

The Human Services Value Curve

A Leadership Framework and Theory of Change for Health and Human Services Outcomes and Value



LEADERSHIP FOR A
NETWORKED WORLD



The Human Services Value Curve is dedicated to
Banita Jacks' children:
Brittany, Tatianna, Aja, and N'Kiah.

May you rest in power.

“History, despite its wrenching pain, cannot be unlived, but if faced with courage, need not to be lived again.”

– Maya Angelou



Reflections from the Executive Director

Colleagues:

People often ask me what inspired the Human Services Value Curve. The answer to that is you – and your capacity to effect transformational outcomes for people, families, and communities.

This inspiration, however, wasn't all hopeful exuberance. I was fresh out of studies at Harvard Kennedy School, and steeped in theories about organizational capacity, when my practical thinking was radically reframed by a *Washington Post* article about real-world outcomes for a family in Washington, D.C.

Banita Jacks had been living on the edge for some time. Dropping out of school in the 10th grade after the birth of her first daughter, she lived in a homeless shelter and later, with assistance from a community-based organization, a permanent home. Scraping by on a hairdresser's income, Banita scrambled to make a life for herself and her daughters Brittany, Tatianna, Aja, and N'Kiah. But it was a tough road. When her partner died, Banita spiraled downward, and her children languished. There were warning signs of impending disaster: Brittany's teachers noticed she had been absent and seemed sad; a social worker caught site of the unkempt girls, but she wasn't allowed inside; appointments were missed; rent unpaid. Months passed. Eventually, federal marshals came to the home to serve an eviction notice, and in the upstairs bedrooms they found the decomposing bodies of the four girls, all killed by Banita months earlier.

The death of the Jacks girls shook me to my core. The case reminded me of how pivotal human services are at key junctures in life. Take for example my family. My mom, Juanita, left school in the 10th grade, had me, and went on to marry and have three more kids. After more than a decade of surviving an abusive husband, my mother gathered the resolve to pack-up and leave. We had a bag of clothes each, an old car, and one tank of gas. Juanita grappled with depression and anxiety and back-breaking work, but also had grit and savvy and help from extended family. And critically, my

mom connected with exemplary human services organizations that lifted us up. These organizations put my family at the center, helped us with housing, and wrapped us in services that enabled us to have a shot – a chance to live full lives and have impact of our own. In fact, without this lift I likely wouldn't be here right now, writing this letter, and working with you to help other families achieve their full potential.

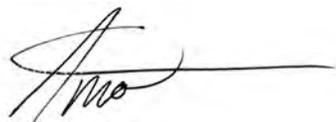
The outcomes in these two cases are at the extremes, yet their contours are common and illustrate not only the challenges at-risk families face, but also what's at stake for human services organizations striving to help individuals, families, and communities attain a self-sufficient, healthy, and sustainable future. In the Jacks case, a review revealed that multiple government and non-profit organizations had contact with the family in the preceding months. While signs of impending danger might have been noticed if these organizations collaborated, each organization worked in a "silo" – no integrated structures or services were in place to share information and enable a coordinated response. In the case of my family, the combination of person-centered and family-oriented services created a "generative" environment that helped my siblings and me thrive.

The two cases above also show the power of vision and design. We have to open our eyes widely to the capacity of our leadership and organizations to truly effect positive change. Frederick Douglass remarked: "There is a prophet within us, forever whispering that behind the seen lies the immeasurable unseen." Douglass reminds us that to lead – exceptionally – in this world means we must intentionally work to see untapped potential not only in the people we help, but also in how our organizations are designed to help them. Always striving to make the immeasurable unseen – seen.

Like you, I believe every person should be "seen" – no one is less than or greater than anyone else, and every person should have an equitable opportunity to live their fullest lives. The Human Services Value Curve was created as a theory of change and leadership framework to help you envision and design the systemic and organizational capacity to deliver transformational solutions for people.

My sincere hope is that the Human Services Value Curve can be your guide to realizing this vision.

Onward,

A handwritten signature in black ink, appearing to read 'A. Oftelie', with a long horizontal line extending to the right.

Dr. Antonio M. Oftelie

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The Challenge Before Us: Creating the Future of Outcomes and Impact

Zoom in on the introductory stories and you will see micro level examples of work that front-line human services executives do every day. Yet the examples also exist within larger systems and structures, that – if even slightly redesigned – can dramatically change outcomes for entire communities. The Human Services Value Curve can enable your organization to develop and execute a plan of action for both system-wide change and person-centric solutions that when put together create the future of outcomes and impact.

This fusion of the micro and macro view is critical for transforming health and human services outcomes as it illuminates the systemic and structural forces that affect service needs, design, and delivery. For example, families like the Jacks often reside in communities where the “social determinants of health” negatively affect health and wellbeing.¹ Whether in an urban or rural community, the factors are often similar - living wage jobs are rare, housing is hard to come by, schools are underfunded, healthy food is scarce, and healthcare is inaccessible. These systemic and structural barriers will persist and amplify the struggles vulnerable individuals face unless they are dismantled and replaced with comprehensive systems of support that improve social determinants of health and lift up individuals, families, and communities.

i CSDH (2008). Closing the gap in a generation: health equity through action on the social determinants of health. Final Report of the Commission on Social Determinants of Health. Geneva, World Health Organization.

Zoom out even wider and you will see the global importance of health and human services transformation and what's at stake.

First, the world has much work to do in eradicating poverty. In the United States, while poverty has decreased for the overall population, about 106 million people – nearly one in three – are economically insecure, meaning they live in households with incomes below 200 percent of the federal poverty level (\$25,000 for a family of four).ⁱⁱ The rate of “deep poverty.” (the percentage of the poor with incomes below one-half of the poverty threshold) has also increased from 30 percent in 1975, to 45 percent today.ⁱⁱⁱ From a global perspective, while great strides have been made to reduce poverty, roughly 10 percent of people still live on \$1.90 or less a day^{iv}, with the cause, effect, and solutions inextricably linked across social, economic, and health and human services policy.

Second, inequity in social and economic mobility is stifling hope and lives. Black and Hispanic Americans have had official poverty rates about two to three times higher than those for non-Hispanic Whites, highlighting the urgent need for racial equity in outcomes. Exacerbating this trend is that poverty tends to be more concentrated in some regions than others and living in communities with high levels of poverty is correlated with less favorable health, income, and behavioral outcomes – a challenge that disproportionately affects Black and Latinx people. The generational effects of this gap result in an array of negatives outcomes, such as the fact that in 99 percent of neighborhoods in the United States, Black boys earn less in adulthood than White boys who grew up in families with comparable income, and 70 percent of middle-class black children are likely to fall out of middle-class as they move into adulthood.^v Apart from the social and human cost of decline in social and economic mobility is the economic cost. The nation's growth and prosperity are suppressed by inequality. For example, PolicyLink has found that \$2.5 trillion in economic growth was lost from racial gaps in income in 2015 alone^{vi}, and according to recent analysis by McKinsey & Co, closing the racial wealth gap could grow US Gross Domestic Product six percent by 2028, thereby lifting all people to a brighter future.^{vii}

Third, on the horizon is the “4th Industrial Revolution,” which will usher in dramatic new levels of automation and artificial intelligence, as well as unprecedented promise and peril to workforce development, economic growth and community health. Hovering over all of this is the existential crisis in climate change and the resulting health and economic impacts on vulnerable people. Human services leaders and organizations must prepare now to ensure equitable growth and outcomes for all people.

Think about the challenges and opportunities highlighted above and take a moment to think about your organization. What outcomes and value must it achieve? How do your people design and deliver services to meet those outcome goals? How should those services be optimally designed across systems and organizations? And importantly, what new solutions and services can be created? These are vitally important questions to be asking at any time, but particularly in times of major societal change as they shine a spotlight on how your health and human services organization and system may need to transform its capacity to achieve outcomes.

This challenge is surmountable. We have proven strategies and methods to improve outcomes and impact. We know that children from low-income families with access to health and nutrition programs are more likely to graduate from high school. We have seen that helping low-income parents increase their educational attainment also positively affects their child's emotional health and performance in school. We have made the connection that families with stable housing and childcare subsidies move up the income ladder faster and more sustainably.^{viii} We have

ii <https://www.policylink.org/resources-tools/100-million>

iii “Poverty in the United States: 50-Year Trends and Safety Net Impacts,” Office of Human Services Policy, Office of the Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services, March 2016

iv <https://www.worldbank.org/en/publication/global-monitoring-report>

v Chetty, Raj, Nathaniel Hendren, Maggie Jones, and Sonya R. Porter. The Equality of Opportunity Project. “Race and Economic Opportunity in the United States.” March 2018 http://www.equality-of-opportunity.org/assets/documents/race_summary.pdf

vi <https://www.policylink.org/resources-tools/100-million>

vii McKinsey and Company. “The Economic Impact of Closing the Racial Wealth Gap.” August 2019

viii <https://ascend.aspeninstitute.org/two-generation/what-is-2gen/>



documented how human services, health, and policing agencies working together on collective challenges can make communities safer and healthier.^{ix} All of these generative outcomes help cut the cycle of poverty and move families and communities toward a flourishing life.

We also have the practice models and technologies to increase the capacity of organizations to design and deliver these outcomes. Behavioral economics and brain science open up new ways of making solutions and services more effective and less costly. Analytics can help organizations better understand community trends and work upstream to help identify and solve challenges. New business and operating models that leverage networks and collaborative technologies enable us to design novel “ecosystems” that coproduce new solutions to address and solve the root causes of individual, family, and community health and human services challenges. All of these advances enable the future of outcomes and impact. We just have to put the pieces together and take concerted action.

To orchestrate this action, progressive leaders will take an outcomes-focused and person-centric view – focusing like a laser on a customer’s or population’s life challenges and the forms of outcomes needed to make progress. In practice, developing governance and structures that optimize capacity, designing services and solutions to be customer-centric, leveraging data and evidence to drive insight, and fostering an organizational culture that is agile, creative, and innovative will be keys to success.

As you will see in the Human Services Value Curve, innovation and transformation is a journey that will take vision and resolve. President Kennedy once noted: “There are risks and costs to a program of action. But they are far less than the long-range risks and costs of comfortable inaction.” In our era, leading human services transformation forward is challenging, yet to achieve the outcomes society needs we must not rest on comfortable inaction. The newfound capacity will help health and human services organizations not only meet today’s demands, but also build a foundation for the inevitable challenges of the future.

ix <https://dev-lnw-migration.pantheonsite.io/content/protecting-safety-health-and-hope-future-policing-and-human-services-collaborating-outcomes>



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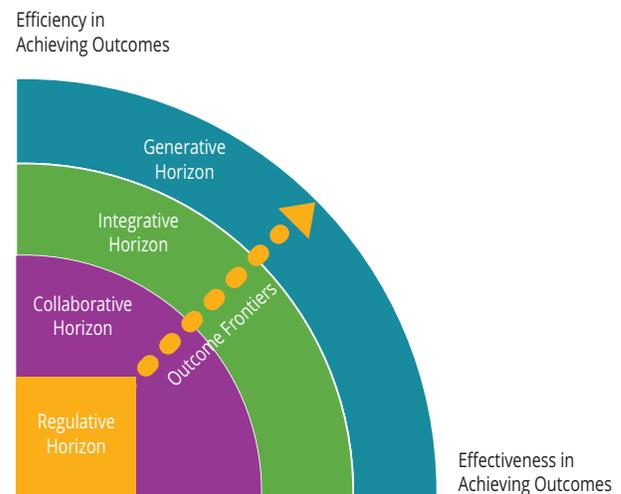
The Human Services Value Curve

The Human Services Value Curve is a transformation framework and system-wide theory of change that inspires and equips leaders and policymakers of health and human services organizations, systems, and communities to envision and create a path for achieving better and more equitable outcomes for individuals, families, and communities, as well as to improve and accelerate human services social and economic value for society.

At the core of the Human Services Value Curve is an intentional focus on growth – measured in two primary ways and displayed on the axis points. First, outcomes growth is measured by ever-increasing forms and value of outcomes. For example, as a human services organization or system advances, it improves its ability to develop, deliver, and communicate growth in equitable outcomes and impact. Second, capacity growth is measured by how efficiently and effectively policies, services, and solutions create this value. In practice, as an organization moves up the Human Services Value Curve, innovation builds and improves effectiveness and efficiency and overall organizational capacity. When combined, the growth in outcomes and growth in capacity determines net growth in social value.

The Human Services Value Curve charts this growth in four horizons, each of which represent a progressive level of outcomes, impact, and social value. The horizons are described in brief as:

- **REGULATIVE HORIZON:** The focus is on supporting and helping people and families in critical need via an organization that can deliver customer-friendly and cost-effective programs that adhere to evidence-based policy and program rules, processes, and regulations.
- **COLLABORATIVE HORIZON:** The focus is on helping people and families gain stability via multiple organizations that collaborate across programmatic and organizational boundaries to deliver an optimally tailored mix of services to the customer.
- **INTEGRATIVE HORIZON:** The focus is on achieving sustainable social and economic mobility for people and families via an integrated system of services that co-create novel services and solutions that address the root causes of challenges and opportunities.
- **GENERATIVE HORIZON:** The focus is on generating equitably flourishing communities via an ecosystem of organizations, machines, and services that seamlessly design and deliver solutions for multi-dimensional socioeconomic and population-level challenges and opportunities.



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The horizons of the Human Services Value Curve are fluid and dynamic – meaning that most organizations and systems have an array of services and programs at each horizon and the capabilities at each level mutually reinforce and enable continuous improvement throughout the entire model. In practice, this implies that each horizon is strategically important to the whole. For example, as an organization becomes more Collaborative, Integrative, and Generative, the newfound learning and competencies acquired at each horizon cycle through to bolster foundational Regulatory capabilities. Essentially, an organization that has Generative outcomes must also excel at sustaining the Regulatory Horizon.

In traversing the Human Services Value Curve, there are four Advancement Levers that bring dynamic capacity at each horizon. The Advancement Levers are described in brief as:

- **GOVERNANCE & STRUCTURES:** This lever represents the connection between a human services organization's outcomes focus and its design. It includes the blueprint for how resources are organized and allocated, and in particular, the supporting structures, systems, and processes necessary to facilitate interactions between organizations, services, and constituents.
- **INSIGHT & EVIDENCE:** This lever sets how a human services organization understands and responds to information on individual, family, and community-wide needs for services and solutions. In addition, this lever represents data-led evidence on the effectiveness and efficiency of services in order to inform policy, capacity, and overall service transformation.
- **SERVICES & SOLUTIONS:** This lever captures how a human services organization co-creates and designs solutions with customers and stakeholders in order to optimize outcomes. This lever also charts the policy change and service innovation that improves the capacity and agility to respond to changing community-wide needs with new forms of services and outcomes.
- **PEOPLE & CULTURE:** This lever represents the knowledge, capabilities, competencies, and roles individuals and teams need to deliver services and outcomes. In addition, this lever addresses fostering talent in order to develop and sustain a resilient, innovative, and agile environment, along with the cultural dynamics that underpin capacity and performance.

At each horizon, the levers adapt to and enable the growth orientation that leads to ever more valuable outcomes and impact. Like the horizons of the Human Services Value Curve, the levers are also mutually reinforcing and enable learning and continuous improvement throughout the entire framework. When combined, the resulting increase in growth enables the human services organization and system to mature and deliver broader and more valuable and equitable outcomes and impact.

The Human Services Value Curve in Action

The following pages contain descriptions of each horizon of the Human Services Value Curve, Advancement Levers, and brief examples to guide and inspire your journey.



Regulative Horizon:

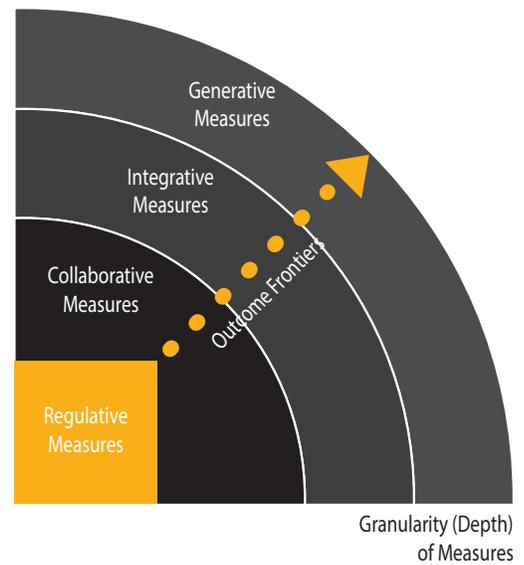
This level serves as a foundation for efficient and effective delivery of programs that help individuals and families with near-term challenges. At this horizon, an individual human services organization is utilizing categorical funding and resource inputs in order to deliver discrete programs and services to customers and satisfy policy and compliance requirements of governing entities and stakeholders. As the name of this horizon implies, management and operational processes, systems, and technology, are designed to deliver reliable transactions, benefits, and services that adhere to rigorous policy and program regulations. From an outcome growth perspective, a Regulative organization can provide measures of the inputs and outputs (such as program investment, number of individuals receiving services, percentage of cases closed in a given time period, etc.) that describe and quantify the activity and basic trends of human services programs over time. To maximize capacity, executives in the organization focus on addressing near-term needs of customers, strive to provide user-friendly service and timely case management, and improve reporting of outputs and completion measures. The Regulative Horizon enables an organization to not only optimize operations, systems, and workforce capabilities that help stabilize individuals, families, and communities in need, but also build a solid foundation for innovation and movement up the Human Services Value Curve.

ADVANCEMENT LEVERS:

- **GOVERNANCE & STRUCTURES:** At the Regulative Horizon, the governance of the human services organization is built around efficient service delivery to customers and compliance to a primary funding authority. Structures and systems are aligned to governance and are built on linear flow of resource inputs, service delivery, and output reporting.
- **INSIGHT & EVIDENCE:** The use of information and data at the Regulative Horizon focuses on retrospective tracking of resource inputs and service outputs at a mostly fiduciary level. Basic information technology systems should be in place to ensure compliance with policy, mitigate variance in program delivery, and perform analysis of best practice and output trends.
- **SERVICES & SOLUTIONS:** Design of solutions and services at the Regulative Horizon is based on ensuring timely, cost-effective, and error-free delivery and tracking of a program to a customer. Innovation is geared to improve current levels of performance, enhance basic customer experience, and increase functionality and reliability of programmatic systems and processes.
- **PEOPLE & CULTURE:** At the Regulative Horizon, people strive to be subject matter experts in the program and functional areas assigned to them, and performance is measured within one's span of control. A culture of optimization should be fostered, with people and teams looking to run operations cheaper, smarter, and faster.

While proficiency at this horizon is vital for performance and should be sustained, too much reliance on Regulative capabilities will limit an organization's ability to meet more complex customer needs and deliver better social value to communities and stakeholders. When making the first moves beyond a Regulative Business Model, one should look to the mission of the organization and the outcomes desired from programs. Then, take a portfolio view by scanning programs to assess where collaborative connections can be made.

Array (Breadth)
of Measures



REGULATIVE IMPACT

At the Regulative level, a human services system and its organizations can provide measures of the inputs and outputs (such as program investment, number of families receiving services, percentage of cases closed in a given time period, etc.) that describe and quantify the activity, efficiency, and basic trends of human services programs over time.

Looking forward, leaders can start to build a foundation for more impact by assessing the quality of existing program data and developing a plan to improve data usefulness and data governance in ways that enable better collaboration across organizations and improved outputs.



The Capacity for Outcomes – A Future Based on Health and Human Services Ecosystems

To realize better outcomes, it is imperative that health and human services harness new practice methods, new technologies, and new operating models that can increase organizational capacity.

Organizational capacity is driven by innovation in three primary ways: First, systems and organizations can become more efficient at delivering outcomes – i.e., they can innovate in order to produce outcomes with a level or reduced amount of resources. Second, systems and organizations can become more effective at attaining outcomes – i.e., they can innovate in order to measurably improve the quality of outcomes. Third, systems and organizations can develop entirely new capabilities – i.e., they can innovate in order to deliver previously unattainable outcomes.

What does this capacity imperative entail? Let's take a look backward at how most organizations and systems have managed capacity first, and then look forward to ecosystems.

Historically, most human services organizations have developed this capacity within “silos” – with resources, processes, and systems embedded within an operational unit charged with distributing and tracking inputs and outputs. This has served a good “regulative” purpose, as categorical management facilitated efficiency and accountability. Yet as society's challenges grow more complex, silo-based, single-service, and stand-alone organizational models lack the ability to significantly improve effectiveness and develop the new capabilities better outcomes require. As a result, their value proposition and legitimacy erode.

This phenomenon will only increase. As social, economic, and technological change affects society, it will upend the traditional business and operating models of many organizations, making it harder than ever to improve (or even just maintain) your organization's value proposition and the resulting legitimacy. Here's why. The legitimacy of an organization is dependent on the value it brings to customers, stakeholders, and society. That value is dependent on the outcomes the organization produces, and the outcomes in turn are dependent on the services and programs delivered. Walk it back even more and you'll see that the form of services and/or products delivered relies on the capacity (the governance, structures, systems, processes, and human capital mix that composes a business model) the organization harnesses. At the last step, you'll find that growth of capacity is then dependent on how human services are designed.

To meet the capacity and outcome demands of the future, value will increasingly be generated by health and human services ecosystems – a network of organizations, machines, and services that coproduce new solutions to solve the root causes of individual, family, and community health and human services challenges.

In this ecosystem-driven future, instead of silo-based organizations attempting to fix one particular program, a “hub organization,” or “platform organization,” will coordinate an array of organizations and services that holistically address an individual’s or family’s needs. This “wrap-around” service improves the ability to solve the complex interrelationships driven by social determinants of health and wellbeing. For example, an ecosystem that aligns housing, nutrition, mental health, and career planning services will improve the ability of a family to sustainably increase their health and overall social and economic mobility. Entirely new levels of outcomes can be realized.

Tactically, a hub or platform organization is a large service provider, such as a state or county-level agency, which coordinates an array of public, private, and social sector services. With a foundation based on social determinants of health, service providers bring unique capabilities, or “components,” that augment each other’s capabilities, and that are additive – meaning that the whole is more than the sum of the parts. An ecosystem can also be better than single-service organizations at innovation, as partners can co-create, experiment, and invest in more service-design innovations than a single organization generally can. Of course, organizations have always tried to collaborate and share ideas to do new things. But what’s new today is the power of digital business models – the technology, data and analytics, and artificial intelligence that not only blur organizational boundaries, but also enable entirely new forms of services and outcomes to emerge.

Emerging examples are illuminating the way forward. In Connecticut, health and human services leaders realized that 75 percent of children were developmentally behind by the time they entered Head Start. To change this trajectory, officials created an ecosystem that identifies infants at risk and designs interventions for the family with a goal of preventing adverse childhood events. The state of Ohio is leveraging an ecosystem of state, local, and community-based organizations and robust analytics to support episode-based payment models – an approach in which payment is based on performance in outcomes across multiple providers for a specific condition. And in Illinois, state leaders are launching an ecosystem to build Integrated Health Homes which will coordinate care across physical, behavioral, and social needs to improve outcomes for high-need Medicaid populations.

The examples in Connecticut, Ohio, and Illinois show the power and potential of ecosystems to create better health and human services outcomes. At a top level, all three ecosystems focus like a laser on a customer’s or population’s life challenges, the forms of outcomes needed, and what that means for a service mix. Yet if you peel back the layers, the examples also allude to the challenges of moving to a new business model. Whether you are launching, growing, or scaling an ecosystem, the new model runs counter to not only traditional ways we have allocated resources to silo-based domains, but also how we’ve historically built and led organizations with centralized command and control. As a result, leaders will have to navigate the design of new governance and structures, innovation in services and solutions, adoption of insights and evidence from data, and changes to the workforce and culture.

Policymakers and executives in health and human services will also need to leverage as much as possible from private sector “outcomes-focused” business models but realize that “impact” is measured very differently. In the market economy, broadly speaking, success for private sector ecosystems is dependent on growth of customers (building features that increase customer dependency on the ecosystem), services, and resulting throughput to revenue. In the political economy of public and social sector organizations, success will be measured in outcomes that move customers to sustainable self-sufficiency (building features and services that decrease customer dependency on the ecosystem), health, and well-being. So, while the underlying technological mechanisms (digital platforms, analytics, etc.) of ecosystems are quite the same, the end goal is substantially different.

To move forward, inspiration and resolve can be gained by projecting the desired future state. Health and human services ecosystems have the ability to improve equity in the social and economic mobility that helps individuals, families, and communities thrive – and that will help make a vibrant future for the world.



Collaborative Horizon:

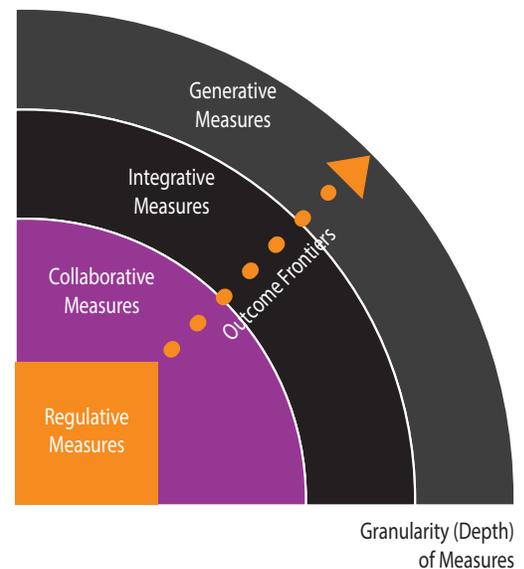
As a human services organization progresses to the Collaborative Horizon, policy and practice moves to a person-centric model and whole-family mindset and model, in which services are combined to improve the stability of an individual or family. From an outcome growth perspective, a Collaborative human services system recognizes that solving complex customer challenges often requires expanding beyond service and program “silos” and categorical management and coordinating with other operational units, departments, organizations, and sectors to align and co-deliver a mix of services. This level of coordination and collaboration creates a platform for two-generation family solutions, as well as enables capacity growth through improved information sharing and streamlining of common customer information and referral, intake, eligibility, case management, and supporting technologies and infrastructure. Furthermore, advancement in policy and practice can be gained by leveraging cross-organization data, insights, and evidence on service effectiveness and co-designing innovative future services and solutions. In sum, the Collaborative Horizon fosters the creativity and collaborative mindset that will be needed to effect system change over time and builds the capabilities and competencies necessary for a service-oriented system of care that can mature and scale for the future.



ADVANCEMENT LEVERS:

- GOVERNANCE & STRUCTURES:** At the Collaborative Horizon, formal mechanisms to increase cross-boundary decision-making take form. Structures include methods for blending and braiding of resources to facilitate cross-program service delivery and redesigning structures, systems, and processes to facilitate communication and interactions between organizations and services.
- INSIGHT & EVIDENCE:** Data and analytics at the Collaborative Horizon become descriptive and move from silo-based output reporting to the measurement of outcomes that describe results across programs. To build capacity, initiatives to establish cross-programmatic outcome goals and build a standardized set of measures to track progress move forward.
- SERVICES & SOLUTIONS:** Design of programs and services at the Collaborative Horizon focus on building a customer-centric model by shaping client-friendly solutions through adoption of systems, technologies, and case-management tools that enable better consumer navigation, communication, information sharing, and decision-making across programs and organizations.
- PEOPLE & CULTURE:** At the Collaborative Horizon, designing new approaches for capacity-oriented work and fostering a customer-centric ethos drives progress. Culturally, experimentation with new service models should be embraced, along with the relational and collaborative skills that make cross-organization innovation and co-creation a norm.

Array (Breadth)
of Measures



COLLABORATIVE IMPACT

At the Collaborative level, a human services system and its organizations can provide measures on short to mid-term program outputs and outcomes (such as a client achieving self-sufficiency as opposed to leaving a program as a result of non-compliance) by capturing, correlating, and communicating cross-program data on efficiency and effectiveness.

As leaders strive for more impact, deeper collaboration on cross-program measures can be leveraged to not only assess whether or not programs that work together improve outcomes relative to silo-based programs, but also improve data governance and program design.

Outcomes and Impact:

NEW CAPACITY POWERED BY ANALYTICS

As health and human services strive for more impact, the value of information will be key to building systems and ecosystems that can learn, innovate, and transform. “Not everything that can be counted counts, and not everything that counts can be counted,” noted Albert Einstein. Einstein’s quandary isn’t lost on modern leaders. In a world where there’s relentless pressure to measure results, leveraging information to understand how to improve performance and value will be a central capability of successful organizations.

Progress along the Human Services Value Curve relies on measuring the effect of services and solutions for individuals, families, communities and society. This value-chain of measurement can be defined as:

- Inputs: The resources, capital, and factors of production allocated to structures, systems, and processes that develop and deliver a program or service.
- Outputs: The service or program – such as housing assistance, supplemental nutrition assistance, health services, etc. – provided to an individual, family, or community.
- Outcomes: The result – such as a job found, housing secured, education achieved – of the program or service for an individual stakeholder, constituent or client.
- Impact: The public and social value that services and solutions deliver for communities and stakeholders over of time.

For leaders in health and human services, harnessing the power of analytics will mean changing how information is gathered, analyzed, integrated, and communicated. In the past, human services organizations have been held accountable primarily for measures such as the level of inputs that flow into the organization and the resulting outputs. While rigorous accountability will always be important, future-oriented human services organizations will also leverage analytics to robustly measure and learn to how design services and solutions to improve outcomes and impact.

Technically, analytics are enabled by the intersection of networks, inexpensive data storage and data analysis methods that allow better measurement across the entire value chain of inputs, outputs, outcomes, and impact. When these measures are put together, executives can assess the performance of a human services system from a wider perspective – across departments, agencies, systems, and ecosystems, as well as a deeper perspective – granularly within services and operating units.

Strategically, this comprehensive view enables an organization to continually learn what services and solutions are most effective and efficient in achieving improved outcomes. Further, this analysis can be used as a lever to flow what works backwards through the organization – evidence-based insights can show where refined practice models, improved systems and processes, and enhanced capabilities of people and teams can elevate outcomes and impact.

In the human services world, these new capabilities will enable executives and stakeholders to gain multiple views of results and value. These dimensions can be represented graphically as:

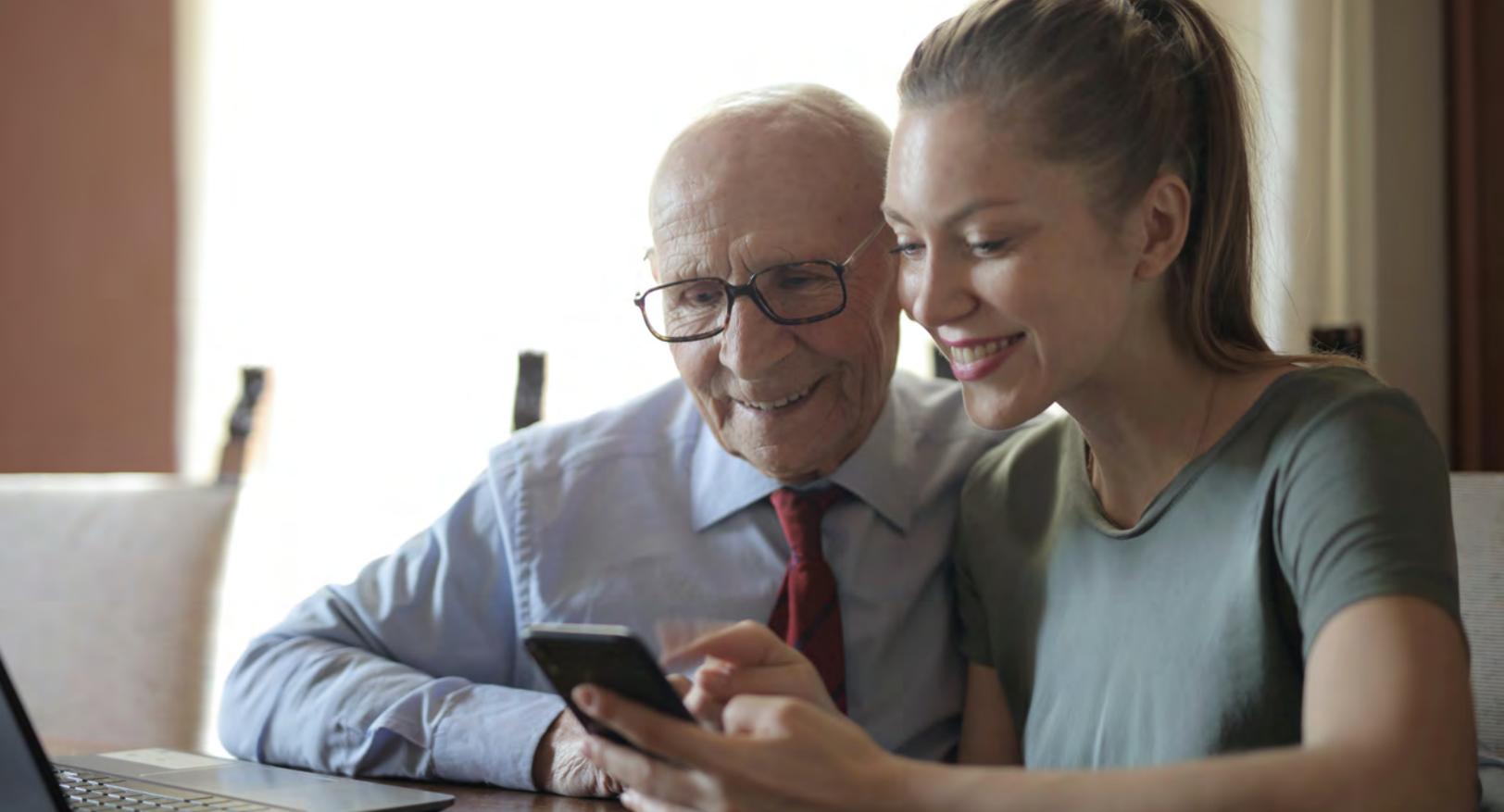
Dimensions of Outcome and Impact

Measures across organizational boundaries	<p>SYSTEM VIEW</p> <p>Measures that leverage trend and root cause analysis system-wide in order to forecast future performance and expected effects (such as families most likely to benefit from new forms of case management and services) of new interventions and program innovation.</p>	<p>IMPACT VIEW</p> <p>Measures of the human services system-wide generative effect that enable new valuation and solutions (such as performance-based contracting, pay-for-success options, etc.) and improved service design, (creating, starting and ending programs) development and delivery.</p>
	<p>ORGANIZATIONAL VIEW</p> <p>Measures of the inputs and outputs (such as program investment, number of families receiving services, percentage of cases closed in a given time period, etc.) that describe and quantify the activity and basic trends of a human services program or organization over time.</p>	<p>CLIENT VIEW</p> <p>Measures of how a human services program has achieved broader outcomes (such as a client achieving self-sufficiency as opposed to leaving a program as a result of non-compliance) for individuals and families by capturing, correlating and communicating deeper data and detail.</p>
Measures of single organization	Measures of internal inputs and outputs	Measures of client results and outcomes

And importantly, analytics can power how an ecosystem understands community-wide needs for services and solutions. Insight is based on analyzing ecosystem-wide data (sourced from organizations, services, sensors, and machines) and using artificial intelligence to become predictive and prescriptive. This capacity can be used to not only inform policymaking, but also to move “upstream” by learning how services and solutions can solve the root cause of health and human services challenges.

Potential can be seen in examples from the field. Washington State Department of Social and Health Services is using predictive modeling based on cross- enterprise data and statistical analysis to identify persons or families who have complex needs and are at risk for costly service utilization and problematic outcomes. Case teams synthesize information from more than 30 data sets, analyze resource spikes and trends and then use this analysis as part of a larger care management process. These new capabilities enable caseworkers to anticipate client issues and proactively improve or stabilize the client’s health, independence and safety while reducing their use of intensive crisis services. As another example, the Hillside Work-Scholarship Connection (HWSC) program, part of the Hillside Family of Agencies in Rochester, New York, is using data on client risk factors to predict the probability of high-school graduation. As patterns are found, the HWSC caseworkers can target the most effective interventions and tailor solutions to individual clients. This relentless use of analytics has led to dramatic results – 91 percent of HWSC kids are graduating on time compared to 50 percent for all district students, resulting in a predicted net return to the community of \$42 million.

What’s certain is that the power of analytics and evidence-based insights will bring a new era of capacity to the human services world. This newfound capacity will play a critical role in seeding breakthrough innovations. In particular, health and human services leaders can identify new opportunities to improve the client experience, reduce costs, enable population health management, enhance care, and increase equity in outcomes.



Integrative Horizon:

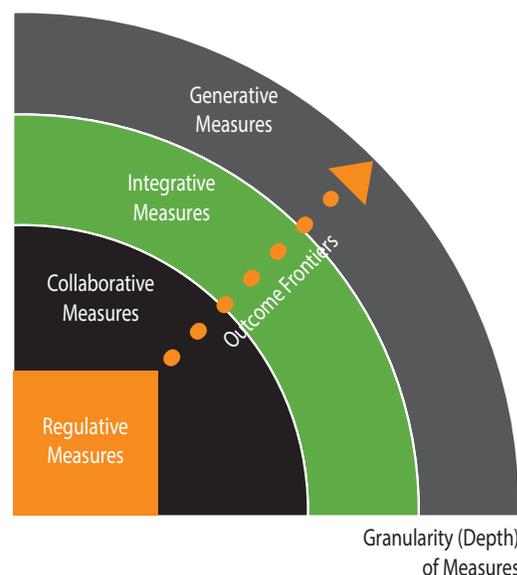
As a human services system moves to the Integrative Horizon, advancement is based on achieving sustainable social and economic mobility for individuals and families by helping them solve and overcome the root causes of challenges. To achieve these new levels of outcomes, the mission and operating model of the human services system is rigorously leveraging whole-person and family-centric service design, and underpinning this strategy is an intentional focus on applying social determinants of health to harmonize and customize services for customers. Social and economic value at the Integrative Horizon is accelerated by digital platforms and information technologies that enable the seamless integration of multiple programs and services across organizational and sectoral boundaries, and the resulting amplification of efficiency and effectiveness in outcomes. In practice, this integration not only helps improve customer co-creation and sustainable engagement, but also reorients activity to individualized client services focused on self-sufficiency, improved health and safety outcomes, and social inclusion. Importantly, the Integrative Horizon brings the ability to harness analytics across services to become predictive about customer needs and service transformation and design the evidence-led platform for achieving more impactful outcomes and value.



ADVANCEMENT LEVELS:

- GOVERNANCE & STRUCTURES:** At the Integrative Horizon, the governance and enabling structures are designed from a whole-person lens with formalized integration across departmental, organizational, and sectoral boundaries and enacted agreements on policy, investment, infrastructure, service delivery, information sharing, and outcomes valuation.
- INSIGHT & EVIDENCE:** The lifeblood of the Integrative Horizon is the evidence-based decision-making that is captured and analyzed across an integrated, single-view system for case management and outcome tracking. The ability to run consumer and community level rapid-cycle assessment and analytics to inform policy, practice, and system design is a benchmark.
- SERVICES & SOLUTIONS:** Co-creation of services and solutions with stakeholders and customers is an essential strategy at the Integrative Horizon. Transformational initiatives are driven by policy change and service innovation that improves the capacity and agility to respond to changing customer and community needs with new forms of services and outcomes.
- PEOPLE & CULTURE:** At the Integrative Horizon, people are fully oriented to working in cross-boundary planning and implementation teams and have deep skillsets in co-innovation and partnerships. Cultural attributes include active problem-solving, shared critical thinking approaches, and an ethos of customer-centered empowerment.

Array (Breadth)
of Measures



INTEGRATIVE IMPACT

At the Integrative level, a human services system is capable of assessing and communicating a range of system-wide performance indicators on program effectiveness, efficiency, outcomes, and impact, and leveraging these insights to not only optimize current performance, but also build basic predictive modeling into case and program management.

Moving forward, leaders can improve capacity by leveraging trend and root cause analysis in order to forecast future performance and expected effects (such as families most likely to benefit from new forms of case management and services) of system innovation.

Human Services Transformation:

THE ADAPTIVE CHALLENGE

If changing the business and practice model of human services enterprises is so vital to meeting current and future demands, why do so many transformation initiatives fail?

Ron Heifetz, the King Hussein bin Talal Professor in Public Leadership and Founder of the Center for Public Leadership at Harvard Kennedy School, helps leaders understand how to move human services organizations through the challenges of adapting to a new business model, capabilities and culture.

To start, leaders must recognize moving up the Human Services Value Curve for what it is – a long-term transformation. When a human services system and its workers are grappling with adopting a new business model, new technologies and new processes, two forms of innovation happen simultaneously – technical innovation and organizational innovation:

- **TECHNICAL INNOVATION:** This form of change is what we're most used to. Organizations and people experience this when implementing incremental change (such as updating a process, technology or management method) within their current organizational structure, authority lines and knowledge set.
- **ORGANIZATIONAL INNOVATION:** This form of change is where most people and institutions get uncomfortable, as it requires the development and adoption of new competencies and capabilities – often within a new environment, governance structure and organizational design.



“In nature you have these three basic tasks – determining what to conserve, what to discard and what innovations and new ‘DNA’ will enable new capacity. This is important as a leadership metaphor because really significant change is highly conservative – small changes in DNA can result in major leaps. This is counterintuitive because many of us talk with enthusiasm about innovations and change without anchoring it in all that’s not going to change. And then we frighten people and they respond to the sense of loss rather than all that’s going to be preserved.”

Ronald Heifetz,
Harvard Kennedy School

Combine these two dimensions and you have an “adaptive challenge” on your hands. Heifetz explains: “An adaptive challenge requires experiments, new discoveries, and adjustments from numerous places in the organization. Without learning new ways – changing attitudes, values and behaviors – people cannot make the adaptive leap necessary to thrive in the new environment. The sustainability of change depends on having the people with the problem internalize the change itself.”

Heifetz suggests transformational change cannot be effected completely through authority or (change) management. Rather, it takes a person (or set of complimentary-acting people) to actively mobilize stakeholders to address real and perceived loss of important ideals, values and competencies that have been in place for years while also actively learning new competencies, capabilities and culture. This form of “exercising leadership” is needed to move people through the adaptive challenge.

When a person or group isn’t mobilized to work through their adaptive challenge, the resulting fear of loss and disturbance can spur people to work against the new vision and derail a human services initiative. Common examples of maladaptive behavior include:

- **AVOIDANCE:** People disengage from the initiative – consciously or unconsciously – as they avoid the pain, anxiety or conflict that comes with actively working through the gains and losses.
- **DIRECT PUSH-BACK:** People will actively fight the changes taking place and advocate for previous practice models and methods of work.
- **CIRCUMVENTION:** People will work around leadership and lobby agency heads, legislators or whoever will lend a sympathetic ear in order to delay, distract or derail the initiative.
- **SHADOW PROCESSES:** People will secretly keep past processes and operating models (undermining efficiencies that come from new models) in order to retain a sense of control.

Clearly the importance of exercising leadership through the human services adaptation is critical to success. During the Summit session, Heifetz offered recommendations for mobilizing individuals, organizations and yourself:

- **IDENTIFY THE ADAPTIVE CHALLENGES:** Be in a position where you know what will happen next. If you assess and forecast where the adaptive challenges will arise you can start working with the people and units affected – moving problems to the surface and resolving the difficult tensions and trade-offs related to their changing roles, capabilities, loyalties and identity.
- **START WITH MICRO-ADAPTATIONS:** Realize that people need time to work through adaptive challenges – and get to know their limits. As the saying goes; “Keep it hot enough but don’t let it boil over.” One way you can achieve this is by creating micro-adaptations – small-scale innovations that set a sustainable pace

for subsequent adaptations. While doing this, create a “holding environment” (the term originated in psychoanalysis to describe the relationship between the therapist and the patient) for groups to discuss all of the issues related to the change in a non-judgmental atmosphere.

- **UNDERSTAND AND ASSESS THE PSYCHOLOGY OF “GAINS AND LOSSES”:** A primary first step is to understand the perceived and real value gains and value losses to each category of stakeholder, i.e., data center managers will perceive the value vastly different than an authorizing body or a senior executive in the initiative. It is important to discover both sides of the gain/loss equation as perceived losses affect adoption as much as perceived gains.
- **PROTECT VOICES OF LEADERSHIP:** It’s critical to find and protect the people who exercise leadership but who don’t have the cover of formal authority. These people are the “change-makers” within an organization and usually have a high capacity for mobilizing themselves and their peers. Make sure you funnel them timely information, engage them in helping to voice the necessity of change, and protect them during the process.
- **HOLD STEADY:** Last – and most important – protect yourself. Realize that you are affected by the change and adaptation as much as others. Make sure you work through your personal adaptation – and even better if you can do some of it with others. A key element is clearly separating yourself from your role and understanding that maladaptive people will attack your role and your authority – don’t take it personally.

To learn more about adaptive leadership, please review Ron Heifetz’s groundbreaking books including: *“Leadership Without Easy Answers,” “Leadership on the Line: Staying Alive through the Dangers of Leading,”* and *“The Practice of Adaptive Leadership: Tools and Tactics for Changing Your Organization and the World.”*



Generative Horizon:

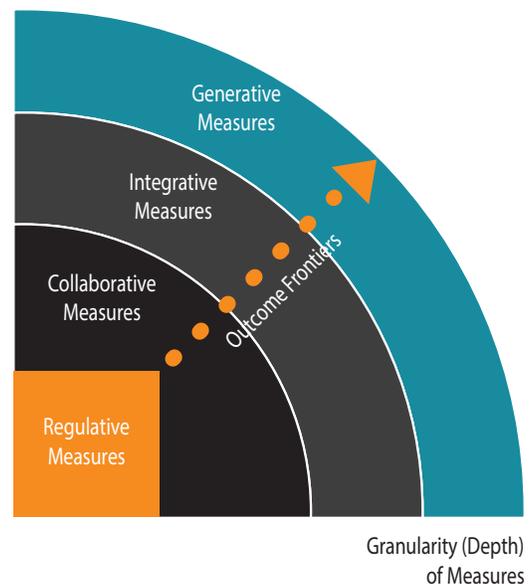
Thriving communities are the aim of the Generative Horizon. To realize this goal, health and human services expand to address multi-dimensional community-wide challenges and opportunities. At this horizon, social value is maximized by intentionally building equity for all people into the attributes of wellbeing, such as health, social capital and resilience, safety, dignity, and economic security and mobility. Importantly, the deep integration of services accomplished in previous horizons enables the formation of an ecosystem for outcomes – a network of organizations, machines, and services that co-design and seamlessly deliver solutions to address and solve the root causes of individual, family, and community health and human services challenges. This ecosystem-driven strategy in turn aligns policy and practice that affect advancement and discovery of novel solutions based on social determinants of health by activating collaboration and integration with domains such as public safety, housing, education, and workforce development. A vital capability of a Generative ecosystem and its broad outcomes orientation is the use of population data and insights to not only work upstream – by addressing key drivers of community wellness, but also become predictive and prescriptive – by synthesizing trends and co-designing policy, value-based practice models, and real-time innovation in response to community conditions.



ADVANCEMENT LEVERS:

- GOVERNANCE & STRUCTURES:** At the Generative Horizon, the aim of equitably flourishing communities formulates the linking of policy and investment that enable ecosystem-based solutions. Governance is intentionally adaptive and able to dynamically meet changing community health and human services outcome needs.
- INSIGHT & EVIDENCE:** Population-level analytics along with ecosystem-wide outcome measures at the Generative Horizon bring the prescriptive capacity necessary to address structural inequities and upstream factors, as well as design downstream services that create community outcomes. Impact measures are transparently communicated and enable community-wide engagement.
- SERVICES & SOLUTIONS:** At the Generative Horizon, population-wide prevention and capacity-building strategies inform the design and innovation of solutions. Importantly, the ecosystem is adaptive and modular, allowing an array of service providers to build, share, and deploy information and services on a real-time basis.
- PEOPLE & CULTURE:** A culture of wellness infuses all actions and decisions at the Generative Horizon. People and teams have an adaptive leadership mindset, are adept at working in high-performance cross-boundary formations and strive to create solutions for broader community and environmental challenges.

Array (Breadth)
of Measures



GENERATIVE IMPACT

At the Generative level, a human services system and its organizations can provide seamless and robust measures of long-term community-wide outcomes and impact (the cumulative effect of programs and services) and can harness this capacity to conduct rapid-cycle evaluation of program innovations as well as inform policy-making and overall system transformation.

As leaders look to the future, they can use Generative insight to create entirely new methods and measures of system valuation, and enable solutions such as performance-based contracting, social impact bonds, and pay-for-success options that can magnify overall community capacity.



Summary

The Human Services Value Curve is a theory of change and leadership framework to help you envision and design the organizational and systemic capacity to deliver transformational solutions for individuals, families, and communities.

Your adoption of the Human Services Value Curve is more important than ever as advancing equity in health and social and economic mobility is the most pressing challenge of our time. Equity in the hope and realization of building a better life helps hold the social fabric of communities together.

In traversing the Curve, your charge is to progressively improve the capacity of an organization to deliver broader and more valued outcomes and impact. Progress will require driving innovation in services, forging collaborations and ecosystems, guiding the adoption of advanced technologies and analytics, measuring outcomes and impact across services, and exercising adaptive leadership.

The mindset required to lead will be one of growth and transformation – you will be creating new ways of working and generating value. At another pivotal time in history President Abraham Lincoln framed the challenge:

“The dogmas of the quiet past are inadequate to the stormy present. The occasion is piled high with difficulty, and we must rise to the occasion. As our case is new, so we must think anew and act anew.”

Successfully thinking and acting anew in health and human services will lead to creating measurable impact, building public value and trust, and gaining the legitimacy that society requires. And most importantly, achieving transformation is vitally important to creating a secure and thriving future for people around the world.



LEADERSHIP FOR A NETWORKED WORLD

Leadership for a Networked World (LNW) creates transformational thought leadership and learning experiences for executives building the future. Founded in 1987 at Harvard Kennedy School, LNW is now an applied research initiative of Dr. Antonio M. Oftelie at the Technology and Entrepreneurship Center at Harvard, part of the Harvard John A. Paulson School of Engineering and Applied Sciences. Since 1987, LNW has delivered more than 200 learning events and gathered more than 12,000 alumni globally. To learn more about LNW please visit www.lnwprogram.org.

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