Key Understandings that are Part of the O-AIM Application

1. **Development unfolds hierarchically; all things are nested** (Wilber, 1995). This is the notion that things are whole in one context and simultaneously a part in another context. For a desired change to occur, the effort may need to be focused first on the larger (or the more intimate) context in order to accomplish the desired end.

   *A young person is whole as herself, and is also part of a family, a class, or member of a gang. A family is whole unto itself and simultaneously a part of a neighborhood, which is whole unto itself and simultaneously a part of a community.*

2. **Development occurs across a multidimensional context** (Wilber, 1995). Any strategy for positive change must intentionally effect change in four interconnected aspects of development, which encompass the interior (subjective) and exterior (objective) space of both the individual and the collective. These are:

   - **Individual Intention**: thoughts, beliefs, understandings, and values
   - **Individual Behavior**: learned behaviors and skills
   - **Culture**: commonly held social understandings, agreements, norms, values, and worldviews
   - **Social System**: written records, buildings, transportation systems, laws, economic systems, etc.

   *The beliefs that one possesses are influenced largely by the culture in which one is raised. These beliefs, in turn, impact one's actions, which are also mandated by societal rules and laws.*

3. **Stages of development occur not just across, but also simultaneously within, each of these four aspects of development** (Wilber, 1995). Moving with intention to effect positive change entails conscious nurturing of opportunities for growth (development) in each aspect. At best, neglecting one aspect limits success, and may, in the worst circumstances, aggravate the problems.

   *One person can promote children's asset development by volunteering to tutor students at the local elementary school. One by one that volunteer helps children improve academically. When that volunteer recruits their service club to volunteer, many people become involved and a program is officially created. Then, when teachers begin to routinely refer students to this program the result is a structure supporting opportunities for every child who wants assistance to receive it.*

4. **The four aspects of development operate across and influence five levels: 1) individual, 2) family or group, 3) block, organization, or agency, 4) neighborhood or service delivery system, and 5) community** (Taylor & associates 1998; Young & associates, 1994; Wilber, 1995).
One's culture impacts the family experience of that individual and may even influence the organizations of which she/he is a member of or the neighborhood in which she/he lives.

5. **The attitudes, behavior, culture, and structures created by individuals and groups are significantly influenced by their situation and context** (Gladwell, 2000).

Recognizing the importance of context tells us two things. First, change strategies must be adapted to the unique context of each situation. Second, because of variations in context, many different approaches need to be considered as possible ways to reach the same end. What works in one context will not necessarily work in another. Change agents should assist community members in recognizing that they are experts in their own context and that targeted changes should be designed to match that context.

*There are multiple paths to the same end. All neighborhoods don’t organize themselves the same way to carry out their goals. Organizations don’t have to have the same set of policies to reach similar ends. Parents with more than one child learn immediately that “what worked” with the first child may, or may not, be as effective with the second.*

6. **Six conditions for change have been identified. The complexity of desired change must be assessed in relation to the conditions of change that are present** (Beck & Cowan, 1996). Change readiness is the degree to which the following six change conditions are or are not present. When all six conditions are present significant change can occur.

- **Potential:** the potential for change: open, arrested, or closed
- **Solutions:** the existence of solutions to current or past life issues
- **Dissonance:** discomfort with the current situation, either external or internal
- **Insight:** insight to possible causes of the problem and potential solutions
- **Barrier Removal:** the identification and overcoming of barriers to change
- **Support:** support for the change

*For substantive change to be achieved, these conditions need to be considered as “pre-conditions” to the ultimate desired change. The more substantive the change that is desired, the greater the number of these conditions that need to be in place in order for change to occur.*

Change takes place along a continuum based on the complexity of the change. Beck & Cowan (1996) refer to these as horizontal, oblique, and vertical change.

- **Horizontal Change:** Minor changes, adjustments, or reorganizing to what is already being done
- **Oblique Change:** Response to a crisis followed by a “snap back” to previous ways of functioning once the crisis has passed
**Vertical Change:** Transformational change

7. **Human service interventions should be directed at the journey of health.** One way of doing so is the journey from At-Risk – to Safe – to Thriving *(Young & associates, 1994).* This is what connects deficits to assets and increases people's understanding of an asset context; it is the journey from “unhealth” to health. Understanding the journey helps people move with intention to the desired future state.

"Family relations” is an indicator of health. A description of family relations through the journey from at-risk—to—safe to thriving can, in part, be depicted as follows: **At-Risk:** The family and its members are isolated from others. **Safe:** The family and its members feel a part of the community. **Thriving:** The family and its members are active in the community.

CSS Zoom Team, “Characteristics of Physical Health”

8. **An asset orientation connects people experiencing challenges with the solutions to meet those challenges** *(Kretzmann & McKnight, 1993).* It integrates and empowers people who are experiencing challenges to be the solutions to those challenges. Mutual understanding and agreement on the appropriateness of an intervention rest primarily with those affected by it.

*Delivery structures change to accommodate consumers rather than consumers changing to fit an “expert's” idea of how to promote healthy development.*

9. **Asset approaches embrace holistic contexts** *(McKnight, 1995).*

The efforts of many agencies and communities often have a very narrow focus. Commonly, youth development workers focus only on troubled youth; community development workers focus on blighted neighborhoods. Programs are successful to the extent that the targeted problem has been reduced.

Successful asset development initiatives intend to target everyone. Youth development workers are concerned with the healthy development of all youth; community development workers are concerned with the healthy development of all the neighborhoods that make up the community. Programs are successful to the extent that families are strengthened.

10. **Intentional change results when the desired outcomes are defined in advance** *(Brown & Reed, 1998, 1999; Reed & Brown, 2001).* Creating a clear vision with defined outcomes makes it possible to create a strategic plan and evaluation design. This vision energizes those involved to achieve the desired outcomes.

11. **Lasting change can best be achieved when outcomes are defined in terms of assets** *(Burns & Goldman, 1999).*

Years of trying to resolve social issues from a deficit (problem-oriented) approach have demonstrated that more can be accomplished by thinking
of outcomes in terms of assets (strengths). The O-AIM approach forces us to think in terms of long-term solutions, not just eliminating the immediate problem at hand.

12. **The O-AIM's asset context work is informed both by research and practitioner wisdom** (Outreach Partnerships). Research provides the foundation of our constructions or definitions of health (the context). Practitioner and community wisdom shapes those constructions or definitions to the unique life conditions of the environment and context.

The role of the change facilitator is to integrate local expertise with change scholarship and mobilize individuals, families, agencies, systems, and communities in the design and implementation of intentional developmental change.

Being a facilitator for positive change is not an organizational position; it does not require funds or a new program; it's a commitment and a way of acting. Positive change can begin with a mayor, a retiree, or a single youth.

Creating capable communities is everyone's job.