

Applying Problem-Solving Approach in Community Capacity Development: Strengths, Limitations, and Possibilities

The Chinese University of Hong Kong

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NG Nok Si, Christina 1155070577

SOWK2230

Mr TSE Siu Kwong
Ms WONG Chi Kan

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1. Introduction

From the early conceptual work of Lindeman (1959) to the contemporary social work practice, the problem-solving approach maintains its popularity and dominance in the community development process. Understandably, the problem-solving encounters more scrutiny, discussion, and challenges than any other theory or model (Jones and Silva, 1991). Further, increasing admonishments for alternative paths and strategies in community development, rather than problem-solving, are noted over the years (Kretzmann and McKnight, 1993; Warren, 1978).

Thus, this essay attempts to provide a theoretical analysis of the problem-solving model in fulfilling the goals of community capital development, the effectiveness and anticipated limitations will also be presented. The beginning section of the paper offers a comprehensive description of the capacity building in a community context, including its characteristics and associated social agencies. Secondly, a conceptual framework of the problem-solving model will be presented. Thence, the paper demonstrates the strengths and weaknesses of the model in facilitating sustainable community capital building. More specifically, the criticism of Kretzmann (1996) towards problem-solving approach will be addressed. Lastly, improvement for the current deficiency-oriented problem-solving approach will be discussed, with the possibility of integrating the community building and system interactions in the practice model.

2. Community Capacity and Capacity Development

2.1. What is Community Capacity?

The word ‘capacity’ is originated from the ideas of both ‘containing’ and ‘ability’, which implies the competence, skills, and power of an entity to maintain and achieve (Chaskin, 2001). Regarding the community capacity, it can be simply interpreted as the community’s ability to ‘work’; with the upholding of private assets, as well as its potential to develop. Moreover, the capacity is highly associated with the functioning and well-being of the community in various aspects, including the personal growth, organisations, physical infrastructures, and social networks (Gittel, Newman, and Ortega, 1995; Jackson *et al.*, 1997; Mayer, 1994). In general, a relatively inclusive and holistic definition of community capacity is illustrated by the following.

Community Capacity is the interaction of human capital, organisational resources, and social capital existing within a given community that can be leveraged to solve collective problems and improve or maintain the well-being of that community. It may operate through informal social processes and/or organised efforts by individuals, organisations, and social networks that exist among them and between them and the larger systems of which the community is a part (Chaskin, 2001, p. 7).

2.2.Characteristics of Community Capacity

According to Chaskin (2001), the community capacity can be analysed in four dimensions, including (1) the sense of community, (2) commitment, (3) ability to solve problems, and (4) access to resources. Nonetheless, these features vary in degree, also the definite correlation between them is rarely identified. To be more specific, a community may be well endowed with resources, at the same time ill-equipped with the problem-solving strength. However, the compatibility and a threshold level of all elements are still regarded as the foundation of all social changes and collective actions (Chaskin, 2001).

The sense of community refers to the connection and perceived closeness among the members, which is reflected by the mutuality of norms, values, and vision, with the instrumental aim in pursuing common good (Crenshaw and St. John, 1989; McMillian and Chavis, 1986). As noted by the scholars, stronger group cohesion, identity and a greater sense of belonging are more likely to be observed in the socially deprived regions (Stack, 1974). The shared problems and hardships appear as the matter of survival, which in turn strengthen the ties and togetherness of the neighbourhood. For example, the spontaneous security teams are usually found in the communities with high crime rate, loosen legal endorsement services, and active street gang activities. Further, the more intimate bonding within the neighbourhood induces the preference of its members to invest time and effort for the betterment of the

community (Morrow and Washington, 1993).

Commitment illustrates the initiatives and efforts of members to take up the community affairs with the consciousness of responsibility (Chaskin, 2001). Individuals with high commitment are described as the active residents, who see themselves as the stakeholders in the neighbourhood, and are willing to participate as well as contribute to maintaining the functioning of the community. More specifically, active members tend to step out of their scope of living; they are motivated to help other dwellers and respond to the collective needs (Crenson, 1983). Noted that, positive correlation between socio-economic status (SES) and commitment is observed (Berry, Portney, and Thomson, 1993). Also, the active members are usually few.

The ability to solve the problem is regarded as fundamental in transforming the commitment of residents to concrete social actions and structural changes in the community (Chaskin, 2001). Hence, it is most often highlighted in almost all definitional framework of community capacity (Christenson and Robinson, 1989). However, the community is virtually changing, the key informants and local leaders may opt in and exit over time. Thus, the collective well-being of a community should not solely depend on the ‘particular locus of the problem-solving mechanism’, i.e. the individual or local organisation (Chaskin, 2001, p.16). What is indeed significant should be a comprehensive problem-solving system and rationale, which is generated within the community and can be well adopted by its members. Th

flexibility of such mechanism is also essential in reacting to different social needs and changes.

Access to resources The last characteristic of the community capacity is embedded with the larger socioeconomic system of the whole society. The accessibility of resources describes the ability of the community in linking and utilising the human, material, financial, and political support both inside and outside the community, to create necessary changes (McKnight and Kretzmann, 1993). The community may at one hand enhance the internal capacity, including the knowledge and commitment of its members, and make use of the facilities within the neighbourhood. Moreover, it can also strengthen the ties with the external sponsors, service agencies or government, to gain necessary aid for community development.

The above four elements of the community capacity evolve over time. As mentioned, the community is in dynamics, the mobility of residents profoundly affects the sense of community and associated commitment. Any collective changes may further lead to the possibility of diminishing the existing operation mechanism.

2.3.Social Agencies in Community Capacity Development

The development of community never happens in a vacuum, the process of capital building is necessarily operating through individuals and is embedded within the larger social context, such as neighbourhood and beyond (Chaskin, 2001). Thus, in this paper, three social agencies including individuals, organisations, and networks are highlighted, with the operating

mechanism of community capital building.

Individual refers to the human capital and leadership found among the dwellers (Chaskin, 2001). More specifically, human capital is interpreted as the skills, knowledge, and personal assets of members, as well as their willingness to participate and invest in the community. When individuals emerge to exercise their human capitals to attain changes, motivate other members in the neighbourhood, or facilitate the collective actions, the leadership is shown. Thus, the leaders can arise from any members in the district, as long as he/she is capable of performing the personal capacity, or effectively mobilise the others due to the personal charisma.

Organisations represent the collective bodies, including the small organised groups (e.g. neighbourhood clubs), local-based organisations (e.g. service agencies), and formal institutions (e.g. school, government agencies), which are varied in size, formality and nature (Scott, 1992). The community capacity in the organisational level refers to the capability of different entities to perform their roles efficiently, flexibly, and responsively in echoing the social demands. Further, the effectiveness of an organisation is reflected in its representation, influence, and collaboration; instead of only counting the service or product provision (Glickman and Servon, 1998). The creation of new organisations may also enhance or increase the community capital.

Network describes the establishment of relationships among individual members,

informal groups as well as official organisations (Chaskin, 2001). Community capacity, or more precisely refers to the social capital, is reflected on the level of mutual support, trust, and resources flow within the networks (Putnam 1993). Furthermore, the social networks have two significant effects on community building. Firstly, the networks extend the access to resources, opportunities, and information beyond the limited scope of individuals. Secondly, the closure between networks generates the monitoring effects, which necessarily facilitate the social control mechanism, especially in youth (Chaskin, 2001). However, the networks differ in size, openness, functions, density, and strength; also, they are unevenly distributed among various stakeholders in the community (Mitchell, 1969). For instance, residents with relatively high SES may involve in a more extended and diverse networking system.

Capacity development is an organic and complex progress driven by the people in the community (Kenny and Clarke, 2014). In the process, participation, empowerment (both individual and collective), and community resilience are promoted; by making use of the wisdom and expertise of the neighbourhood as well as accessing external resources, to attain sustainable social, environmental, and spiritual development (Ife and Tesoriero, 2006; Kenny, 2006). In general practice, the community capacity building is usually achieved by more than one of the above agencies, which are interpreted as the vehicles of the development. Further, the social agencies are inter-connected to fulfil a corporate agenda of actions for the well-being

of the community.

3. Problem-Solving Approach in Community Capacity Development

3.1. What is Problem-Solving Approach in Social Work

Social problem solving is illustrated as the cognitive-affective-behavioural process in which individuals are equipped with enhanced awareness, to acknowledge, identify, and respond to the problematic situations in the real-life social environment (D’Zurilla and Nezu, 1982). At the same time, members become capable of performing efficient or adaptive coping strategies in tackling the problems. Thus, problem-solving is described as both a skill and a social learning process (D’Zurilla, 1986).

Further, as demonstrated by D’Zurilla and Nezu (1990), by the social problem-solving consists of the motivational component known as the problem orientation, which can be divided into three response assortments. The cognitive subcomponent of problem orientation describes the proper consideration, established attribution as well as the independent coping strategies in responding to the problems. The emotional component refers to the instant emotional reaction and mental state related to the problems, which includes the positive responses (e.g. aspiration, enthusiasm, excitement), negative responses (e.g. despair, acrimony, tension), or a combination of the two (Schwartz and Weinberger, 1980). The behavioural

subcomponent demonstrates the approach-avoidance impulses during problematic situations.

The approach inclination initiated confrontation against problems; the avoidance tendency allows the escape from problems or dependence on others to solve the problems.

3.2.Strengths of Problem-Solving in Capacity Development

Service agencies and the practitioners usually enter the community due to the existence of problems, needs of residents, or associated demands of services (Jones and Silva, 1991). Thus, it is understood that the social problem-solving model has received more attention and prominence than any other concept or theory in community development (Christenson and Robinson, 1989). The problem-solving model adopts scientific methodology and thinking in community development, which emphasises the mechanical cause-and-effect of social problems, rational knowledge inquiry and the task-oriented process (Blakely, 1979). Further, the problem-solving model provides straightforward and clear guidelines for the scrutiny and actions in the community.

Though a universal practice model has not been attained, and different problem-solving models may be comprised of four to ten steps; it is primarily divided into four stages (Lindeman, 1959; Jones and Silva, 1991). (1) During the initial stage, the workers attempt to identify and get in touch with the nature of the problem by exploration; also, analyse the severity and complexity of the problem by gathering information in community assessment. (2) In the goal-

setting process, the public consensus is reached on the ideal outcomes of the intervention, appropriate planning in tackling problematic situation should also be decided collectively. (3)

The implementation stage executes the ideas, possible solutions into real changes and actions.

(4) Lastly, evaluation is necessary for examining the effectiveness of the progress, as well as deciding either the maintenance or abandonment of the project.

The idea of capacity development usually involves the possibility and ability of a community to develop, which implies the potential of a community to achieve specific roles. However, what prevents the community from attaining its ideal and optimal functioning is known as the deficit or problem. Thus, capacity development in this sense is to compensate and remove the weaknesses hence allow the optimal 'growth' of the community to 'achieve its potential' (Ife, 2010).

3.3.Limitation of Problem-Solving in Capacity Development

However, it is argued that the deficiency-oriented problem-solving approach countermands the fundamental principle of community capacity development, which emphasises the strengths, expertise of the community, and attempts for the exploration and utilisation of the community assets (Ife, 2010). To be specific, the original assumption of the problem-solving model is that the optimal functioning of the community can be enhanced by removing or fixing the existing deficits. Thus, the operation the community capital focuses on

the compensation of its weaknesses, rather than promoting the potential and holistic well-being of the community. The pathological perspective in social problem-solving starts with the diagnosis of deficits, and provides treatment accordingly, hence the community is interpreted as a problematic one.

In the problem-solving approach, the assessment of the community usually converses into a ‘needs map’, which mainly reveals the troubles, deficits, and inadequacy of the neighbourhood (see *Figure 1*), instead of the inherent assets and strengths. Though these needs map does not necessarily disclose the whole reality of the community, it most likely determines how the policies and programmes should be designated as well as implemented, to address and resolve the social problems (Kretzmann and McKnight, 1993). Further, the needs map, including the highlighted deficiency, also serves as the neighbourhood guide to mass media and public. The negative images associated with the perceived deficits is thus created and widely spread. For example, in 2006, Tin Shui Wai became renowned as the ‘City of Misery’ because of the collective suicide, domestic violence, and mental illness frequently featured by the media. Though years have gone, and Tin Shui Wai is now well-developed into a proper and systematic New Town, such label is hardly removed.

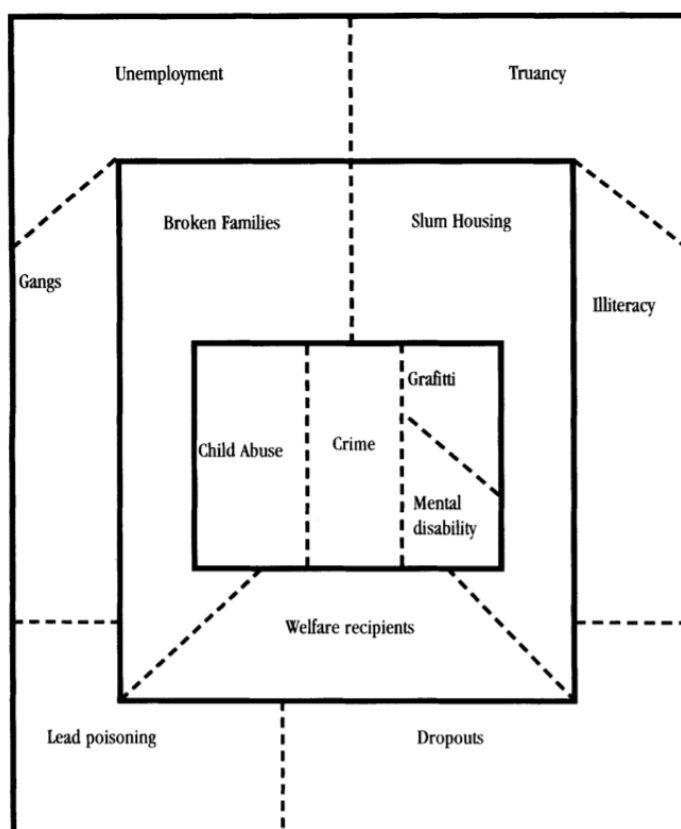


Figure 1. Demonstrated Neighbourhood Needs Map by Kretzmann, J., & McKnight, J. P.

(1996). Assets-based community development. *National Civic Review*, 85(4), 28.

The contagion of disease-and-disorder based thinking in problem-solving model stigmatised the neighbourhood and its people, which is regarded as the disempowerment at the very first place (Ife, 2010). Moreover, the negative labels are interpreted as the master statuses, which undermined the personal uniqueness, values, and strengths of individuals, as well as the ecological context of the people (Segal, Silverman and Temkin, 1993). The negative images associated with the deficiency orientation indoctrinates the mindset of people. More specifically, residents begin to view themselves as lacking and defective, hence reconstruct the

identity as the 'clients' with special needs (Kretzmann and McKnight, 1993). This self-victimization denies their ability in taking control of the life and betterment of the community. In the process of resigning personal identity and capacity, the dependence on external aids is thence increased, a wall between the 'problematic group' and the 'well-functioning' society is built. Thus, the deprivation of social identity, political right, and social space happens in accordance.

More severely, the needs and deficiency addressed in the problem-solving model are usually defined by the external actors, i.e. the social workers, scholars, and bureaucrats. This kind of authority figures primarily decide what is 'wrong' in the community, and urges for the 'fixation'. The residents are therefore solely excluded from the decision-making, but just act as the sample for information collection and analysis, which can be interpreted as another form of disempowerment. The power imbalance between the expertise and members in the neighbourhood creates professional scepticism and pessimism, and the 'knowledgeable' professionals may express challenges, even criticism on the capacity and resilience of people (Sharrock and Anderson, 1991). Moreover, the doubt of professional also alters the residents' view on self-ability, which may lead to the perceived incapability of other members in the neighbourhood. The mutual trust and reciprocity are thus diminished. Also, the connectedness and emotional ties among the neighbourhood are weakened. Furthermore, the

dwellers may at the same time perceive the outside expertise as a reliable and direct support, which is also an easy way out for them to shift their responsibilities to the service agencies. Thus, the residents become the consumers of the services, rather than the actual producers in the community (Kretzmann and McKnight, 1993).

Regarding community development, counting and measuring the needs in the neighbourhood may lead to the disintegration of attempts and efforts, in the provision of services (Kretzmann and McKnight, 1993). Nonetheless, without considering the ecological context of the community, a collaboration between services is hardly achieved. More specifically, different programmes and resources are designed in responding the needs from all sides of the community. Hence, the problem-solving model may primarily target on the separated individuals or groups; rather than generate a comprehensive development plan which involves the participation and operating the community capacity (Kretzmann and McKnight, 1993). Also, the resources are more often to be directed to the service providers instead of the members or the neighbourhood, a vicious cycle of increasing dependence is thus observed. More significantly, the problem-solving model targets on the maintenance or 'survival' of the community; the goal of structural change and sustainable development in capacity building is hardly attained. Thus, as noted by Kretzmann (1993, p. 23), the deficiency-oriented community work may appear as 'a needs-driven dead end'.

4. Possibilities of Adopting the Problem-Solving Approach in Community Capacity

Development

By comparing the problem-solving model (refer to section 3) with the capacity development (refer to section 2), it is noted that the pathological thinking in social problem-solving appears contradictory to the characteristics of community capacity. The master statuses created negative images of the residents, and the associated self-doubt diminishes the commitment and sense of community in the pursuit of collective well-being. The high reliance on external service providers undermined the problem-solving abilities of individuals and the neighbourhood. Though the community may be granted with certain external resources; the stigmatisation and context stripping consequently neglect the capacity and assets of the region. Moreover, the pathological model of problem-solving provides significant authority to the professionals, which may lead to power imbalance, and result in the manipulation over the ‘problematic community’.

However, the extensive bias of pursuing ‘fixation’ and ‘treatment’ in the pathological problem-solving model can be improved by the parallel integration of community-building process and systems interactions (Jones and Silva, 1991). The community building stresses on the horizontal relationship among residents, as well as the broadening of democracy and participation (Ploch, 1976; Oberle, Darby and Stowers, 1975; Warren, 1978). According to

Jones (1970), the community building process is usually initiated by entering the neighbourhood and interacting with its members. In the process, the practitioners get to know about the networks, interaction patterns and facilitate of the community, which paves the way of establishing intimate ties among members. Noted that, in community building process, the relationships are exceptionally important for facilitating the collective work. Furthermore, social organisation is established, which formulates and strengthens the bonding within the community. After the body is built, the community capacity is then operated for its functioning. In the process, capacity enhancement is also achieved, through the skill learning, leadership development, and implementation of strategies. Lastly, the practitioners may gradually pass down the ability, and authority to the members, and eventually, exit after notable progress is attained.

As pointed by Pincus and Minahan (1970), four interacting systems are observed in the process. Firstly, the change agent (e.g. social workers) attempts to create changes in the neighbourhood, and the change agent system (e.g. belonged service agency) provides support and backup the change agent. He/ she then goes into the community, identify and contact with the client system (e.g. residents). The two systems start to collaborate and recognise the target system to be changed (e.g. presented problems). Finally, the action system is formulated.

The integrated practice model is relatively efficient in delimiting the pathological

methodology and consequences in the social problem-solving, as it provides a highly comprehensive development plan which involves the participation of members, as well as the utilisation of community capacity. More specifically, ‘problem solving generates action, community building broad ownership of that action, and system interaction lends direction to the action’ (Jones and Silva, 1991, p.5).

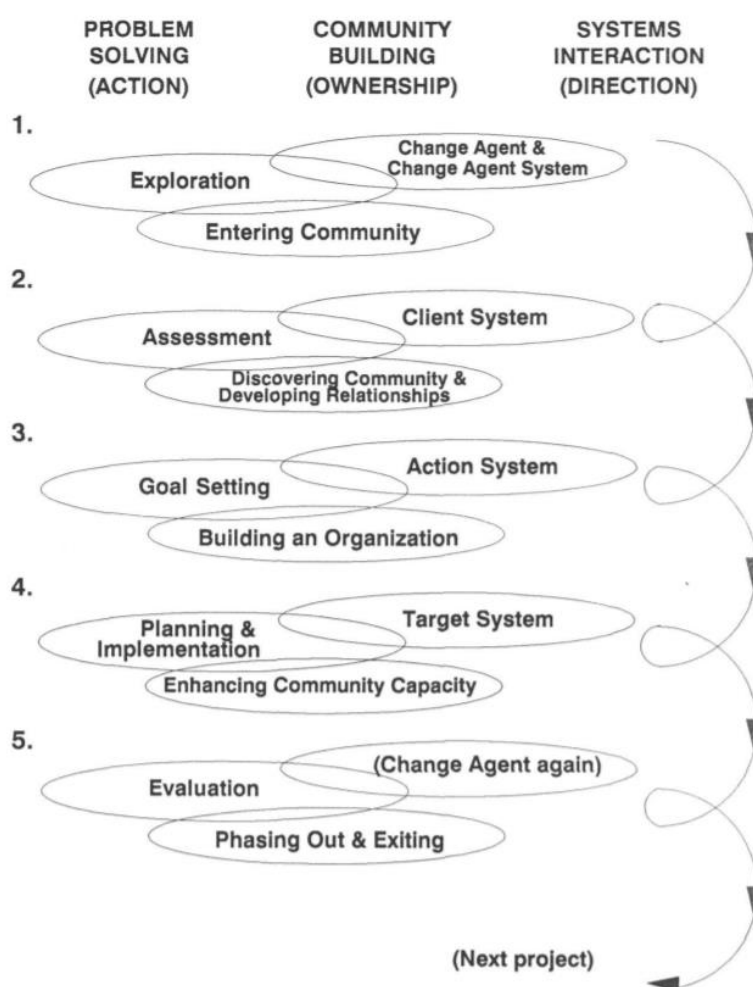


Figure 2. Integrated Practice Model for Community Development by Jones, B., & Silva, J. (1991). Problem solving, community building, and systems interaction: An integrated practice model for community development. *Community Development*, 22(2), 6.

5. Conclusion

In conclusion, this paper examines the application of problem-solving approach in the community capacity building. Though, the clearness and flexibility of social problem-solving are appreciated; the pathological thinking of the model is heavily criticised, as it leads to the self-victimization, power inequality, and manipulation, which is highly contradictory to the goal of capacity development. Thus, an integrated model of problem-solving, community building and systems interaction is presented to shift the ownership of community to its members.

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References

- Berry, J. M., Portney, K. E., & Thomson, K. (2002). *The rebirth of urban democracy*.
Brookings Institution Press.
- Blakely, E. J. (1979). Toward a science of community development. *Community development research: Concepts, issues and strategies*, 15-23.
- Chaskin, R., Brown, P., Venkatesh, S., & Vidal, A. (2001). Community capacity and capacity building: A definitional framework. *Building community capacity*, 7-26.
- Christenson, J. A., & Robinson, J. W. (1989). *Community development in perspective*. Iowa State University Press.
- Crenshaw, E., & John, C. S. (1989). The organizationally dependent community: A comparative study of neighborhood attachment. *Urban Affairs Quarterly*, 24(3), 412-434.
- Crenson, M. A. (1983). *Neighborhood politics*. harvard University press.
- D’Zurilla, T.J., & Nezu, A. (1982). Social problem solving in adults. In P.C. Kendall (Ed.) *Advances in cognitive-behavioural research and therapy* (Vol. 1, pp. 201-274). New York: Academic Press.

D'Zurilla, T. J., & Nezu, A. M. (1990). Development and preliminary evaluation of the Social Problem-Solving Inventory. *Psychological Assessment: A Journal of Consulting and Clinical Psychology*, 2(2), 156.

D'Zurilla, T. J., & Nezu, A. M. (1999). *Problem-solving therapy: A social competence approach to clinical intervention*. Springer Publishing Company.

Gittell, M., Newman, K., & Ortega, I. (1995). Building civic capacity: Best CDC practices. In *Annual Urban Affairs Association Conference*. Portland, OR.

Glickman, N. J., & Servon, L. J. (1998). More than bricks and sticks: Five components of community development corporation capacity. *Housing Policy Debate*, 9(3), 497-539.

Ife, J. (2010). Capacity building and community development. *Challenging capacity building: Comparative perspectives*, 67-84.

Jackson, S. F., Cleverly, S., Poland, B., Robertson, A., Burman, D., Goodstadt, M., & Salsberg, L. (1997). Half full or half empty? Concepts and research design for a study of indicators of community capacity. *North York Community Health Promotion Research Unit*, 97-01.

Jones, B. (1970). Making the scene in Commerce City: An Evaluation of a community development program in police-community relations. Denver: Social Change System, Inc.

Jones, B., & Silva, J. (1991). Problem solving, community building, and systems interaction:

An integrated practice model for community development. *Community Development*, 22(2), 1-21.

Kenny, S., & Clarke, M. (Eds.). (2014). *Challenging capacity building: comparative perspectives*. Place of publication not identified: Palgrave Macmillan.

Kretzmann, J., & McKnight, J. P. (1996). Assets-based community development. *National Civic Review*, 85(4), 23-29.

Lindeman, E. (1959). Ten steps in community action. In Harper, E. & Dunham A. (Ed.), *Community Organization in Action* (pp. 168-171). New York: Association Press.

Mayer, S. E. (1994). *Building community capacity: The potential of community foundations*. Rainbow Research.

McKnight, J., & Kretzmann, J. (1993). Building communities from the inside out: A path toward finding and mobilizing a community's assets.

McMillan, D. W., & Chavis, D. M. (1986). Sense of community: A definition and theory. *Journal of community psychology*, 14(1), 6-23.

Mitchell, J. C. (1969). *The concept and use of social networks*. Bobbs-Merrill.

- Morrow, K., & Washington, M. (1993). How families manage risk and opportunity in dangerous neighborhoods. *Sociology and the public agenda*, 8, 231.
- Oberle, W. H., Darby, J. P., & Stowers, K. R. (1975). Implications for development: Social participation of the poor in the Ozarks. *Journal of the Community Development Society*, 6(2), 64-78.
- Pincus, A., & Minahan, A. (1970). *Toward a Model for Teaching a Basic First Year Course in Methods of Social Work Practice*. Council on Social Work Education.
- Ploch, L., (1976). Community development in action: A case study. *Journal of the Community Development Society*, 7(1), 5-16.
- Putnam, R. (1997). The prosperous community: social capital and public life. *Frontier issues in economic thought*, 3, 211-212.
- Schwartz, G. E., & Weinberger, D. A. (1980). Patterns of emotional responses to affective situations: Relations among happiness, sadness, anger, fear, depression, and anxiety. *Motivation and emotion*, 4(2), 175-191.
- Scott, R. W. (1992). *Organizations: Rational, natural, and open systems*. Aufl., Englewood Cliffs (NJ).
- Segal, S. P., Silverman, C., & Temkin, T. (1993). Empowerment and self-help agency practice for people with mental disabilities. *Social Work*, 38(6), 705-712.

Sharrock, W., & Anderson, B. (1991). Epistemology: professional

scepticism. *Ethnomethodology and the human sciences*, 51-76.

Stack, C. B. (1975). *All our kin: Strategies for survival in a black community*. Basic Books.

Warren, R. L. (1987). *The community in America*. Lanham, MD: University Press of

America.