

# An Open Letter from the American Public Human Services Association



**PATHWAYS:**  
*The Opportunities  
Ahead for  
Human Services*

*December 2011*

**To: *Presidential Candidates, National Policymakers and Other Stakeholders***

**From: *American Public Human Services Association***

Every day, all across the United States, the nation's health and human service agencies touch millions of our fellow citizens, neighbors or friends, colleagues and employees, family members—through support for finding a job, making sure vulnerable children have a safe home, providing the means for a healthy diet, to name a few. They are coming to our doors now in record numbers because jobs are scarce, living expenses are high, and many communities cannot give them the supports they need.

As the leaders of these state and local agencies, we are proud of our work and what we achieve. But in a time of sharply rising need and limited budgets, we cannot keep doing business as we once did. Too many of our fellow Americans cannot join the mainstream of work, be independent, live in strong families, and have a safe and dignified life—and there are too few tools and resources at our disposal to help them get there. The present collection of separate human services programs, and the attitudes and habits that have grown up around them, have not kept pace with the rapid changes in this nation's needs and economy.

We write you today to say clearly and with confidence: *we have a workable, bipartisan, solutions-focused blueprint for getting better, more efficient, and more sustainable outcomes for low-income and vulnerable populations.*

Our solutions will require changing health and human service programs and funding streams so that they become *integrated, outcomes-focused, and centered on the needs of people rather than compliance with bureaucratic outputs.*

The outcomes we seek—and that a revitalized system can help achieve—include *gainful employment and independence; stronger and healthier families, adults, and communities; and sustained well-being of children and youth. And, we know that these outcomes can be produced far more efficiently, effectively, and sustainably in a transformed human services system.*

We cannot do this alone. Getting there will require not just improving government—although that is a key part of our vision—but *must involve the private sector, the nonprofit and faith communities, and most of all, the strengths and resources of families and the communities in which they live. All of us have a vital interest in strengthening the fabric of our communities and assuring the well-being of every American.*

Working through our national organization, the American Public Human Services Association, we are pleased to share our vision for change and blueprint for action. We must do better—for those who are vulnerable, for the taxpayers, and for all of us who value this country and its future—and we can. We ask you to join us in this critically important work.

### ***Pathways: The Opportunities Ahead for Human Services***

This letter draws upon APHSA's policy initiative, *Pathways: The Opportunities Ahead for Human Services*. The Pathways initiative is designed to develop, build consensus for, and implement an outcomes-based, integrated, client-centric system of policy and practice for human services in the United States.

Pathways has been developed in coordination with cabinet-level commissioners of health and human service agencies, along with administrators and program directors from states and counties across the country. The results of this work will be released in two phases—the first lays out our vision and an overarching action framework for national policymakers, and the second will contain a more detailed set of policy recommendations and blueprints in 2012.

## The Critical Needs Facing Us and the Solutions We Bring

We all know the news is full of challenges to the nation's well-being. Several current facts dramatically prove that point:

- There are 14 million Americans unemployed—six million of whom are classified as “long-term”—and 7 million receive unemployment benefits
- The average length of unemployment is 34 weeks, breaking the previous postwar average of 20 weeks
- Nearly 42 million people live under the poverty line—more than one person in every seven
- Median household income in 2010 was \$49,445, a 2.3 percent decline from the 2009 median
- Fifty million Americans have no health care insurance, up from 49 million in 2009
- Despite the fact that 42 million individuals receive SNAP (food assistance) benefits, there are still seven million more who are considered food-insecure
- The great majority of states continue to face budget shortfalls—with only limited means of closing their funding gaps—and the prospect of a slow, years-long recovery

In the face of such needs, the public human service system “comes to the rescue” with measures that offer some immediate relief. Too often, this relief cannot bring lasting, transformative, and positive change. With current economic problems likely to linger for years—and many of them systemic—we also know that future federal and state fiscal capacity will not allow the kind of governmental response we once took for granted.

We offer our assistance as you confront this challenge of creating the right opportunities, supports, and services for low-income and vulnerable children, families, and adults—responses that can address immediate needs, but more importantly, yield more effective and sustainable long-term results. We know that you, as candidates and policymakers, are seeking sound solutions to these issues, and we are ready to work with you.

*Only a strategically sound and intelligently crafted new vision for health and human services will produce better outcomes in the “new normal” of greater need and fewer resources. We offer an overview of our vision in this letter and are working now to follow with detailed action blueprints. We are committed to bold, innovative, and practical solutions—solutions that:*

- transcend gridlock and discard the fragmented and inefficient approaches of the past
- are fully focused on getting permanent results and building long-term capacity
- leverage the resources of all those having a stake in stronger, healthier families and communities
- use all the tools and techniques available elsewhere in government and the private sector
- demonstrate accountability for meaningful outcomes, not just compliance with procedural mandates.

### Our Vision of an Outcome-Based Approach

We work to achieve real, meaningful, and sustainable outcomes for all those who come to us—from those needing only the “light touch” of bridge supports to those with more intensive and long-term needs on whom we must concentrate our limited resources. To achieve these outcomes, our efforts focus on:

**Prevention** that strengthens communities, enhances economic opportunity, and stabilizes families—before children become endangered, before individuals slip far down the economic ladder, and before families become unable to access adequate health care. Sound prevention strengthens the social context, avoids temporary fixes that do not reduce dependence, and gets in front of problems before difficult and expensive remedial steps become the only option.

*The current child welfare funding system provides distressing disincentives for what are unquestionably sound investments in prevention and early intervention. Unlimited federal matching funds are available to keep children in foster care placements, but far fewer dollars are available to strengthen and support families so that children can safely remain at home in the first place. Arcane methods of assessing future budget costs, year-to-year “cost neutrality” mandates rooted in annual appropriations cycles, and an output-centric accountability system rob us of sound, long-term solutions to the needs of at-risk children and many other vulnerable groups.*

**Early intervention** that short-circuits dysfunctional family dynamics before they seriously exceed a family’s ability to cope; reinforces and promotes healthy development of children with special needs early in life; and moves at-risk families toward a more positive behavioral path—up-front investments that can treat anti-social behavior and stop declines in individual or family functioning, and that more than repay the resources needed to avert these consequences.

**Bridge supports** that give temporary but vital opportunities for quick movement into the workforce through cash assistance or in-kind help for low-income parents; assistance in purchasing food, medical care, and child care; child support; and specially tailored services for those with disabilities—steps that undergird the nation’s economy by preparing thousands of people every month to get and keep gainful employment.

**Capacity-building** through incentives for employers to hire public assistance recipients; fatherhood programs and other initiatives that strengthen basic family functioning; support for successful transitions into adulthood for youth aging out of foster care; connections between local food producers and neighborhood retail outlets; and community centers that serve as a more accessible and effective link with government services, nonprofit organizations, and private-sector resources.

**Sustainability** through well-functioning, nurturing neighborhoods; far greater use of community, faith, and home-based interventions and services; having appropriate sectors of government or the private sector provide infrastructure that supports self-reliance, such as good public transportation and broad-band web access—all building an underlying social framework that will empower sustained independence and help clients keep their hard-won accomplishments intact.

*Two of the most commonly accessed programs today, Medicaid and the Supplemental Nutrition Assistance Program (the new formal name for food stamps), provide a vivid example of the disconnects and conflicts that both make program access unnecessarily difficult, drive up government’s administrative costs, and overlook the meaningful goals we should be achieving. Although large numbers of people participate in both programs, the definitions of such basic concepts as household unit and income are far apart, and the means of collecting and verifying information are also quite different. The rules for updating case information, how it must be reported, and how quickly changes must be made are all different.*

*This example is one of many where programs have made significant and positive impacts, but typically serve only disconnected elements of what individuals and families need to make permanent advances in their capacity and functioning. Meeting human needs holistically requires an integrated, outcomes-focused, person-centered system. To function within such a system, current programs may require modest adjustments in some cases and more substantial reforms in others. The test for all these changes must be improved outcomes—and human services must begin serving that goal, not the needs of the existing, siloed bureaucracy.*

## The Foundations We Use—And That We Need

**M**any agencies are now implementing practices and programs that demonstrate the kind of future we know is possible, and necessary, for positive human service outcomes across the nation. These innovations are built around key organizational foundations and needs—making excellent use of the resources and tools now available but frequently hitting unnecessary barriers:

**Flexible financing** that yields far more effective results and higher returns through flexible, pooled, and multi-year federal funding; well-designed partnerships with other sectors of the community, including innovative blends of private, philanthropic, and public investment; reformed cost-allocation rules that allow outcome-based use of funds; adoption of tools and methodologies now common in other areas of government and the economy; and the absence of unfunded mandates and cost shifts to states.

**Technology infrastructure** that supports enterprise solutions across programs, departments, and levels of government; that supports integrated systems through flexible funding; and that is funded based on demonstrated need and effectiveness, not the rules of current program silos.

**A prepared workforce** that is deployed strategically and prioritizes those services demanding intensive staff attention; that has access to the very best business tools and techniques; that relies on the critical role played by our other workforce partners; and that is used flexibly to the best advantage of both recipients and the larger stakeholder community.

**Accountability** that is based on achieving meaningful outcomes; creative and continuous improvement techniques employed while work is under way; integrated, cross-program monitoring and evaluation to assess what we achieve in a results-oriented manner; cross-government cooperation; and full use of modern data exchange and analysis tools.

**Client engagement** based on equitable and appropriate responses to each person's and family's situation, not how well they may fit bureaucratic requirements; practice models based on evidence-based strategies meeting unique needs and leading to desired outcomes; and the knowledge that engaged communities and families can foster positive and lasting change.

We can no longer afford to use valuable public dollars for short-term, temporary fixes, something the present fragmented, uncoordinated, output-driven system has done for far too long. With appropriate improvements, the human service system can provide our clients and the larger society with better results, greater efficiency, and above all, stronger, healthier, and more independent lives.

*Some states have been able to use Medicaid Infrastructure Grant projects to produce significant results from investment in health coverage and employment supports for working people with disabilities.*

- *In one state, for those continuously enrolled in the state's Medicaid Buy-In program, overall Medicaid expenditures decreased by 22 percent from 2006 to 2009.*
- *The income of enrollees is twice that of other similar persons with disabilities.*
- *Participants' average hourly wages and annual income have increased over time, along with the amount of state taxes paid, and this increase ultimately prevents their re-entry into the need for deeper-end services.*
- *Through employment and earnings, participants have reduced dependence on other public assistance programs; up to one in five participants said they no longer receive public benefits.*
- *On the other hand the immediate and total loss of benefits when incomes rise—the “cliff effect”—is a real hardship on many participants and is clearly a disincentive for greater use of this approach.*

## Our Abilities and Resources

APHSA's state and local human service leaders bring unparalleled knowledge and experience to the task of serving individuals, families, and communities. State commissioners are appointed by their respective governors and come from a broad range of backgrounds in both the public and private sectors. As cabinet-level officials, they are directly responsible for the performance of one of the largest sectors of state government. Local administrators bring first-hand experience in meeting "on-the-ground" challenges—often in communities short of resources but rich in innovative and determined answers to their distinctive problems. A few samples of how we are leading change through embracing innovation and investing resources include:

- *States have developed extensive internal quality improvement processes that monitor their progress toward outcomes and that use evidence-based practices for sound, replicable results*
- *States are collaborating across jurisdictional lines to support families through comprehensive, holistic solutions to all the barriers confronting them, with specific plans to engage their federal partners in flexible funding and program proposals*
- *County human service departments have confronted tighter state and federal budgets by aggressively leveraging other community resources, and in the process further strengthening community engagement and self-reliance*
- *State and local agencies have honed their workforce knowledge to understand the complexities of working with children and families and to prioritize the development of families' own resources*
- *State and local agencies have substantially increased their own contributions to supporting programs and initiatives*
- *Agencies have made sure they are at the table when local decisions are made about such issues as economic development, public transportation, and employer incentives so that the interests of all residents are taken into account*
- *States have demonstrated the value and long-term payoffs of such preventive investments as early childhood development, leading to positive shifts in public support*

These examples are among many that show how the work of APHSA's members is more efficient, less costly, and more effective than ever before. ***But we cannot bring our successes to scale under the current federal policy and funding framework. A sustainable and national solution requires new approaches to public investment, a new commitment to outcomes over process, and mutual responsibility for the well-being of all Americans.***

## We Are Accountable—For Results that Matter

APHSA and its members fully embrace accountability for the public funds and for the lives entrusted to us. But we question those parts of the current oversight system that measure our achievements only in snapshots of outputs—tabulations of procedural steps that are part of our work, but by themselves do not illustrate actual outcomes and real, sustained progress for individuals, families, and communities. Some examples include:

- *Child welfare measures that are based on a sound beginning framework but that must now change so they will sufficiently recognize and encourage movement of children into permanent family placements and the continuous quality improvement processes states practice to monitor for improved children and family outcomes*
- *Proposals to measure the success of the Temporary Assistance for Needy Families program through national comparisons of the accuracy of TANF cash payments but that would not recognize the many differences among state TANF programs nor TANF's multiple services and interventions beyond cash assistance*
- *Directives that hinder states from quickly implementing the latest business process improvements in the Supplemental Nutrition Assistance Program*

We propose a new accountability framework for the human service system that will:

- *Deliver full value for the investments made in our work and measure that work against the standard of effective and lasting results*
- *Focus on meaningful outcomes and value sustainable, capacity-building success*
- *Establish a collaborative, solutions-oriented framework that promotes shared responsibility, mutual assistance, and continuous improvement*
- *Allow and encourage the most efficient and effective possible business processes and information system solutions for data sharing, customer service, and payment accuracy*
- *Foster community engagement so that families, neighborhoods, and communities participate in improving the social context and are committed to its sustained health*

## **What We Offer to Candidates and Policymakers**

APHSA and its members across the nation offer their expertise and service to the candidates in the 2012 presidential election and to other interested policymakers, whether seeking office or currently serving. We stand ready to provide:

- *A bold action plan that will address the nation's vexing human service challenges and responds to the critical need to take quick, effective action*
- *An integrated service delivery model that moves us into the modern marketplace, engages people where they are, and enables them to participate in solving their own problems*
- *Bipartisan, practical, innovative, and tested practice solutions that blend careful use of resources with effective outcomes*
- *A bridge over the traditional divides of political affiliation and government vs. private sector by synthesizing the best of what works*
- *A ready pool of expertise, real-world experience, and vision for positive change*

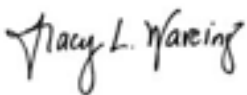
This outline of our vision and goals will be followed by detailed action proposals for developing and implementing workable policy and practice solutions. We will continue our focus on the broad outcomes needed to transform the effectiveness of our field but know that ground-level considerations must also be addressed for practical program administration and sound budgeting.

In 2012, APHSA will publish recommendations for implementing both the high-level principles articulated here and for specific legislative packages and regulatory changes, including those programs up for reauthorization or review.

In the meantime, we invite your questions, requests, comments, and suggestions. Please contact Larry Goolsby, APHSA's Director of Strategic Initiatives at [larry.goolsby@aphsa.org](mailto:larry.goolsby@aphsa.org).

We are confident that through sharing our expertise, combining our mutual resources, focusing on the long-term good of the country, and offering a dynamic partnership, we can more effectively serve all those who call this nation home and who seek a better life for themselves and their families.

Sincerely,



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*APHS is a bipartisan, nonprofit organization representing appointed state and local health and human service agency commissioners. APHS is the only association of the nation's top government human service executives from all 50 states, the District of Columbia, and the territories, plus their key state program managers and hundreds of county-level directors of human services throughout the nation.*