our thinking can be seen in the language of our grant applications from that period.

In 1994 or 1995 we held an all-staff training using the Drucker Foundation's self-assessment tool for nonprofits, which included the questions, "What is our mission?", "Who is our customer?" and "What does the customer consider value?" We had some heated discussions about who our customer really was; some staff thought perhaps we should include funders, while others thought they should be considered customers themselves. Ultimately we agreed our participants were our primary customers. As we thought of them as customers, and as we began to reflect more on the meaning of our mission, the words we used to describe those we worked with changed to reflect their partnership in the process.

Now we refer to "client" as the "c-word." It's not a part of our language any more.

We wanted to include community assets in our social service approach, and we knew we needed to emphasize that our program participants have lives beyond the social service system. We wanted to tap into community dimensions that do not regularly interface with "social services." To do so, we realized we had to move out of the "social services" mindset and into a "community work" mindset. This would require training, exposure, and experience on the part of our staff before we could even begin to identify and complement those resources in communities that could help our participants access the full spectrum of community support available to them.

These diagrams illustrate the evolution we have achieved. They also symbolize the leadership transitions that occurred.

As we saw ourselves as a human services agency:



Without a conscious understanding and awareness of the community dimensions available to our program participants, we are outside of the community, supporting participants' efforts to sustain themselves and grow with knowledge based predominantly on social service systems.

As we learned to work with community assets:



The community, rich in resources that don't exist in the social service spectrum, drives or determines how we work with participants to help them grow and become self-reliant.

As we hoped to become at the culmination of this process:



We became a part of the community and, as an agency, have a collective, conscious understanding and awareness of the systems of care, support, education, etc., which exist in the community as natural supports for our participants' self-reliance and growth.

Community Discovery

When we began our community-building effort, we did not know how to bridge community systems and social systems. We talked about adding two staff members—we intended to call them “community builders”—who would be knowledgeable about the community, skilled at making connections among community members and associations, and capable of teaching their skills to other staff. We sensed they would work “in the community,” but didn't really know what that meant. We were thinking of adding a few satellite offices in nontraditional environments—in the African bookstore, for instance, where community discussion groups were held, or in the local park building.

We expected that community builders would be proficient at building bridges among Freeport participants and community members and informal associations outside the social service network. In other words, community members would take on a social service role and perform some of the services our staff had performed in the past. We thought the services might happen in a different way: While Freeport

staff, for instance, might help a mother who needed childcare to connect with a subsidized daycare center, the community builder might identify others willing to trade babysitting responsibilities with that mother—a solution independent of the social service system.

Still, we still mostly had a “service” mindset. We believed that, as our staff gained the skills to use the natural community supports available to program participants, they would also begin to identify and organize indigenous resources for participants and would pass on their skills to participants.

We spent almost two years trying to hire a community builder. We had a really hard time finding someone with community experience who would be willing to do “our” rather than “their” work. We finally looked inside and found someone with the right attitude, knowledge, and skills on our own staff, a Family Services supervisor. In working with staff and families, Stephanie Ball had always tapped into community resources, and she had great connections to the grassroots structures and systems of our community.

We considered the implications of reorienting Freeport to “community,” defined

what we meant by “community building,” and began to build the groundwork necessary for an organizational transformation. We realized that, though we were talking about

Eventually Community Living Room participants began to foster reciprocal relationships that encouraged many activities after considered core services

“organizing” community, we were not talking about organizing in the classic sense, in the way Saul Alinsky might have organized his Chicago neighborhood to respond to specific neighborhood threats or issues. Instead, the kind of organizing we were

interested in would encourage family-to-family, friend-to-friend, and neighbor-to-neighbor support at a level below that of the organized group.

We diagram the relationship of community building to community organizing in this way. Think of it as an iceberg, with a lot going on under the water, rather than a hierarchical chart with the most important parts on the top:



Community Living Rooms

Stephanie started our community-building effort by simply “being” in community—at the base of this pyramid. She hung around bus stops, children’s wading pools in parks, and sidewalks. Over time she began to identify individuals with natural leadership abilities. These were not likely to be the person chairing the local PTA or the Boy Scout troop but rather the grandmother visited by the neighborhood children after school, or the backyard mechanic who advised neighbors on relationships while fixing their cars.

Stephanie began to talk to these leaders about what makes a community strong, and about where they were when they talked about concerns and issues important to them. Often they said they shared such concerns and ideas in their own living rooms, talking to the people who mattered most to them.

Using this as her cue, Stephanie encouraged some of the leaders to join her in strengthening community by volunteering as “community guides.” Together they recruited community members, using a strategy Freeport has coined “Community Living Rooms,” to bring people together: inviting community members to visit natural gathering places (most often a guide’s home) to talk or get to know one another over dinner.

Community guides were often well known in their communities; they emerged as natural leaders. Using funds intended for a second community-building position, Freeport provided stipends to guides for food and beverages and supported the gatherings for up to six months.

We didn’t set agendas for the living rooms, other than to insist that they not become places where people regularly aired gripes and complaints. Our goal was to strengthen the social and psychological ties in community and to build individual problem-solving and life-planning capacity to benefit the community and its members.

At first Community Living Rooms were primarily social, as neighbors and community members met each other, often for the first time. They talked about children and family and about their own lives, their histories, their hopes, and their goals. Eventually Community Living Room participants began to foster reciprocal relationships that encouraged many activities often considered core services among human services agencies: coaching and mentoring both parents and children, modeling and teaching good skills (from parenting to homemaking to money management), recommending and referring to community resources, referring to social and recreational opportunities, and much more.

In various Community Living Rooms, members discussed strategies for paying off debts and buying homes, for uniting the neighborhood against drug dealers or prostitutes, for personal health and well-being. Community Living Rooms resulted in a community-based support network that engaged family, friends, and neighbors in their own well-being by building connections whereby community members share strengths and resources.

Convergence

At this point, Freeport was involved in human services through its programs and also involved in community through the Community Living Rooms. The two didn’t necessarily interface, however. Our next step was to bring them together.

We started by inviting the community guides into our agency to talk about the things that made a difference in their communities. At in-service trainings and individual program staff meetings, they talked about and taught staff what they thought worked to make the families in their communities strong. They invited staff to their Community Living Rooms. Stephanie published lists of the Community Living Room guides and encouraged staff to contact them if they had a program participant who might benefit from joining. Stephanie also circulated Freeport job announcements to the Living Rooms, and we hired several individuals from the community who brought a community orientation to their jobs. Several times a year the guides sponsored community dinners at Freeport, offering staff and community members the chance to get to know each other.

We also began to report back to our guides, Community Living Room participants, and the community as a whole about our efforts. Our annual meeting got a whole new look and feel when we reoriented it to community and offered community members the chance to share stories and testimonials about our joint work. Our strategies for listening to, and becoming part of, community now include reporting to community about what we have done, with the request that community members in turn tell us whether our efforts have made a difference.

Over time our relationships grew, as did trust. Today we don't see much difference between those who walk in the door seeking support, those who walk in the door seeking employment, and those who live on the street behind us. With our move to our new buildings, located in the heart of the community we serve (and just a city block from Hope Community), we have begun to feel, and to act, like a neighbor.

V: WHAT WE'VE LEARNED

Barriers to Change

Practically from the day it opened, Legacy served as a platform for innovation and learning within Freeport. During its first year, we applied much of what we had learned about culturally and community-driven and outcome-based programming there to Freeport's other programs: Project SOLO and Family Assessment and Support Services. What we learned transformed the agency at all levels.

In January 1996 we invited all contract and program managers from our government funders to a presentation. We started with our mission statement: to support the efforts of families and communities to create environments where all children thrive. Then, using charts and graphs, we showed a profile of our community, revealing similarities among our participant groups. Through SOLO we were expected to serve homeless youth. Through Family Services we were to serve families with children at risk of abuse or neglect. At Legacy we were to serve young men of African descent who had been circulating through out-of-home placements.

The common demographics, though, showed a different picture: Participants in our program, whether in SOLO, Family Services, or Legacy, were most often women with children, most often of African descent, most often young and economically disadvantaged. Even in Legacy, where our "client" was the young man, he usually came from a family headed by a single mother. The demographics across programs were consistently quite similar.

We also showed how we defined and documented our approach to helping participants change their lives. Outcomes documenting life changes, recorded separately in each

program, were nearly identical: safe and affordable housing, an income to meet expenses, enhanced life skills, and hope for the future.

We talked about how, to ensure they were really helping participants change lives, our staff had changed the way they viewed and documented their jobs. We had rewritten our job descriptions to identify

the outcomes we expected staff to achieve rather than the services we expected them to offer. We also rewrote our personnel policies to talk about expectations rather than rules. Policies referred to the "six Rs," or operating principles and standards of conduct we expected of staff in their work: respectful, responsive, responsible in the use of resources, results focused, reliable, reflective.

We talked about the importance of culture in the lives of our families, and the roots of our program in community and culture. With this presentation, we hoped to start new dialogues with our funders about what really worked and what really mattered.

It didn't work out that way. While some government staff shared our excitement about and vision for a transformation of social services that had real meaning to the families in our community, others remained committed to the established ways of seeing and operating social services.

This second part of our story about Legacy demonstrates the difficulties of real social change and transformation but also shows that change can happen, with a sense of accountability to community and the courage to hold steadfast to principles.

We knew the lack of attention and commitment to the cultural backgrounds and realities of the families served would undermine our program - and their attempts at changed lives

The Legacy Story, Part 2

Even after Legacy Shelter became the Legacy Family Reunification and Preservation Program, the realities of the out-of-home placement crisis remained daunting. As long as we had beds, we would at least occasionally be expected to “warehouse” a young person for whom no other option could be found. Once the person was housed and the immediate crisis averted, it was relatively easy for the government to forget about him.

We were also caught in political tides. Not long after we transformed Legacy into a culturally specific family program, government funders became concerned at the rising cost of out-of-home placements, particularly those ordered by the courts. They limited out-of-home placement reimbursements to \$100 a day, even for those youth with few options. This often meant that youth of African descent were shipped off to group or foster homes in rural Minnesota, where they almost never encountered anyone from their culture.

After discussions with government staff, we decided to close the shelter and reorient Legacy as a completely community-based program. We believed we could better reunite youth and their identified families if the youth resided within their communities, and we believed we could also find respite among identified family in those situations where it was required. We believed the community would provide solutions for these young people.

Soon after that, government funders asked us to start working with young women of African descent as well. We agreed to add this option to the Legacy program.

As we closed the shelter and began accepting young women into the reoriented program, the government established a “unit rate” for our work, based on the rates established for medical assistance, which would reflect payment for outcomes achieved.

At that point, Legacy had gone through a lot of change: the changes we had planned and encouraged and those required by funders. We thought (and hoped) that some of the upheaval would settle down.

But our primary funder had other new proposals that challenged the core principles of our work. First, in a money-saving effort, the funder suggested implementing a two-hour weekly limit to crisis work. We knew we wouldn’t be able to “schedule” family crises, and our director of programs facetiously suggested that after two hours Legacy staff could stop their cars and simply leave those in crisis by the side of the road. Eventually, the funder agreed that this proposal made no sense in a field where families were often facing crises.

Then, again to save money, government staff suggested that, since the primary customer of Legacy was the young person in the program, Freeport should not work with (or bill for time spent working with) identified family. To the extent that identified family members were working on the young person’s issues, time spent with them and the young person could be reimbursed, but time spent working with family members on familial issues could not, even if the issues affected the young person.

Finally, the funder asked that Legacy staff focus on curtailing truancy, limiting us to three months to reach the goal.

We were disheartened by this unwillingness to pursue a community-, culturally and outcome-driven Legacy. We knew the lack of attention and commitment to the cultural backgrounds and realities of the families served would undermine our program—and their attempts at changed lives. Rather than acquiesce, we elected to stand on principle and close the program.

Legacy ended in September 2002. Almost immediately, we began to receive referrals to our Family Services program that mirrored the purposes and needs of many referrals to Legacy; some referrals were even the same young people and their

families previously served by Legacy. The Legacy youth also began to show up in SOLO. And in all of our programs and operations, the spirit of Legacy continued to shape the orientation of our efforts and the way we approached and measured the results of our work.

A Constant Mission

In January 1997 Jan Berry announced her resignation as executive director and Repa Mekha succeeded her. Throughout their joint tenure, Jan had shared the truths she knew about working with young people and Repa had shared the truths he knew about culture and community. Together they had built the foundation for Freeport's future.

At Freeport, we try to work with the ideas that motivate us, and we have often been able to capture those ideas. From the time we began discussing the importance of community, through development of a new mission, new approaches to serving youth and families, and a complete reorientation of the work of this agency, Freeport has been in a phase of constant learning and constant change. Each learning builds on the next.

A constant throughout this time has been our mission. In staff interviews conducted in 1999 and 2000 to learn more about what keeps people here, we discovered that the primary reason most staff stayed with the organization was that they believed in Freeport's mission.

Freeport's vision from the 1970s has evolved into our vision of and for Freeport now. The original notion of self-determination was once a narrower concept of social change, perceived through a lens of the dominant cultural experience. Over time, listening to the youth and families served and the community around them, our perceptions of what it means to walk along the path together have changed.

Repa's Reflections

At some point along the way, I began to think about Freeport as a personality and to think about what its personality is like. What does it remember? What does it forget? What makes it smile or frown? Is it one of those personalities that is constantly on a roll, or is it a reflective personality?

The personality has been built over time, all the way back to the original premise that young people can tell you what is most valuable in their lives, if you will just listen. The seeds of Freeport's personality evolved out of that and, just like a personality, it has looked for things to give it meaning. Working on mission, struggling with concepts of systemic racism, learning to trust community—each has contributed to Freeport's meaning, its purpose.

I think that at some point you learn enough in life, and your personality settles in in such a way that simple things begin to inform you. It is those simple things that give you the greatest insights, that give you principles.

For me, and I think for the personality that is Freeport, intuition has become a formal structure. Intuitive knowing has become a way of knowing and operating within the agency, and it instructs us in certain ways. It tells us, "Let this thing go, you don't have to have control of it, you don't have to be in charge, you don't have to be knowers all the time." Even in the cases where we didn't know where we were going, we knew we were going in a certain kind of way. We are committed to the process of "becoming" without knowing what we will become.

At Freeport, it's okay to ask questions, to not know, to be a learner. It's not a very "social services" approach to doing our work, but it sets the stage for us—and it has led to changes in our community that will continue whether Freeport is here or not.





CARRYING THE IDEAS FORWARD

Questions and Applications



CARRYING THE IDEAS FORWARD: QUESTIONS AND APPLICATIONS

Margaret J. Walker, *Organizational Development and Evaluation Consultant*

What do these stories say to us? Can they enable us to test our own work, to advance our thinking, to challenge our philosophies of empowerment, service, and learning? Do they help establish a new set of values for working in community? In what ways can the stories rise above their particularities to inform the fields with which they intersect—namely, human services, community development, and health education and delivery?

In this section we offer a set of themes derived from the stories. The themes are the result of extended conversations among the authors regarding the above questions. Just as story is uniquely suited to describing life experiences and inviting fresh thinking, these themes are suggestive rather than definitive. They reflect core values that the three organizations hold in common and that are the wellsprings of their work. The themes emerge from active engagement with the material and raise as many questions as they answer—in this way echoing the work the authors do every day.

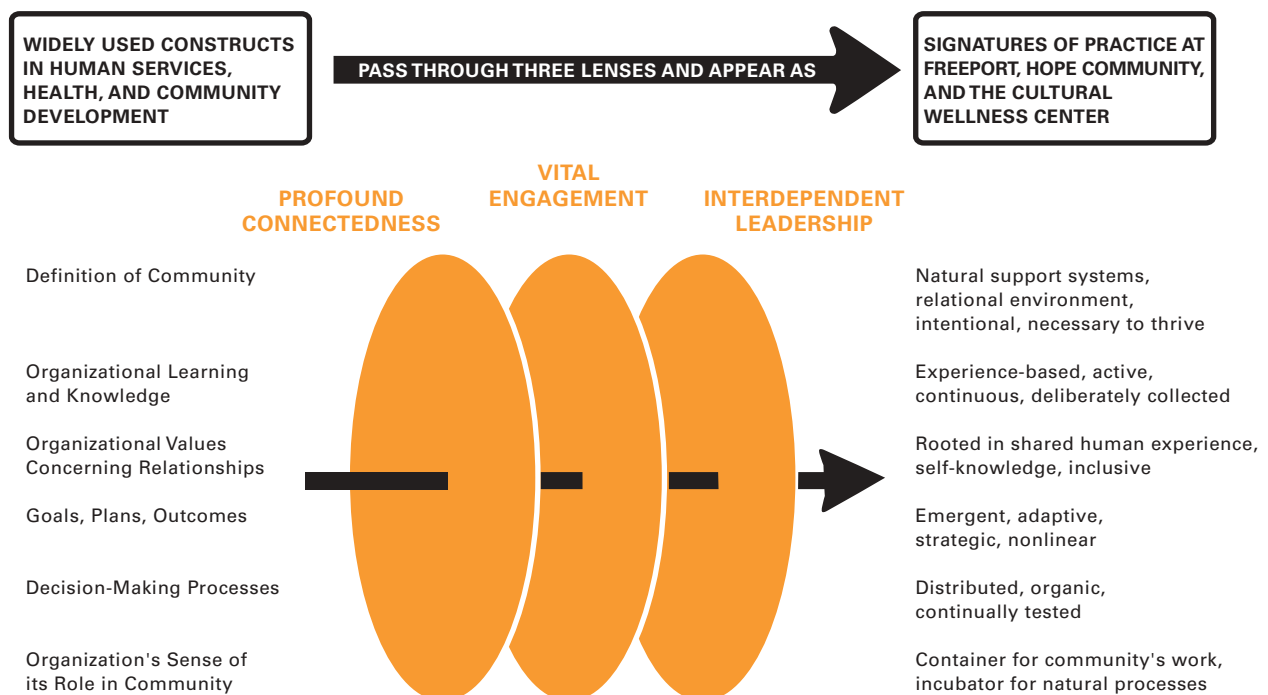
Profound connectedness. Vital engagement. Interdependent leadership.

Here we explore these three themes through examples of how the organizations apply them in their daily work and through questions that address the implications of these themes. We hope this conveys the searching quality demanded by this way of working. We also hope it invites readers to engage, as the authors have, in reflection and dialogue about what answers emerge from their own experiences.

Working with the Themes

These three themes—profound connectedness, vital engagement, and interdependent leadership—offer a conceptual framework that helps to interpret the work of the organizations. They act as lenses through which a variety of concepts, values, and ways of working are filtered and refracted to form new patterns. In an organization where these themes are not as prominent, for example, an identification of community might be more or less developed by funding streams. Decision-making might be more hierarchical.

These three organizations are different. The following graphic provides a visual summary of some of the ideas drawn from the stories and considered in this section.



While each organization uses the lenses to refract the constructs in its own way, they share a common signature: They transform traditional constructs into very particular, nontraditional approaches. And while each lens can stand alone as a filter, its refractive powers are increased exponentially by its interconnection with the others.

The language of "client," "victim," and "recipient" is notably absent in their stories.

For example, the construct of organizational learning and knowledge is typically interpreted as something developed through academic, professional, and technical inquiry. Filtered through these lenses, the construct takes from profound connectedness the understanding that community members' self-knowledge is an indispensable resource. *Vital engagement* with community members continually identifies and activates that knowledge. The stance of *interdependent leadership* means that

decisions about programs and actions spring from knowledge gained through the lived experiences of community members. Consider how Freeport's Legacy program, Hope's experience in Peavey Park, and the Cultural Wellness Center's birthing teams used community-based knowledge generation as a core strategy in their development.

A second example of how the lenses work together to transform constructs is the way each organization determines goals. The *profound connectedness* lens aligns the organization's direction with goals identified through intensive community involvement. Through *vital engagement*, goals are tested, modified, and submitted to the continuous cycle of action-reflection-action. *Interdependent leadership* is the means through which strategies to achieve the goals are designed and implemented by a variety of community members, not just through positional leaders. The three stories you have read provide many other examples.

THEME 1: PROFOUND CONNECTEDNESS

These three organizations demonstrate an unshakable belief that connectedness is fundamental to their work in human services, health and community development. Furthermore, they live that philosophy by being profoundly connected to the members of the communities in which they work. While the focus of connectedness is different for each organization, they each bring to it an intensity of commitment.

As both a philosophy and a way of working, connectedness is deeply interwoven with the other two themes to be explored in this section. We begin by trying to articulate what we mean by connectedness for each organization.

Connectedness is the core of Hope's vision of community development. What Hope authors mean by "community" is deeper and more pervasive than what is commonly meant, and their approach goes well beyond building affordable housing and creating social capital.

At Hope, building community means establishing a "relational environment" that breaks the stereotypes of the isolation and anonymity of city living and provides an ever-widening, interdependent circle of leadership. Community members may differ dramatically in their experiences, cultures, and histories—and they have many other communities in their lives. What they experience at Hope is deep listening to one another, envisioning the community they want, and working together to reclaim their neighborhood and power over their lives.

The Cultural Wellness Center exists to restore generations-old, culturally based systems of care. Through people's connectedness to one another, they increase their community's capacity to systematically support the health and well-being of all of its members. The Cultural Wellness Center authors write that their effort is "about increasing people's knowledge of themselves as they survive, not as isolated individuals, but as members in community. A safe and stable environment requires that the interests of the individual members are the interests of the whole community, and the interests of the community are the interests of its members." The Cultural Wellness Center serves a vital role for many cultural groups by being an incubator for practices and activities that nurture connectedness and restore natural support systems.

Freeport's focus is on changing lives by reconnecting young people and families to their culture and their community. They recount how repeated out-of-home placements isolate youth from their schools, neighborhoods, churches, culture, and kinship networks, and prevent the development of lasting friendships and community ties. Freeport's programs draw on the wealth of natural community supports that exist outside the formal social service structure, and seek to replicate them in a way that is sustainable within the community. When Freeport authors write that "community and culture keep people rich and nurtured," they express in simple words a radical philosophy of connectedness. As an organization, Freeport provides services in ways that become part of the community rather than part of the social service system.

Implications for the Practice of Profound Connectedness

To what extent are people responsible for restoring their own lives and communities?

This is a core question and a complex one. Often treated superficially in public discourse, the question easily polarizes. On the one hand, to answer that individual people are primarily responsible suggests independence rather than connectedness, denies the importance of systemic and historical forces that influence lives, and blames people for their own circumstances. On the other hand, to argue that they are not responsible denies their strengths and their knowledge.

These organizations engage with people at a level that gets beyond the superficial. Profound connectedness rests on the confidence that community members have self-knowledge and a strong impulse to better their lives. These are the seeds of empowerment and sustainable change. The organizations work to augment the processes already in place, though often latent, in the community. Such an approach is markedly different from that of conventional social services.

These organizations recognize how disconnected people can become from their inner resources and from one another. They work to strengthen individual responsibility within the context and structure of community, and to promote change at a systemic level. But as they do so, they are working with, and not for, the people in their communities. The language of "client," "victim," and "recipient" is notably absent in their stories. Rather, the people they work with are elders, guides, citizens, and advisors.

Is profound connectedness the means or the end?

Building community is not tangential to what these organizations do, nor is connectedness merely a strategy that leads to something else of greater importance. Yet in itself, is profound connectedness enough? Conversely, are other outcomes meaningful without profound connectedness?

Many organizations equate outcomes with "ends" only. Here we have three organizations that do indeed pursue observable outcomes: a physical building, people gaining personal empowerment and achieving improved health outcomes, young people and families demonstrating stability and mastery. Critical as these outcomes are, each organization also looks for the deeper meaning on which they rest. Hope authors write of this dynamic: "Hope's quality housing is a welcome change, but the model goes further. Hope's 'relational environment' draws adults and kids out of their homes to safe, attractive, and welcoming gathering places. When people come together, the seeds of community are planted and nurtured." In a similar manner, birthing teams at the Cultural Wellness Center improve birthing outcomes by re-creating culturally specific community systems of caring.

Put another way, these organizations view profound disconnectedness as an underlying cause of personal, family, and community dysfunction. Therefore, profound connectedness is both an end and a means. Seeing it this way blurs the lines between components of a traditional logic model: the essence of connectedness appears as input, activity, output, and outcome. When people work in concert to achieve a purpose, the process of becoming connected is an outcome as significant as the more tangible results of their work. This way of working is highly unusual, requiring steadfast commitment to the value of connectedness when under pressure to resort to quick fixes or more easily measured outcomes.

How does connectedness work in a multicultural world?

It is not uncommon to see present-day organizations give a nod to diversity but continue to operate within the dominant cultural framework, hoping that people will relate according to what they do have in common and set aside what they do not. In marked contrast, these three organizations have developed strategies for working with culture that increase the likelihood that people can bring all of who they are to their connectedness with others.

One dimension of this is to operate with and teach about “cultural consciousness.” The organizations have a core of respect for culture and an ever-present awareness of how culture shapes the dynamics of community interactions. Hope very specifically addresses cultural assumptions and differences in its multicultural neighborhood, often deliberately bringing the tensions into the open for honest discussion. Freeport works to counteract the lack of cultural consciousness in the social service system serving African American families. For the Cultural Wellness Center, the reconnection to and restoration of culture is a central tenet. Community people learn cultural health practices to prevent illness and impact chronic health problems. Health practitioners learn to confront conventional medical assumptions that may prevent cultural practices from being a resource. In these and other examples, operating with cultural consciousness brings the importance of culture into the front and center of negotiations about community life.

Another dimension is to help people claim their own cultural heritage as a source of identity and a platform for building authentic and respectful relationships with others. The Cultural Wellness Center helps members “be strong within our own culture so that we may better live in our communities and be in more meaningful connection with the cultures within the communities we live in.” The authors describe people’s “struggle from within to restabilize themselves after several generations of uprootedness, loss of community, culture, and health” as preliminary work of connectedness that must occur before bridging among cultures is possible.

THEME 2: VITAL ENGAGEMENT

To step into each organization’s physical space is to be immersed in a feeling of aliveness. One has a sense of constant motion, of many things happening at once—and in ways that are not chaotic or disembodied but personal, welcoming, and generous. One sees people of all kinds coming and going, and it is clear that they are at home, participants rather than visitors.

Vital engagement entails this sort of immersion. Community participants become involved in designing objectives and exploring possibilities. Each organization is engaged in the very animated and animating process of being attentive to many issues and people simultaneously.

These characteristics of vital engagement result in a holistic and creative menu of strategies for getting things done. The organizations adapt to circumstances, taking into account who is “in the room,” prepared to take action. Sometimes goals and strategies are defined at the outset. Other times both means and ends are emergent, developing in concert with people as they grow in understanding of what they are able to do for their families and their community. Other approaches come about in a dynamic process of interaction with other people and organizations. Still others are evolutionary—things take an unexpected turn, which results in a leap in the evolution of a program or action.

Implications for the Practice of Vital Engagement

How can anything get done in such emergent, adaptive environments?

There are several challenges to operating with this menu of strategies. One is to assure that the various means of working are mutually reinforcing and integrated at the core. All three organizations write about how they keep the work integrated: through reflection on core values, continual communication among staff, and repeated reinforcement of the mission and principles for operating.

Another challenge is that, because the menu of strategies is not tightly controlled and predictable, it can be drawn off course. Indeed, this approach requires vigilance about learning. Strategies that are innovative or experimental must be honestly examined to learn whether they advance the mission.

Finally, there is the challenge of communicating with others about the essential nonlinearity of the approach. These organizations are fully immersed in their work and informed by the total picture. “Things that emerge have been thought about and nurtured for a long time,” Hope’s authors write. When an opportunity arises, “We’re on it and it’s done. People think that’s impulsive, and it’s totally the opposite—it’s strategic.”

Who is included in the circle of engagement?

Vital engagement, like profound connectedness, is premised on the acceptance of people’s full humanity. These organizations are deliberate in their use of language and actions that define people not in terms of their weaknesses, history, or mistakes but in terms of their strengths. What are commonly termed “deficits” are not ignored but are regarded as important in the raw material of working together. As one author said, “We recognize ‘deficits’ and say ‘Come as you are.’”

Strikingly, this principle applies to everyone who interacts with the organizations, whether business leaders, public officials, members of the organizations, elders, youth, or neighborhood residents. Freeport authors write, “Today we don’t see much difference between those who walk in the door seeking support, those who walk in the door seeking employment, and those who live on the street behind us.” There are no observers in the life of the organization or the community, only participants.

This includes systems players, with whom each organization is also vitally engaged. The authors use the word “systems” to mean the public and private institutions and power arrangements that have profound influence on the economic, social, and personal well-being of the people in their neighborhoods. Because systems are characterized by their complexity and slowness to change, most of the people in those systems operate with long-standing habits or beliefs about “the way things are.”

They often have little direct connection with the people with whom these three organizations work. The authors play the role of bridging that gap, promoting understanding, and inviting the creation of something that challenges the status quo. In this respect, teaching is a critical and ongoing part of their work. And so is listening. As one author said of systems representatives, “We see them in their complexity. They have things to offer as well as to learn.”

What gives this importance is that it does not limit the work of these organizations to the like-minded. Recall the stories of Freeport working with county officials, of the Cultural Wellness Center training physicians, of Hope meeting with developers and city planners. Including multiple perspectives at their common table dramatically increases the complexity of the work. The organizations must tangle with difficult personal, interpersonal, and public issues. They do not avoid, postpone, or ignore deep divisions but work toward common understandings and resolutions. This means that when they succeed and come to an agreement, it can stand the heat; it is more durable.

What base of knowledge informs direction?

Professional and academic authorities in a variety of fields have long provided opinions on effective strategies for practice. These organizations place their emphasis differently—on the knowledge of ordinary people. People’s experiences, whatever they may be, are a valued source of knowledge. Those who come to the organizations may develop a “voice,” identify lessons from their life experiences, reflect on the meaning of events and actions, and become more self-directed. These processes enable knowledge to be *discovered*. Through other processes, knowledge is *recovered*. When people at Freeport and the Cultural Wellness Center bring their cultural wisdom to a contemporary problem, they are recovering knowledge from which they may have been disconnected.

Another way in which ordinary people generate knowledge occurs when the metaphor of voice is combined with the act of listening. Hope's Community Listening model engages hundreds of residents in dialogues that uncover their deeply embedded understandings of what community is to them. This process illustrates the collaborative nature of knowledge construction.

Knowledge generated through these and other means emerges continually. The organizations use this newly generated knowledge to take action, and then to learn from that action. The authors describe the cycle of action-reflection-action, in which they constantly learn, reflect, adapt, and test. This is another critical part of knowledge generation. Knowledge does not come from a distant examination conducted in isolation. It is home-grown, immediately applied, and continuous.

THEME 3: INTERDEPENDENT LEADERSHIP

The leadership signature of these authors is that they are immersed in the life of their community—its culture, spirit, politics, challenges, and virtues. It is this deep connection that informs and enables action related to their core purpose.

Some organizations that respect and honor community get paralyzed waiting for the community to tell them what it wants. But in these organizations, the leaders are willing to take action based on their deep grounding. Then, in the action-reflection-action cycle, they take steps to learn what people think about what they are doing, and fine-tune or alter direction as needed. This requires intellectual honesty and humility, and is a statement of their commitment to being directly accountable to the communities in which they work.

Implications for the Practice of Interdependent Leadership

How is leadership practiced in the context of profound connectedness?

These organizations work hand in hand with community members in virtually everything they do. They are not invested in programs and strategies devised by professionals and overlaid onto communities but in programs and strategies that emerge from the community. Each has spent years sorting out the paradox of exercising strong beliefs and leadership talents to create opportunities for people to recover and act out of their own power. Elders, young people, parents, and others are actively sought and encouraged to contribute their ideas and energies—to share in leading one another. This results in a distribution of leadership among a wide range of people.

This distributed leadership enables the co-creation of both strategy and vision. Each organization works to help people make deliberate and concrete changes in their current circumstances. Tangible changes may happen on many levels all at once—individual lives, families, the block, institutions, the city, and so on. These practical accomplishments sustain involvement and provide an accumulation of experiences from which people learn. They also are a source of power, and this fits into the larger vision. When people decide that they can shape the relationship with the forces that have historically had power over them, or even reclaim their own community structures in place of governmental or social service systems, they have connected to the vision.

There is no doubt that leadership requires vision and persistence in its pursuit. These leaders believe it also requires a simultaneous willingness to be led.

Each organization's work also depends on the internal distribution of leadership. At the Wellness Center, the governance structure includes Elders Councils. Freeport tells of involving staff and board members on leadership teams and affinity groups as they grappled with the implications of their training on racism. The Hope story describes managers, cooks, organizers, bookkeepers, and property managers meeting in the hallways and over lunch, sharing ideas, connecting to the vision, and becoming visionaries and strategists themselves.

How do leaders balance purposefulness and openness?

There is no doubt that leadership requires vision and persistence in its pursuit. These leaders believe it also requires a simultaneous willingness to be led. This means not always having predetermined goals and outcomes. These leaders have a finely tuned sense of what is going on around them and what potential resides in people and circumstances. This gives them the confidence to start down a path not knowing specifically where it is going. They are grounded in community and committed to the direction that emerges from that connectedness.

The authors admit that this lack of certainty can be unnerving. But it produces possibilities that an inflexible agenda would not allow. They believe that they have to be willing to submit to that process. Freeport describes this as a state that is highly intuitive. They write that in their agency “Intuition has become a formal structure.... Even in the cases where we didn’t know where we were going, we knew we were going in a certain kind of way. We are committed to the process of ‘becoming’ without knowing what we will become.”

What is the place of the organization in community-based work?

The authors fully understand that structural capacity is necessary to carry out their work. However, their primary focus is not inwardly directed on building their organizations. As the Cultural Wellness Center authors write, “The organization contains the work and the workers but must never become the reason for the work.” A dramatic example of this principle is Freeport’s closing of a securely funded program rather than succumbing to the demands of a funder that held different values. These are leaders who view their organizations as vessels for conducting and nurturing the community’s vital work. They use the organization to create spaces and places where Community Engagement takes root.

This is not a neutral space where anything goes. That implies a lack of judgment and removes the need to work through conflict. As Hope writes, “We have learned we are creating ‘power spaces’—opportunities for people to do positive, powerful things and create community together. These are not neutral spaces. There are values about community and accountability and respect and opportunities to learn and do important things.”

The organization also is a container by virtue of its holding a place in temporal history. In their stories, the authors reflect that the actions they take are connected to something greater. Present-day actions are connected to the long view, something “out beyond the horizon.” Freeport’s authors emphasize that they want any changes they help to bring about to live beyond themselves. They write, “Programs and activities must be sustainable within community and, with community nurturance, can continue to be replicated by community without our agency’s involvement.” The Cultural Wellness Center recounts that as community members renew their capacities for caring, generating knowledge, and leading, they are helping to create a new world for future generations. They write of their organization’s incubating role by saying, “The structure gives continuity until the activity again becomes a natural part of community life.”

Can anyone do this work?

These leaders talk and write about their personal experiences of injustice, historical trauma, discrimination, and intolerance. These experiences have forged in them a passionate belief in community that has made action imperative. Hope sees its role as restoring all people to their role in public life. The Cultural Wellness Center writes of its work being about “restoration, recovery, reconnection, and rebuilding. It is now time to go beyond surviving to thriving, creating, and giving.”

The larger visions of what can be accomplished, rather than personal achievement, are the goals of their leadership. Over the years, they have learned that the work was not about their individual or positional power, but about “helping to create opportunities for people to act out of their own power.”

To a large degree they believe the work has chosen them, rather than the reverse. The authors spoke of this often in their dialogues. As one of Freeport's authors said, "There is a responsibility that comes from paying attention to history. We can't be healthy when our communities are diseased. I came to this work because it chose me. Letting go is about knowing that. There is a peaceful feeling when I surrender." In a wonderful paradox of grounded leadership, these six committed, visionary leaders submit to the work and evolve as it leads them.

OUR INVITATION TO YOU

We now invite you as readers to consider your own work. What do these lenses, or themes, suggest for your practice? What would change about the work of a clinic, a neighborhood house, or a jobs program if people who visit these programs were considered indispensable sources of knowledge? What would look different about a youth development program or a senior center if it relied upon the strengths and leadership qualities of ordinary people? How would the systems underlying human services, health education and delivery, and community development be affected if a critical mass of organizations operated from these core values?

We hope these stories will continue to spark reflection and conversation on these questions. The values underlying profound connectedness, vital engagement, and interdependent leadership are, we believe, shared by many working in these fields but have not been part of our dialogue about issues in these fields. We look forward to examining them more closely with our colleagues.

