

# research in brief

**Editor's Note:** Many Extension staff have difficulty understanding the methodologies and educational objectives in Extension community development programs. If that's the case, reading this article in full will be most helpful.

## **Community Development in Action**

Ploch uses three models or frameworks for analyzing the three years of activities beginning with a "quiet intervention" by a new community development worker and ending with a Regional Health Center building, staff, and program. The models were Jack Rothman's, "Three Models of Community Organization Practice" (in *Strategies of Community Organization: A Book of Readings*, F. E. Peacock Publishers, 1974); "The Concept of Community" and "Elements of Social Action," both by W. A. Sutton, Inc., and Jiri Kalaja (*Rural Sociology*, June, 1960, and *Social Forces*, May, 1960).

The author defines community development as the active voluntary involvement of community residents in a process to improve some identifiable aspect of community life. He uses the several indicators developed by the sources above to determine whether all the activities leading to the Regional Health Center were community development. He basically affirms that they were. These activities were:

1. A group of people (varying in number from 8 to 16 or 17) who were diverse socioeconomically, coming together to study, and eventually to develop at least a partial solution to the community's health delivery problem.
2. A consequent community gathering of representatives of most of the organizations, agencies, and governmental units in the area that constituted a Citizens Health Committee and authorized it to seek solutions to the problem.

3. The appointing of the Health Services Committee by the Bucksport Town Council with the expressed charge of developing a plan to help solve health delivery deficiencies of the town and of the larger community area.
4. The subsequent melding of the citizens committee with the services committee.
5. The cross representation between the Health Study Group, Citizens Health Committee, and the Health Services Committee.
6. The filing of the Health Services Committee report, without subsequent action.
7. Incorporation of the Health Study Group as the Bucksport Regional Health Center.
8. The conducting by the health center through volunteers of a door-to-door, business-to-business solicitation in the community that raised \$12,000.
9. The willingness of the council in Bucksport, and of the town meetings in 3 contiguous towns, to appropriate \$1 per resident of public funds for support of the center beginning in 1974.
10. The volunteering of hundreds of man-hours of labor by community residents to convert a former theater into the Bucksport Regional Health Center. The largest industry in the community also "sent" craftsmen to the center to do special projects. Their labor was estimated to be worth over \$3,000.
11. The contribution to the center of equipment by community individuals and organizations (the Veterans of Foreign Wars donated an electrocardiograph).
12. The creation of a women's auxiliary to the center that has held numerous fund raising activities. In addition to raising funds, these functions tend to focus community interest on the center.
13. The development of a cadre of about 20 volunteers who do volunteer work in conjunction with the center.

As the author notes, the center, completely staffed and functioning is in place, "to be a truly 'community' development (The Center) will have to become deeply integrated into the fabric of the community which includes not only its operation and use by local people but responsibility for a large, if not total, share of the necessary financing."

"Community Development in Action: A Case Study." Louis A. Ploch. *Journal of Community Development Society*, VII (Spring, 1976), 5-16.

*Del Dyer*