



Digging to the Real Root Cause



I'm a sucker for all of the medical dramas on television. If it takes place in a hospital, chances are my wife and I will give it at least a couple of seasons. And from "ER" to "Gray's Anatomy" to "Scrubs," there is one plot line that always sucks me in: we have been treating the symptoms so aggressively, we missed the real illness. It is the show that usually starts out with a younger patient making their tenth trip in for help from a young doctor so busy with every patient that they rush to treatment options and then they are off and running ... until after the commercial break, when the patient, despite the best efforts, is not getting better, but is getting worse. It is not until the last five minutes when a hero finally emerges and points out what seems so

obvious: we need to look past the fever, past the cough, and past the pain, and start attacking the real culprit. Only then is the patient saved and we can all rest easy until the next episode.

Now I am not a doctor, and I do not even play one on TV, but I have seen this story play out in human services again and again. Unfortunately, we are still waiting for our happy ending. If we had our own show, it would probably look like this ...

Opening Scene: The lobby of a benefits office

A social worker is unlocking the door and there is already a line out front. A young mom enters in with her two children, a backpack full of toys, and a Scooby Doo lunch box; they plan on

being here through lunch. An old man shuffles to the window with an old folder, eyes darting behind the counter trying to find someone to help him. The line of people continues to stream in, one after the other until the lobby is full. We hear numbers being called, the clicking of keyboards, and a frustrated supervisor warn, "OK folks, it's already going to be one of those days." Roll opening credits.

Act 1: Meet Joan

She is a seasoned case manager who is desperately trying to meet with as many people as she can this morning. She knows her stuff, is able to direct clients to a variety of services, and

See Root Cause on page 31

works hard to understand each individual's needs well beyond the duties described in her job description. Still, she feels unfulfilled. This is not why she went into social work: to move people through the line as quickly as possible. She remembers when her family came to America with little more than the hope of a better life. It was the caseworker who helped her get into school, helped her father find work, and helped her deaf sister find a therapist. She wanted to be the hero for some little girl out there, not just a faceless cog in the machinery to get access to food and housing. With each passing hour, despite her being one of the most outstanding workers in the office, a little more of her motivation dies.

Act 2: Meet Tom

Tom works in the state capitol, but is out of his office today at a conference halfway across the country, hearing speaker after speaker discuss the very real needs for addressing the poverty cycle, the education gap between the middle class and the poor, and the social ills that tend to be generational. After one particular session he finds a seat at the hotel café and begins to scribble frantically on a legal pad. Page after page fills with ideas for a new child welfare program in his department. He is inspired, and the possibilities seem endless ... but then his phone rings, and his face turns from excitement to concern. He turns the page in his legal pad and starts a fresh page with the word, "fatality." He scribbles some names and numbers, and we hear him tell the person on the other line, "I'm headed to my room now, I'll call from there."

As he gets up, he leaves his notes on the table. There will be no time for new ideas today.

Act 3: Meet the real root causes

Both Joan and Tom want to do the right thing. Joan wants to help people be self sustainable. Tom wants to break

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the cycles of abuse with programs that can help before the abuse occurs. But neither will be able to go home tonight feeling like they made a real difference, because they both have a root problem that robs them of their passion—there is so much work to be done just dealing with the demands of the now, they have no time for prevention, intervention, and other proactive measures that address the root causes of their clients. They have more work than time.

There is no shortage of heart and passion. Every social worker was called into this career because they want to help. It is some of the most noble work on the planet, and the people doing the work day in and day out are amazing. We also have no shortage of ideas on how we can help. We have filled books, classrooms, and conferences with innovative ideas to help our clients. I would argue we know as much about what we would like to be able to do as we know about the programs we currently have. Our shortage is in time


and resources. How can we do all the things we want in the future, when we have issues just trying to do all the things we need to do today?

Capacity is the root cause of what ails us. Until we address capacity, we can never address the root causes that plague our clients. Just like the doctor who quickly diagnosed symptoms so they could get to the next patient, and missed the chance to cure the child in front of them, Joan and Tom are so busy with the work of the day that they will likely never get to help in the very real and meaningful way they want to.

The Ironic Twist: If We Had the Capacity to do More Good, We Would Have Even More Capacity

You see, the only way to really impact the number of clients in our benefit offices is to address the underlying root causes of poverty. The only way to break the cycle of abuse is to help the child before they become the parent. It's a classic case of the chicken or the egg. If we could help their root causes, we would eventually cure ours, but we do not have the time ... yet.

The Happy Ending: With Either the Chicken or the Egg, You Cannot Lose

Whether you address the root causes of our clients now and trust the capacity will come, or work on the efficiencies in your own area, and build the capacity needed to begin new programs, you cannot lose. As long as you start. As long as you find ways to unleash the amazing hearts of your workers, and reconnect your "Joans" with the reason they became caseworkers, and plan for a foreseeable future that encourages your "Toms" to follow through with their visions. We can make a difference, if we only stay focused on the root of the problems. 

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