

| JUNE 2015 | CSD PERSPECTIVE 15-34 |

Working with Passion, Effecting Change in a Context of Uncertainty

By Sandra M. Moore

Good evening. It gives me great pleasure to stand before you this evening to share a few thoughts on the occasion of what I know will be one of the most memorable days of your life.

Many new and wonderful memories will emerge and stick, but none will erase this day.

So, thank you, GWB social work and public health masters and your families, for allowing me to share this time with you.

To Chancellor Wrighton, Dean Lawlor, and Dr. Sherraden, I say thank you for inviting me to speak tonight. Dr. Sherraden is a member of the board of directors of Urban Strategies, the company I lead. To the faculty and staff leaders, many of whom are friends and colleagues in community work we do together, thank you for having me.

I thought I would speak to you tonight about what I know for sure.

Certainly, that is one of the reasons I was invited to speak: Someone thought I would have something to say about which I am sure and confident; someone thought that I would have insights relevant to the work you have completed and to the work you are about to begin.

So I began preparing for the speech tonight by thinking about what I know, with some degree of certainty that might be useful or informative for a group of social work and public health professionals starting a new aspect of their helping careers.

The more I thought about my subject matter from the perspective of what I know for sure, the more I realized that I know very little for sure—that I am certain about very little.

To some extent, this loss of certainty seems to be a function of aging—in good ways and in not so good ways. Some loss of certainty comes from becoming more experienced in life and having your uncontroverted knowledge controverted by reality.

Some of the loss of certainty comes from forgetting, and sometimes an insight's context or relevance is lost.

So tonight, rather than tangle myself up in the matter of what I know for sure, I am going to share with you some observations based on what I think after working for almost 40 years in areas that you will touch, whether you touch them as outstanding and diligent social work professionals or as leadership in the world of public health.

First, I think that social work and public health professionals like you can change the world we live in. This includes change accomplished one person at a time or one system at a time and/or change effected all at once in sweeping public policy shifts.

Notice the "and/or." This is a grammatical twist mastered by lawyers to say that you can do any or all of the above. I think you can, and there is evidence to support what I think:

Yes, from Jane Addams and her relentless push for place-based service delivery and self-sufficiency—folks, that is modern-day language for the role and goals of the settlement house movement she pioneered;

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to Whitney Young and the Urban League's push for racial justice and economic opportunity—social work that is at the forefront of local, national, and international change movements today;

to Barbara Mikulski, one of the most fearless current-day social worker advocates in the United States.

In the lives of these three figures, there is evidence to support my thinking that you master social workers can change the world.

In looking at the top public-health achievements of the 20th century, I find evidence that public health professionals like you—professionals from around the world—changed the world. The social change driven from the public-health platform is mind boggling:

- » The development and implementation of a system of mandatory vaccination;
- » Worldwide commitment to greater motor-vehicle safety via the use of seat belts and the design of automobiles, from bumper depth to air bags;
- » The mandate for safer work places and the systems for control of infectious diseases.

All of this work done by public health professionals has changed the world in which we live and the way we live in it.

So with this evidence behind and in front of us, I am comfortable in what I think: You can change the world.

The key, of course, is to find your face in the work, to find your place, and to find the level that is most *effective* for you. Notice that I did not say "the place most *comfortable* for you." Why?

Because I know that it is impossible to engage in a change trajectory and to be comfortable at the same time.

However, if you can get into this change-the-world thing that I am exploring here and pushing toward you, I think you have to start now deciding about the outcomes you seek to achieve.

Those of you who will practice on the individual and the micro level should start now to think about how your work can be amalgamated with other work to have wider and deeper impact.

Those of you who will practice on the systemic or the macro level should start now to think about the policies that support the current conditions. You must ask yourself at the beginning of your career—ask yourself right now: To change the current conditions, what about the policies needs to change?

I think that you have heard much of this before. But as a leader of a not-for-profit company that is staffed from top to bottom with social-work, public-health, and public-policy professionals, I know that unbraiding the policy and practice behind the existing condition, or unraveling the policy that prevents the outcome we seek, is not the first line of attack I see from new professionals.

The first line of attack is often the helping, and I think that is right. But helping and, at the same time, examining the policy behind the condition, or unraveling the policy that prohibits the good outcome we seek, are essential to changing this world.

I have an exercise that I have used with my staff, and I think that it is worth sharing. I ask the team to tell me how we make our money at Urban. From the newest and least experienced of our team, the first reaction is always the same: What money? We are a not for profit!

My response is also the same: If we don't make money, you don't get paid and nobody gets help. Once they get past my response, they start to think about the question.

Thinking about how we get paid as a not for profit, and thereby understanding the source of our ability to work, really helps to move our thinking back to the policies that undergird the work.

Because we do our work with affordable housing developers, this exploration leads us back to some really old housing laws, policies, and practices that sometimes fuel some of the negative outcomes we see in deeply subsidized housing communities.

When we step back and look behind the condition of generations occupying public housing, we find that so-called good social-housing policies have had a hand in creating the multigenerational public-housing dependency that we currently face.

We have seen recent eruptions in communities from Ferguson to Baltimore. These will eventually reveal some housing policies that have weakened families and communities rather than strengthening them.

Starting now to think about the policy and regulatory framework that undergirds your work can help you to begin to think about how to facilitate

systemic change from either the micro or the macro level. In essence, you explore the why of change early to better understand what is needed next.

I also think that social work professionals work too slowly, and oftentimes public health professionals are guilty of this as well. Yes, too slowly.

Working with communities in crisis, your professional colleagues often fail to move with the degree of urgency and the clarity of purpose that is essential to meeting the people, population, and systemic needs in a time-sensitive way!

I have witnessed a social scientist's process: deep thought, then thorough assessment and study on the long journey to conclusions and action around live issues on the ground. I have wondered why we can't move faster.

For example, how much longer is it going to take to develop and implement an immediate safety net for those with debilitating mental illness and their caregivers?

How much longer is it going to take to develop and implement a system of support for people so sick that they are an immediate and obvious danger to themselves?

And to develop a system of support for their caregivers, who are sometimes so weary, so challenged, that they would rather see the loved one in jail than to try to continue dealing with the relentless issues chronic and critical mental illness brings?

This situation plaguing the neighborhoods and communities of cities around this nation—plaguing to varying degrees communities around the world—lies at the nexus of good social work and good public health work.

But the answers, intermediate and permanent, are coming too slowly. It is taking too long for either profession to effectively say, enough already: Here is how the systems of involuntary commitment need to change; here are the supports we need in place for community mental-health organizations to work effectively; here are the public health risks and rewards of these kinds of changes to the systems.

I am a lawyer. In the legal world, it is an accepted premise that justice delayed is justice denied. I think the premise is equally applicable here. Yes, I know this is tough stuff. There are complicated, multitiered issues in my example and in a myriad of

other examples we can draw from; so remember, I am only sharing with you what I think.

Nonetheless, I think you social-work and mental-health leaders need to begin to set some time lines to the changes you seek, the changes we need in society. Set individual time lines; pull together a group of you across your respective disciplines; throw in a couple of medical, business, and legal grads; call yourself a cohort—everyone else does; pick an issue; and put a time line to addressing it. Decide now to lead the change you seek and decide when.

I find it really painful when we are working with a family facing a world of challenges compounded by the uber-challenge of moving their home (even if you are only moving down the block and the home will be 10 times better than the one you are leaving, it is a challenge to move your home); and our helping professionals find it difficult to adapt to that reality, to that time line.

Social work professionals, public health professionals, we have to be more willing to urge for and to set some time lines for essential social changes. Everything cannot take forever.

Now don't get me wrong. I am not suggesting we arbitrarily decide that every family receiving state-based income support should be cut off in 3.5 years.

I am suggesting that we challenge such assertions with realistic time frames based on sound theory and practice, so that we own the goals, the outcomes, and the time lines, rather than having them imposed upon us.

I have two final thoughts:

- 1. Be willing to do what needs to be done, and
- 2. Stop when you no longer love it.

I think both of these admonishments are critically important.

Increasingly I see recent social work professionals and, to a lesser extent, public health professionals whose interests are so tightly focused that they miss the opportunity to be more effective at what they prefer—they miss the opportunity to learn more from doing more.

We see social work masters who want to work only with children, but children don't usually present alone; there is an adult involved, and some skill and ability to work with adults can only help in the work with children.

We see public health professionals who want to work in food and nutrition but have very little interest in work related to exercise and social-emotional behaviors.

The problems of your profession do not, in real life, present in such tightly wrapped packages. I think that we, as the professionals, carry the burden of being flexible and nimble; we must bring these qualities as individuals if in fact we want to design or redesign systems that work that way.

And as to my last point—stop when you no longer love it—it is for me the most important point. You must bring a level of passion and compassion to the work ahead of you, passion and compassion that are fueled by enjoying what you do. The poor, the weak, the disenfranchised, the sick, and the systems that serve them need that passion and compassion.

So, commit today to periodically look at your work and to make sure that you still love it. You will not love it every day. You will hate it some days. But a professor here at Washington University's Brown School of Social Work once shared the key with me when I was a young student in the undergraduate school: Check the tally regularly on your work, and make certain that the positives of what you are doing outweigh the negatives. Check to make sure that you feel good about what you are doing and that you take pride in it. If not, or if you are in doubt, stop!

And so, this is what I think. In fact, what I have shared is really what I know, and I hope that what I know will cause you to ponder.

Thank you for choosing these helping professions. Congratulations to you all. Hats off to family and friends for supporting these folks. Please go forth and do great work, with great passion!

Author

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