

## Only connect: commissioning from an asset-based perspective

The following post explores the challenges that Commissioners and folk who Procure goods and services for various Public Sector organisations are likely to encounter when commissioning and procuring in an asset-based way, and/or when they try to commission asset-based initiatives more specifically.

The questions that I'm kicking around here are not mine, since I'm not a commissioner nor do I engage in procurement, neither are areas of competency for me. Rather these are the questions, of late, I have been hearing disruptive innovators in the commissioning and procurement world, increasingly grapple with.



Asset-Based Community Development (ABCD) challenges the traditional approach to solving urban and rural development problems, which have tended unhelpfully to focus commissioners on the needs and deficiencies of individuals, neighbourhoods, towns, villages, schools etc.

In direct challenge to that deficit based perspective, asset-based approaches demonstrate that community assets and individual strengths are key building blocks in ensuring people have a life of their own choosing.

Inherent within the asset-based challenge to current commission trends is a critique of the unintended consequences of the recent shift from an 'outputs' to an 'outcomes' focus, especially in the UK. In marked contrast to the prevailing views I encountered as recently as two years ago, these days most commissioners and procurement officers I meet are receptive to that challenge. In fact, increasingly I find such professionals mostly nodding their heads in agreement with the 'why' of the argument, but scratching their heads when it comes to 'how'.

A recurring question is:

*'How can commissioners (individually and collectively) ensure that these assets are identified, understood, connected and mobilised in a community driven way, so that as many opportunities as possible can be unlocked?'*

Beginning to find an answer to the ‘how’ question, requires that we understand ‘what’ we are trying to invest in, in the first place. In simple terms Asset-Based Community Development is calling on us, commissioners included to pay careful attention to the building blocks of community, working to the premise that whatever you are trying to enable, whether its better health, inclusion, social care, or community safety, will require a strong community as a foundation stone. The paradox here of course is that strong community cannot be commissioned, nor ‘project managed’, it is an inside out affair and done only and solely when people want to.

Notwithstanding, when people behave effectively as citizens in a community of place here are the building blocks they use to build a strong community:

1. The skills of local residents
2. The power of local associations
3. The resources of public, private and non-profit institutions
4. The physical and Economic resources of local places.
5. The shared stories, culture and heritage of communities



The second area ABCD is calling on us all inclusive of commissioners to pay close attention to is the values and principles that underlie any attempt at helping people have lives of their own choosing. This should have a particularly strong resonance with commissioners within both health and social care as they work to implement over arching ambitions, such as those enshrined in the NHS, or locally through Health and Well-being Boards. It is most relevant to local policy and strategic objectives.

## The Core Principles of Asset-Based Community Development

Some of the core principles of ABCD are encapsulated in the following statements

1. We cannot know what a community needs until they first know what they have.
2. Every community has more gifts, skills, talents and resources than any one person or organisation can know, and these are easily disabled by professional intervention.
3. These gifts, skills, talents and resources need to be identified, brought together and converted into innovative citizen led action to improve people's lives and economic opportunities in a community driven way.
4. Commissioners need to organise their structures in a way that does no harm to the first three principles, and ideally conforms to them.
5. Taken in the round, ABCD calls for a shift towards a capacity oriented approach to commissioning where people are not viewed as passive recipients of services, but as producers of their own and their communities well-being.

Making this shift, calls on commissioners to stop doing certain things, as much if not more than starting some new endeavours, these are outlined in table 1.

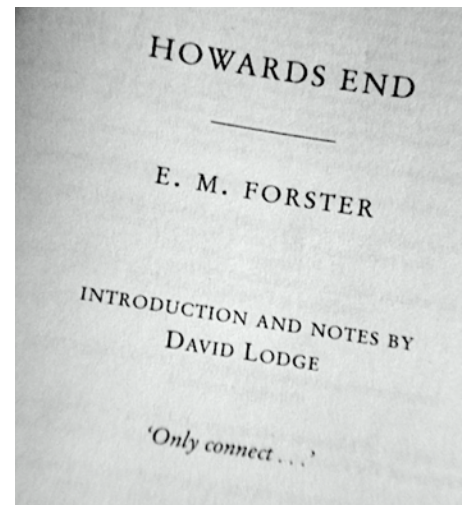
A SHIFT IN COMMISSIONING	
DEFICIT COMMISSIONING	STRENGTH BASED COMMISSIONING
Focus on deficiencies	Focus on assets
Problem response	Opportunity identification
Charity orientation	Investment orientation
Grants to agencies	Grants, loans, investments, leverage
More services	Fewer services
High emphasis on agencies	Emphasis on associations
Focus on individuals	Focus on communities/neighbourhoods
Maintenance	Development
See people as clients	See people as citizens and co-producers
Fix people'	Develop potential
Programmes are the answer	People are the answer

Table 1.

## Musings

At the end of *Howard's Way*, E.M Forester offers us the now much quoted epitaph: "Only connect". It can be read both as a prescription for disconnection and as statement of exasperation at how challenging it is to connect in certain contexts and at certain times. The novel is set in a Victorian liberal-humanist period just before the First World War, but the themes are as relevant if not more so to current times.

The most essential tenet of commissioning might be then: do no harm to actual and potential local connections. Currently there are four interrelated ways in which commissioning can do harm:



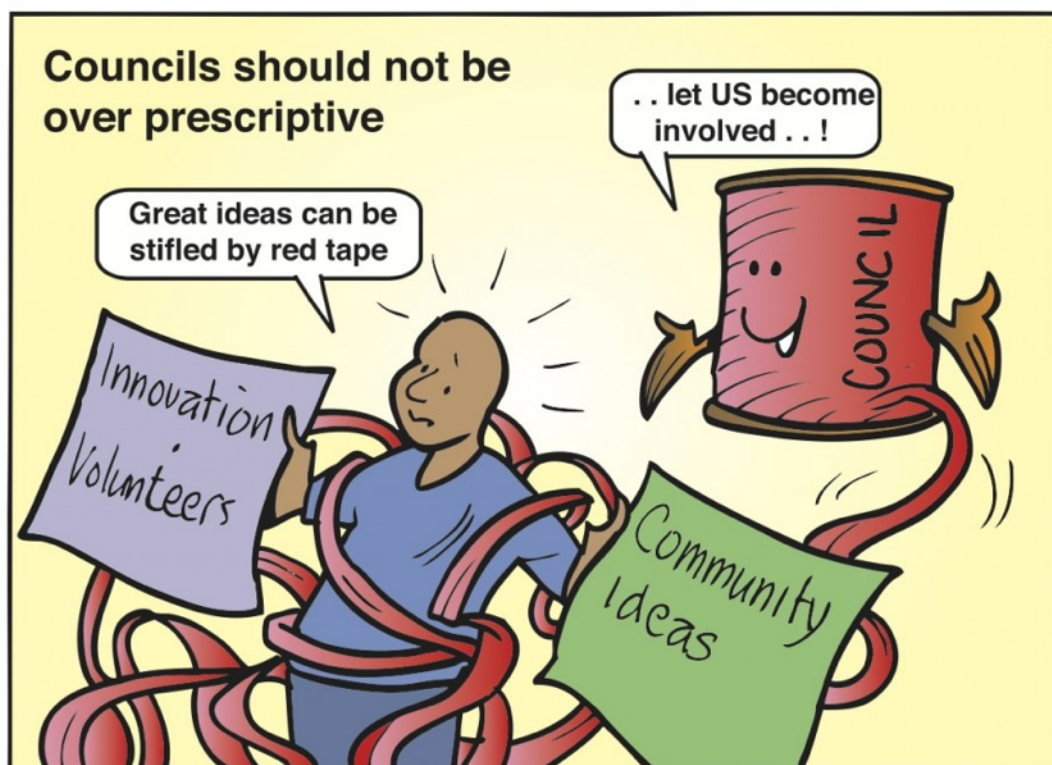
1. Commission services to address needs that inadvertently decommission personal, family and community assets necessary to ensuring 'service recipients' have lives of their own choosing.
2. Commission organisations so intent on building up and sustaining their own 'client base' in an effort to secure the 'commission' and sustain their economic survival that they inadvertently encourage dependency on programmatic and service based interventions, and diminish community capacity.
3. Assume that community alternatives are inferior to institutional and programmatic interventions.
4. Commission in a way that makes the individual solely responsible for solutions or takes even that power away and places it within institutions that the individual has little control over.



Many commissions fall short of creating the conditions within which people, families and communities can more easily become the primary investors in their own and each others current and future wellbeing. In large part because one simply can't commission a life, or friends, or mutual support, or indeed a cure for loneliness, but also because of institutional arrogance.

The challenge as I hear many Commissioners -who want to work through an asset-based perspective-framing it, is to find a way that enables communities penetrate through closed circles of support where professional services/institutional interventions dominate; and to animate associational activity, friendship, family and personal capacities in the process of co-creating a good life. While still ensuring that person centred services and supports continue to be provided when needed.

Of course shifting towards a more asset-based approach is not achievable where commissioners work exclusively in their respective silos, across Health, Social Care and Community Housing, since an asset-based approach is fundamentally place based and therefore requires agencies to work beyond their administrative boundaries to be effective. Nor is it possible if commissioners are solely engaging with communities through organisations who are not interested in building neighbourhood capacity.





Achieving this level of penetration requires a careful balance between community building and person centred services that support the bridge building between people and their community's, but also actively works towards keeping people out of services for as long as possible, not to save the system money, but to save people from the system, crucially not just working with communities to 'identify the problem' or even to identify solutions – but to be the solution itself.

Achieving this means that commissioners must start by assuming the strengths, assets and capacities are already present albeit not always apparent within and immediately around the people they are trying to help, if they are to ensure that the individuals they hope to help can become genuine producers of the outcomes that most matter to them. The basis for doing this is not found in evidence but in right mindedness and ethos. We do need a stronger evidence base, we need a stronger values base. That said the evidence is pretty compelling too.

For an example of how an organisation has commissioned Asset-Based Community driven Development see [Croydon NHS and Croydon Council commissions ABCD](#).

### Practical Example: Living well at home with Dementia

To ground the discussion a little let me use an example. Across the UK, indeed in many parts of Europe many helping institutions are endeavouring to promote the '[Dementia Friendly Communities](#)', agenda. The Prime Minister of Great Britain, David Cameron elevated this agenda by making it a 'Prime Ministers Challenge'.

Accordingly some creative commissioning is springing up and I am beginning to see some savvy commissioners adopting an ABCD perspective in their work, and consequently beginning to shine a torch on seven key levers for living well with Dementia:

1. The unique competencies of people with dementia to live well with Dementia;
2. The unique competencies of families (including extended members) of people with dementia to live well themselves and to support family members with dementia to live well;
3. The unique competencies of communities (neighbours at street-level and very local shops and services) to co-create the conditions with people with dementia and their families to live well;
4. The unique competencies of the Third sector to provide capacity building, community development and advocacy support to individuals, families and communities to live well with dementia;
5. The unique competencies of the Public sector to provide and or commission person centred services; community building infrastructure; and relevant supports that enable autonomy and participation;

6. The unique competencies of the Private sector to provide ethical services/products, economic growth and jobs that add value to the strengths of individuals, families and communities in living well with dementia;
7. The unique competencies of intentional cooperative partnerships across the other six levers (above) to combine strengths to co-produce dementia friendly communities.

All of these are levers for change, which few would argue are anything but essential, yet we need to value these levers if they are to mobilise, and before that we actually need to start acknowledging they exist. One of the ways we blind ourselves to these levers is by starting with a needs analysis, instead of an asset inventory.

Starting with an asset inventory requires investment not in dementia, or any other specific area of concern, but in community building, which is to say making the assets that are invisible, visible and productive. The other critical things to pay heed to here is these are not 'our levers', to push or stimulate, or nudge or oil. The best we as outsiders, eager to help, can do is to help create the conditions for these levers to be moved by citizens. In that regard sometimes the best thing an outside agency can do is get out of the way. This brings the value of decommissioning to the fore.

**Increasingly I see programmes being commissioned where community alternatives were actual what was needed.**

Put more simply in relation to our practical example a friendly community is the basis for living well with dementia and many other conditions besides, so a Dementia friendly community motif may not be the best place to start. If what you're actual after is total place connection, then 'Only Connect', Right? Well it's not that simple, it seems.

Commissioners for the most part commission services, albeit in a strategic way, but then procurement are obliged to purchase those services/programmes in as legally compliant and cost effective a way as possible. These are tricky waters to navigate when it comes to working in an asset-based way, which advocates on the main an agenda-less approach: encouraging people to identify what they care about enough to act on and then to act with others using the assets close at hand as their starting point, not following the cue of an external agency.

Whilst elements of the Social Value Act will help in this regard, it is being consistently challenged by stricter definitions of procurement law. The smart commissioner knows how best these laws can be used, and crucially which don't apply, more importantly they know how to commission without procurement.

That said this remains a real challenge for commissioners, who like to commission based on evidence that specific needs will be addressed, and accordingly desired outcomes will be reached. Here's the rub, community building doesn't work very well when you predefine the outcome, and consequently the target of a Dementia Friendly Community for instance, slips yet further away. All that said, starting to pay attention to the seven levers I described above is a powerful act of transformation.

### Relax, nothing is under your control

The 'known unknown' in identifying, connecting and mobilising these levers is 'asset-based community building', this is the Philosopher's stone, but as such is poorly understood, not just by commissioners, but by most people including some with traditional community development backgrounds. This is true largely because we have not tended to practice, commission or think in an asset-based way in relation to the first three levers (self, family, community) in the UK and Europe generally over the last twenty years, therefore very few saw the need to invest in asset-based community building at neighbourhood level. As with everything there were exceptions to this rule, but few would argue that neighbourhood community building has been viewed as central or strategic over the last twenty-years, at best it has been interesting, but has remained peripheral.

Consequently, until quite recently most helping institutions viewed the first three levers as the 'locus of need' and the remaining four as the 'source of the solution' (not-for profit; private; public; and partnership across these four levers) accordingly we have simply analysed needs in those domains in accordance with our service classifications.





By recognising that people, their families and communities, have unique competencies that cannot be replaced by professional intervention, or service based responses (regardless of how well funded or competent their staff are), nor should they be, we are essentially challenging ourselves not alone to commission in a new way, but also to stop certain traditional (and current) forms of commissioning, e.g. unilateral needs analysis; evidence/monitoring frameworks that only count clients.

All that said there are probably six things that commissioners could usefully consider doing in this sphere and some disruptive innovators already are:

1. Commission action research into the strengths of the first three levers in recognition that currently there is a paucity of information around individual, family and community competencies (in fact the prevailing view obscures such strengths) Appreciative Inquiry, Positive Deviance, Asset-Based Community Development that enables relationship building not data gathering should be integral to the research methodology.

The intent of such research should be to actively identify, connect and mobilise such assets for living well, and then to understand the impact that has on how well people with Dementia fair out. This would turn our current approach on it's head. Gathering such evidence will allow commissioners to discern alternatives to needs analysis and deficit based commissioning, and clear the way for the answer to the question: what would effective community building look like? And, in turn, make it a whole lot easier to invest in it in a way that does not harm.

2. Pay more attention to enabling practice, than changing policy, good policy is informed by good practice, not the other way around, so invest in practice development and learning. Take some risk, allow people to search and make mistakes. If people are going to change their practice, they have to be allowed some space to practice the change.
3. Commission community building processes at the front end of the care offer, with person centred services as back up.
4. Using digital platforms as a metaphor: Commission 'operating frameworks' not 'apps' that bolt on to existing deficit based approaches.

Commissioning ABCD in one part of the Borough or County and Local Area Coordination (LAC) in another, with Time-banking in yet another, fails to recognise that the potency of all of these approaches is that when they work well their operating framework is Asset-Based Community Development. This is further compounded when deficit based approaches are also thrown into the mix.

5. Commission outside of silos: anything that strengthens community cohesion will further the objectives of dementia friendly communities, safety, health and wellbeing, reducing loneliness etc, but only if commissioners across any given borough and county work beyond administrative boundaries. This means actively and strategically moving towards more place based approaches, since the neighbourhood is the context within which everything comes together, if we enable it.
6. Use the knowledge available to, and the strategic role of, commissioners to influence others to bring about change.

Commissioning in this way may feel like investing without an end in sight, but in truth, most of the so-called 'ends' or outcomes that are cited as achievable are predictably unpredictable.

I suspect, in reality, investing in social change is like driving through a thick fog where you can only see fifty yards ahead, and where your wisest move is, to quote my good friend and associate Tom Dewar, to recognise there is no map, only a compass. Accepting that social change is not simple, or complicated, but complex will enable commissioners to invest in emergent possibilities and disruptive innovation, remembering these wise words as they go:

**"All that is gold does not glitter,  
Not all those who wander are lost;  
The old that is strong does not wither,  
Deep roots are not reached by the frost."**  
J.R.R. Tolkien, *The Fellowship of the Ring*.

It's a funny quirk of where we've ended up in organising our helping systems that's it's taken me six pages to say what can be said in two words: "Only Connect".

Cormac Russell.