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ABSTRACT
            Attention is focused upon the interstitial, or
in-between, groups of organizations in the community, as well as upon
the conjunctive or competitive nature of the relationships within
them. An effort is then made to offer some modifications to the many
classifications cf types of community leaders and structures of
community power. Attention is further directed to the identification
of community leaders, organizations, and factions and to their
involvement in the health-planning processes. Appendixes include the
interview schedule used in the selection of leaders, organizations,
and factions tc involve in planning an adult community education
program for Macon and Biff County, Georgia; description of the
reconnaissance method of community study; and notes and references.
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IDENTIFICATION OF LEADERS AND THEIR INVOLVEMENT IN THE PLANNING PROCESS

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COMMUNITY ORGANIZATION

ENVIRONMENTAL HEALTH PLANNING

U.S. DEPARTMENT OF HEALTH, EDUCATION AND WELFARE
Public Health Service

IDENTIFICATION OF LEADERS
AND THEIR INVOLVEMENT IN
THE PLANNING PROCESS

Harold L. Nix

Institute of Community and Area Development
and
Department of Sociology and Anthropology
The University of Georgia
Athens, Georgia

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Environmental Health Service Series on
Community Organization Techniques

I. Organization of Community Groups in Support of the Planning
Process and Code Enforcement Administration

II. Identification of Leaders, and Their Involvement in the
Planning Process

III. They Do a Job No One Else Can Do: *The Health Educator Aide
Program for Improving Environmental Health Conditions in
the Inner City*

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FOREWORD

The following monograph written by Dr. Harold L. Nix in ful-
fillment of contract no. PH 86-67-162, is the second in a con-
tinuing series on Community Organization Techniques for Commun-
ity Environmental Management published by the BCEM of the Envi-
ronmental Control Administration. Part I is Dr. Robert E.
Knittel's monograph *Organization of Community Groups in Support
of the Planning Process and Code Enforcement Administration*. Al-
though the illustrative material in this series originally grew
out of work of the Office of Urban Environmental Health Plan-
ning, the need for such material to guide local public and
private health agency administrators has become evident not only
in the community environmental management field but also in the
areas of personal health services and mental health; and the
reader dealing with problems of those areas can easily recognize
the situations in his work to which these community organization
strategies may apply.

The need of health administrators for tested ways of getting
community support in order to move from planning stage to
program action became evident in the problems of survey imple-
mentation following the Urban Environmental Health Planning
training experience of the mid-60's. The trainees returning to
their home communities did not know how to go about getting
support for doing needed interjurisdictional surveys of their
areas, preliminary to professional plans. The communities
surveyed during the training seldom achieved more than slow and
spotty implementation of the survey's suggestions and recom-
mendations. As a result the Office of Urban Environmental
Health Planning undertook, with the cooperation of the Georgia
Department of Public Health and the Institute of Community and
Area Development at the University of Georgia, in connection
with training courses in Environmental Health Planning in

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three metropolitan areas of that state, an informal study of ways of gaining identification of community leaders and their involvement in the planning process.

The techniques tested there and found useful in obtaining better acceptance of interjurisdictional planning and smoother decision making on implementation of plan recommendations are reported here. Dr. Nix and his associates not only perfected the techniques, but also conducted the field work and analysis for the test cases reported in the Community Social Analysis Series (No. 1-3) published by the Georgia Department of Public Health.

Robert E. Novick, Director
Bureau of Community Environmental
  Management

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INTRODUCTION

The growing body of literature on community power, decision making, and action has demonstrated at least four basic points. First, social power is present and is exercised in patterned ways in all social systems, including communities. Furthermore, certain individuals play key roles in the exercise of community leadership. Second, community leaders can be identified by certain techniques. Third, only a very small percentage of the citizens of a community becomes actively involved in the decision-making processes. One author has concluded that no more than 1 percent of the population is involved in community decision making in most American cities.[1] Fourth, successful community action depends, in large measure, upon finding and involving the key community leaders. Gamson reported in his study of 18 communities that the side supporting change wins only 30 percent of the time without the united support of reputational leaders but two-thirds of the time with it.[2] These basic findings or generalizations focus upon the increasing need for public health officials to understand more about the nature of the community and its leadership structure.

The basic purposes of this Part II of the BCEM series on Community Organization—Participation in Health Efforts are to generalize about the nature of a community and community leadership, to describe a way to identify community leaders, and to discuss some guidelines for involving community leaders in supporting health or other community planning-action programs.

THE NATURE OF COMMUNITY

One can categorize all the individuals and study the internal structure of all the special-interest groups and organizations in an area and still have little notion of the nature of a community. The view is taken here that the social facts of which communities in the United States are made are the relationships among the various special-interest groups and organizations within a locality. According to Bates and Bacon, these "interstitial" or "in-between" relationships may be viewed as two basic types.[3]

The first type they refer to as "exchange" relationships, in which individuals, groups, and organizations exchange their specialized goods or services. Typical of this type is the merchant-customer or professional-client relationship. It is hypothesized that individuals tend to gain (or lose) potential community power by the nature and extent of exchange relationships.

The second type of community relationship they label "coordinative." The function of coordinative relationships is to manage the relationships among two or more groups or organizations that have differing and potentially conflicting interests. These relationships occur in what has been called "coordinative interstitial groups."[4] Examples are a local chamber of commerce, a community development council, and an informal decision-making clique. Members of organizations such as these represent the interests of several different special-interest groups, for example, a hardware store, a bank, a realty company, a church, a law firm, or an industrial firm.

Though community power appears to be gained through exchange relationships, it is believed that the exercise of community power is primarily through coordinative relationships. That is,

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a person may gain great potential power in his exchange rela-
tionships, but unless he becomes actively engaged in the key
coordinative group or organization in his community, he is not
in a position to exercise much influence on community affairs.[5]

Both ''coordinative interstitial groups'' are quite dif-
ferent from special-interest groups and organizations such as
the Jones family, the Johnson Hardware Company, the ideal Mop
Handle Company, and the Edison County Elementary School, in
which the role behavior of their members is culturally or
ideally reciprocal. By ''reciprocal'' it is meant that each
member is *supposed* to be oriented to the basic goal of the
-group or organization he represents. On the other hand, in the
role behavior in community-type interstitial groups, both ex-
change and coordinative, the relationship is basically con-
junctive or competitive:[6] as customer and merchant meet and as
representatives of various special-interest groups meet in the
local chamber of commerce, they are basically oriented to
different goals. That is, they are expected to defend the
interests of the organizations or groups they represent.

If one wishes to understand a community in which he ad-
ministers a health program, he should, *first*, focus his atten-
tion upon the interstitial groups and organizations, which are
made up of representatives of the various special-interest
groups and organizations; and, *second*, dispel the notion that
communities are basically systems of cooperating individuals,
groups, and organizations. The basic orientation or relation-
ship in both exchange and coordinative interstitial groups is
conjunctive or competitive. Hence, the force underlying commun-
ity-wide cooperation is not as often a common goal as it is
interdependence brought about by the increasing specialization
in society.[7]

If the preceding analysis is accurate, the nature or adapt-
ive community is not one with complete harmony and consensus,
but one whose specialized leaders and group representatives
realize that their interdependency requires an organized ap-
proach to compromise and a system of conflict management.
Furthermore, the need for an organized or patterned leadership
structure for controlling competition and conflict becomes
greater as the community grows larger, more complex, and more
interdependent.

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THE NATURE OF

COMMUNITY LEADERSHIP

Social Power

The basis of leadership is social power, which in turn may
be defined as "the capacity to determine the action of others."
This social power may or may not be used. If it is used, leader-
ship is exercised.

In terms of the source of social power, a three-way classifi-
cation has been broadly accepted: *authority, influence,* and
unlegitimized coercion. A part of an individual's power is based
on the authority vested in the offices or positions he holds in
groups and organizations. Authority is the *right* that anyone who
occupies a particular position in a group has to control other
members of that particular group. Authority is more characteris-
tic of special-interest groups and organizations and their
associated reciprocal relationships than of community-type (ex-
change or coordinative) groups.[8]

Another part of a person's social power is associated with
no particular office but resides within the individual. This
type is called influence. The degree of an individual's community
influence is the result of personal qualities such as appearance,
age, family background, reputation, special skills, and com-
munication abilities; his control of or access to scarce re-
sources such as jobs, land, goods, services, power, and prestige;
and the cumulative influence growing out of all the positions or
offices held in the past and present. Community influence is not
the *right* but the *ability* of an individual to control the be-
havior of others in intergroup and interorganizational relation-
ships. In other words, exchange and coordinative relationships
are characterized by the exercise of influence rather than of
authority.

The third type of social power is through *unlegitimized
coercion,* such as taking the property of others at gunpoint.

Characteristics of Community Leaders

Studies of community leadership, power, and decision making have generally concluded that the top influentials in a community have the following characteristics:[9]

1. Have average age of 50 or more
2. Are in the higher income groups
3. Have above-average amount of education
4. Are long-time residents of the community
5. Have control or access to money, credit, jobs, and mass media through their positions in credit institutions, firms employing many people, high elective office, and mass media
6. Are in occupations characterized as owner, self-employed, or executive (Most studies indicate that more than 50 percent of the key leaders are from business and industry.)[10]

Types of Community Leaders

In the study of leadership in communities and other types of groups or organizations, increasing attention has been given to the types of leaders, especially to the functional types.[11] This focus has been brought about, in part, by the realization that the different techniques used in identifying leaders tend to uncover different types of leaders. A brief attempt will be made to summarize some of the types of community leaders under three broad classes of leaders based on different dimensions. These dimensions are (1) level and function, (2) scope of influence, and (3) basic orientation.

Hierarchical Level and Functional Classification of Leaders

The first of this classification may be called *legitimizers*. These top community influentials also have been called gate keepers, key leaders, influentials, and institutional leaders. Such leaders, as the names imply, are the individuals whose approval is usually needed if a proposed community action project is to succeed. They may or may not become actively involved in the endeavor, but their approval explicitly or implicitly is usually needed before the support of the next level of leadership is obtained.

These persons who have the reputation for being top leaders in their community are easily identified by asking, ''Who are the most influential or powerful people in this community?''

They tend to hold top positions in the largest and most active
financial, business, industrial, governmental, professional,
educational, religious, and labor organizations.[12] For various
reasons, however, one cannot automatically assume that top
positional leadership coincides with reputational leadership.
First, people with authority in top organizations may or may not
choose to use the influence their positions yield in community
affairs. Second, influence tends to be cumulative; that is, a
person may not presently hold a top position, but through
previous positions he has built up influence and a reputation
that he now chooses to exercise.

A second type of leader, based on level and function, has
been called *effectors*. Effectors are often called second-level
leaders or lieutenants. In medium-sized to large cities, the
effectors may be the more active workers in community decision
making. Freeman describes them in the Syracuse study as follows:
''Many of the most active Effectors are government personnel and
professional participants; and the others are the employees of
the large private corporations directed by the Institutional
Leaders.''[13] Such leaders tend to hold key positions that are
vital in the planning of community change, and they possess
technical and professional competency in various specialized
areas. Such leaders tend to be identified most readily by study-
ing participation in the decision-making processes and by asking
knowledgeables to name leaders in specialized areas such as
education, public health, business, recreation, and industrial
development. Persons classified in this second level of leader-
ship may be in regular touch with one or more of the influen-
tials. Effectors appear, however, to operate often on their own
except for the guidance of policies of their organization.

In larger cities, effectors appear to carry the main burden
of initiating and effecting community change, except for the
approval and prestige lent by the legitimizers for important
project., In small communities, the effectors and the legiti-
mizers appear to be the same people.[14]

A third type of leader, based on level and function, is
often called *activists*. This type is also called doers and
joiners. They are the people who can be identified by determin-
ing who the active workers and officeholders are in the com-
munity, civic, and service clubs. In the larger communities,
activists usually lack the power base and technical skills re-
quired to be involved in important legitimization or decision
making. They appear to function more as a means through which

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to diffuse information, educate the public, and gain support on decisions already made. They also act at times to bring public pressures upon the decision makers. Participation in this type of leadership is often a prerequisite to upper level leadership.

The differentiation among these three hierarchical levels and functional types of leaders becomes less realistic as the size and diversification of the community decreases.

The discussion of the small percentage of people in a community who may be classified as legitimizers, effectors, and activists should not be interpreted to mean that they make up the total leadership structure. No matter how insignificant he may be, each person in the *general public* has some direct or indirect influence on the behavior of others. Prisoners in cells as well as voters at the polls can and do contribute to the rise and fall of leaders as they choose whether or not to follow their lead.

All people in a geographic-political area are a part of the leadership structure, and many persons outside the area are in a social sense tied into the network of community decision making. This may be illustrated by the authority and influence of district, state, and national public health officials upon the local health officials, the health programs, and ultimately, the total community.

General Versus Specialized Leaders

Another way to classify leaders is in terms of degree of generality of their influence. Does a specific leader exercise influence ''across the board'' in community affairs, or is he involved in decision making only when his specialized area of competency is involved? The earlier studies[15] based on the reputational approach tended to conclude that communities contain a relatively small number of key leaders whose influence is general. Later studies, using the decision-making approach, emphasized the pluralistic and specialized nature of leadership.[16] More recent comparative approach studies[17] indicate that the truth lies between the extreme positions of the advocates of the reputational approach and the advocates of the decision-making approach.[18]

Perhaps by asking both general and specific questions, one can more clearly assess the truth. In three medium-sized Georgia cities, an attempt was made to determine the degree of overlap between general leadership and specialized leadership.[19] This was done by asking knowledgeables to name the persons who have

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the most influence in general community affairs and those most
influential in specialized areas such as business and industry,
government, education, religion, and health. The findings indi-
cate that most of the overlap between specialized leaders and
general leaders was with business and industrial leaders and
political leaders. That is, 75 percent of both those named as
business and industrial leaders and political leaders were also
named as general community leaders. On the other hand, the
percentage of persons named as leaders in other specialized
areas who were also named as general leaders was much less. This
is indicated by the following list of specialized areas and the
percentages of these type leaders who were also named as general
community leaders: religion, 33 percent; education, 16 percent;
health, 15 percent; welfare, 9 percent; and recreation, 7 per-
cent. In addition, persons named as leaders in the specialized
areas of religion, education, health, welfare, and recreation,
as well as in general community affairs, were named relatively
few times as general community leaders. For example, only one
top public health official was named as a general leader in the
three metropolitan communities, and this one by only one nomina-
tion.

On the other hand, all three district directors of public
health were top nominees as leaders in community health. The
district sanitary engineers were also nominated but proportion-
ately less than the district directors as leaders in community
health. From these findings and other observations, it appears
that public health officials tend to be considered influential
community leaders only in respect to health matters. This con-
clusion lends support to the notion that it is important for the
public health officials to identify the community leaders and
their mode of operation in order to develop effective programs
for health improvement.

Regarding the degree to which leaders in a community are
generalists or specialists, the demands of a more complex
society, the increase in size of cities, and the diversification
of the economic and occupational base all appear to be associated
with a shift toward a more pluralistic leadership structure
made up of more individuals with specialized skills.[20] Even the
more general leader in a large, complex community tends to be a
specialist of a type; that is, he tends to be an expert in
finance, administration, or human relations.

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"Task" Leaders Versus "Social" Leaders

A third way of classifying leaders is in terms of their basic orientation, that is, their relative interest in task performance or in group maintenance. Is a leader more concerned with performing the basic tasks and achieving the objectives of his group, or is he more concerned with the solidarity and strength of the social relations within the group?

Studies cf small groups, organizations, and communities reveal an interesting situation. In a social group where there is both a high degree of consensus about who the leaders are and a high degree of adjustment to the environment, we find not one but two basic types of leaders. Referring only to communities, there are "task-oriented" leaders who are usually specialists at something. They see conditions in the community that, by their expert standards, need improving, and so they drive hard to change the community in some technical way. In the well-organized, adjustive community, there is also the "social" leader, the "harmonizer," or the "process" leader. He is the leader who is more concerned with people and groups and their relationships to each other. Whereas the task leader tends to create tension and destroy the social system as he promotes physical and technical change, the social leader reduces friction, improves relationships, and maintains the community social system.

The community, as is true of other social systems, needs both types of leaders. Warren states it this way:

> What we see...is a perpetual process of new achievement and consolidation, coupled with a process of tension induction and reduction, and we have seen that in this multiple process there are roles in our communities both for the man whose eye is on the task accomplishment, and for the man whose eye is on the relationships existing among people. It may be just as well, given these diverse needs and this pulsating process, that not all people choose the same way to serve.[21]

Perhaps closely related to the social leader is a type of leader who may be called a "go-between." These are the people who serve as linkages between opposing groups or factions in a community. Go-betweens who are more communicators than power leaders may be overlooked by asking knowledgeables to name only community influentials. This is because strong leadership in either of the opposing camps would negate a person's effectiveness as a go-between. If one discovers a basic cleavage in a

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community such as "county versus city," "Negro versus white,"
"labor versus management," or "town A versus town B," he
should ask knowledgeables, "Who is the best person to involve
both factions in a cooperative endeavor?"

Structure of Community Leadership

The accumulating evidence indicates the existence of a broad
range of leadership structures or patterns in different com-
munities and in the same communities through time. This being the
situation, Bonjean has stated that the focus is now shifting to
a concern with the range of possible leadership structures, the
important dimensions that differentiate the various structures,
and the manner in which these dimensions can be measured. He
further suggests that the important dimensions that appear to be
involved in two ideal types—"covert power elite" and "legiti-
mate pluralism"—are legitimacy, visibility, scope of influence,
and cohesiveness.[22] Rather than elaborate on the various possible
combinations that would result from this four-dimensional model,
efforts will be directed toward a brief description of some of
the more common forms described in the literature on community
power and observed in the Georgia communities.[23] The forms or
structures will be grouped for convenience into four categories
that may be labeled (1) unitary or focused, (2) bifactional or
split, (3) multifactional, and (4) amorphous.

Unitary or Focused

The unitary or focused classification of community leadership
patterns includes communities whose leadership is pyramidal in
form. At the apex of power is a person, group, or organization
that unquestionably exercises power in a patterned way through
the descending levels of leadership. The *first* type of this
focused classification is often referred to as "bossism." Here
power is centered in one person (or family) who exercises power
through his "lieutenants." This form appears to be most often
associated with small communities, slow-growing or declining
communities, and communities with a narrow economic base, such as
an agricultural or a one-industry town.[2']
The *second* focused type of structure has been called the
"informal clique." This is the type of structure in which a
small informally organized power elite controls the policy
making, coordination, and direction of the affairs of the com-
munity. This type of structure has been found in some Georgia

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communities to be an intermediate stage between bossism and the following type.[25]

A *third* type of power structure in this classification may be called an "organized pluralistic" structure. At the apex of this pyramid of power is a formally organized group, usually a voluntary lay organization, such as a local chamber of commerce, a community development council, or a local civic club. In a larger community, an organization such as this usually has rather broad representation which relates it to the various groups, organizations, political subdivision, and factions. Such an organization has the reputation for being the organization whose involvement is needed in relation to major change proposals for the community.[26]

Bifactional or Split

A second broad classification of leadership structures may be labeled "bifactional" or "split." These double-pyramid community patterns are characterized by major splits or cleavages such as city-county, white-Negro, labor-management, Democrat-Republican. It suffices to say here that each of the two factions in a cleavage may assume any of the leadership patterns described in the preceding section. Each faction may be characterized by bossism, informal cliques, or organized pluralistic patterns.

Multifactional

In addition to the unitary or focused and bifactional or split patterns of power, some studies have revealed what might be termed multifactional structures. There may be more than one basic and continuing cleavage within a community and consequently more than two factions. Each faction may have its own type of organization. In all factional communities, a major concern for the health planner or other change agent is the identification and involvement of the leaders of each faction. Concern should be given to discovering the individuals and groups that serve as linkages between factions as well as to using the usual procedures in relating representatives of the competing factions.

Amorphous

The last theoretical type of community leadership to be mentioned has been called "amorphous" or disorganized. Barth[27] described two communities in which no structure of leadership was identified. This condition was thought to be associated with

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absentee ownership and the dominance exerted over the community
by a metropolitan center.

The distinction between the multifactional and the amorphous
community leadership structure would be very difficult to de-
lineate where factions approach the point of being difficult to
recognize.

SUMMARY

In summary, an attempt has been made in the preceding
section to, first, focus attention upon the interstitial, or in-
between, groups and organizations in the community, as well as
upon the conjunctive or competitive nature of the relationships
within them. Second, an effort has been made to offer some
modifications to the many classifications of types of community
leaders and structures of community power.

Attention will now be turned to the identification of com-
munity leaders, organizations, and factions and to their in-
volvement in the health-planning processes.

IDENTIFYING COMMUNITY LEADERS,

ORGANIZATIONS, AND FACTIONS

Identifying Community Leaders

Most modern studies 'of community power and leadership have used one or more of four techniques to identify community leaders. These are (1) the positional approach, (2) the social-participation approach, (3) the reputational approach, and (4) the decision-making approach.

The positional approach assumes that formal authority is leadership and that those individuals who hold top positions in the largest and most active organization (governmental or political, industrial, business, finance, education, etc.) will make the important community-type decisions. Comparative studies indicate the lack of reliability of this method. [28]

The social-participation approach is based on the assumption that leadership is a consequence of social activity. The technique involved is to determine for individuals their membership, activities, and offices held in voluntary associations. [29] The persons revealed as activists in voluntary associations do not correlate highly with leaders determined by other methods.

The reputational approach involves the identification of persons reputed to have power or influence in community affairs. These individuals are identified by asking selected individuals in the community to name the persons they consider to be most influential or powerful in community affairs. This approach is based on the assumption that leadership is too complex to be studied directly. Hence, community informants are asked for their perceptions of leadership. Many criticisms have been directed against this approach.

The decision-making approach involves the study of events or decisions to determine who was involved in influencing the

outcome. In addition to being time consuming, this approach
presents the difficulty of selecting the most meaningful events
or decisions. In addition, it does not reveal the influence of
policy, reputation, or behind-the-scenes maneuvering, in that the
approach is based on the assumption that power actors must
visibly ''do something'' to influence a decision.

Perhaps the most important criticism is the tendency for the
data gathered to present the illusion of a monolithic, or an
undifferentiated, power group. [30] This weakness can be, in part,
overcome by supplementing the technique with additional ques-
tions, supplementary observations, and refinements in analysis.

There is a growing tendency for basic researchers in the
area of community leadership to use a combination of approaches,
in that each approach with varying degrees of overlap has a
tendency to identify different functional types of leaders. (See
classification of leaders, pages 4-6.) The reputational approach
tends to identify the top leaders or legitimizers. The decision-
making approach, especially in the larger communities, tends to
uncover the effectors or second-level leaders. The social-
participation approach discovers largely the activists, doers,
or joiners. The positional approach has produced varying results.
It identifies leaders of top organizations who may or may not
be actively involved in community decision making.

For the public health official or other community change
agent, the multiple approach is impractical. Instead, a modified
reputational approach [31] is likely to be the most practical and
to provide the most insight in terms of the skills and time
likely to be available.

The Reputational Approach to Identifying General and Specialized Community Leaders

The reputational approach described here involves the identi-
fication of individuals who are perceived by knowledgeables to be
most influential in making community-type decisions or in de-
termining the outcome of community events. There are several
steps in this procedure.

Determining the Geographic-Political Area

The first step in identifying community leaders is to de-
termine the relevant geographic-political area. This is deter-
mined largely by the area of jurisdiction or the area for which
the proposed planning is relevant, or both. If the relevant area

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is composed of a number of political subdivisions such as
cities within a county or cities and counties within a metro-
politan area or a health district, one will likely have to
identify influentials for the *whole area* and for each of the
subcommunities. This is especially important where implementa-
tion of planned improvements depends upon the cooperation and
coordination of more than one governmental unit.

Developing the Interview Guide

After the area of study has been determined, the next step
is to decide which questions to ask for identifying leaders and
leadership patterns in the area of environmental health plan-
ning. An example of an interview schedule including such
questions may be seen in Appendix A on page 38.

In order to determine the legitimizers or top influentials,
one could ask: ''Would you please name six or eight persons who
you think have the most influence in general affairs *(name the
total geographic-political area)*, regardless of whether or not
you approve of the way they use their influence?''[32] In addition
to determining the names of community influentials, the inter-
viewer may wish to determine their occupations and positions.

If the total geographic-political area is composed of more
than one political unit, such as cities or counties, the same
question may be asked of each unit. It is practical, however, to
ask for only two or three influentials for each subunit.

There are many persons in a community who influence com-
munity decisions in specialized issues who would seldom, if
ever, be named as general leaders. It is important to identify
specialized leaders in the relevant areas. Specialized areas of
leadership that may be relevant to environmental health planning
and implementation include public health, politics, city or
community planning, business and industry, communication, and
medicine.

Other than these technical areas of leadership, one often
wishes to determine the leaders within certain special cate-
gories who may be overlooked in asking for general community
influentials. For example, women, Negroes, and ethnic or other
minority groups are often poorly represented among the general
community influentials. It may, however, be very important to
involve these groups in the planning process. One should,
therefore, specifically ask for leaders in these relevant
categories and interview some of each type. The assumption is
that they will recognize their own leaders better than the

dominant group leaders. It is well known, for example, that the Negroes generally considered as leaders by white leaders are often disrespected by many other Negroes. The task of finding leaders of minority groups by using a researcher from the majority is not easy. This is especially true when there is considerable change and disorganization among the minority group.

In order to identify leaders in special areas or minority groups, one could request: ''Would you please name two or three persons in *(name of community or subcommunity)* who have the most influence in each of the following areas (or groups).''[33]

Factions, as well as leaders, should be taken into account in environmental and other areas of community planning. Factions or basic divisions in a community may be identified by asking questions such as: ''What do you consider to be the basic factions (cleavages, divisions, or areas of opposition) in *(name of total community)?*'' Such a question could be followed by asking: ''Who is the best person to act as a 'go-between' or link between these factions?''

Organizations and groups as well as individuals exercise influence over the affairs of a community. In communities not characterized by bossism or a high degree of disorganization, one can usually find some group or organization that serves as a focal point for important community decisions. It is here that legitimization of proposed projects usually takes place. In small rural or one-industry towns, this group may be a small informal clique of influentials who meet periodically to make decisions that vitally influence the community.[34] In larger, more complex, and more diversified communities, one often finds a coordination of community affairs taking place in one dominant organization, such as a chamber of commerce.[35] In other large communities, there may be a rather clearcut division of responsibility in community decision making between two or more organizations with informal coordination between them. These organizations or groups made up of representatives of varying vested interests were referred to as coordinative interstitial groups in an earlier section.

An approach to identifying influential (coordinative) community groups or organizations is to ask: ''Would you please name the groups or organizations which you consider as having the most influence on the general affairs of this community?''

A more specific question relating to environmental health planning is: ''As you know, environmental health generally in-

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cludes such areas of concern as water supply, sewerage, waste collection and disposal, air pollution, neighborhood recreation and sanitation, housing, and food inspection. Which organizations in this community do you think could be more influential in determining whether or not a program to improve these areas would be successful?''

Selecting the Respondents

After the questions have been determined, another step is to select respondents or people who are knowledgeable about the leadership and issues in the community. Typically, these persons hold positions such as director of the local chamber of commerce, banker, leading business and industrial executives, leading ministers, editors, mayors and city managers. Several approaches have been used to select knowledgeables, and there are indications that the varying approaches yield essentially the same results.[36] Two approaches will be described briefly. Either should provide an adequate working knowledge for health-planning purposes.

Snowball Method. In using the ''snowball'' method, the leadership study is started with interviews with one or two well-known key figures in the community, such as an influential editor, banker, businessman, or chamber of commerce president. As part of the interview, the individual is asked to name six or eight of the most influential persons in general community affairs. A running tabulation of persons named should be kept, and those named often should in turn be interviewed. This process may continue until the interviewer can largely predict the interviewees' responses. For applied research, our experiences indicate that a good working knowledge may be gained in a small community of less than 10,000 people with from 10 to 20 interviews. The leadership structures of communities with populations of from 10,000 to 100,000 may be comprehended with from 15 to 25 interviews. Larger communities or communities split by several factions or political subdivisions would require more interviews, if one is to understand the total community and its subdivisions.

Panel Method. The panel method[37] calls for a careful selection of one or two top leaders in each of several institutional areas, such as (1) government, (2) business and industry, (3) mass communication, (4) education, (5) health, (6) religion, (7) labor, and (8) welfare. The addition of other categories for special purposes may be desirable. These may include

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minority groups, women, or leaders from subcommunities and
political subdivisions.

The members of this panel are interviewed and asked to name
six or eight of the most influential persons in the community.
As in the snowball method, a tabulation of persons named most
often will lead to further selections until the interviewers
feel that they have a sufficient working knowledge of the
leadership patterns in the community.

Interviewing

For this type of study involving rather confidential dis-
cussions with persons of high status in the community, it is
recommended that the interviewer have the appearance, skill, and
status to command the respect of the influentials. This would
likely be a person occupying one of the top positions in the
local health department. An alternate solution is to bring in a
social scientist from the state health department, local college,
or state university. There are some advantages to having a
competent outsider carry out this particular assignment.

The interview may be quite formal. That is, the interviewer
may (1) contact the person to be interviewed, (2) identify him-
self and the organization he represents, (3) indicate that he
wishes to consult with him regarding the leadership of the com-
munity, (4) state the purposes of the interview, (5) specify how
the information will be used, and (6) indicate the confidential
nature of the interview. The questions are asked and the answers
recorded in the appropriate space on a specially prepared form
(see Appendix A).

On the other hand, one might prefer to conduct the study in a
much more casual manner. He may prefer to simplify his questions
and, on the golf course or at coffee, state that he needs com-
munity support for a community improvement program, and then
discretely ask about influentials, special area leaders, and
influential organizations. The responses are mentally noted to be
recorded soon after the interview. The asking of such questions
usually means to the interviewee that the interviewer is at-
tempting to go through the regular channel with his program.

Summary of Findings

After the decision is made to stop interviewing, the re-
sponses should be summarized for each question in the interview
schedule. The *first* step in summarizing the responses to the

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first question would be to determine the frequency or number of times each leader is named. The process of tabulating the frequency of nominations for each leader can be routinized by the use of a tally form such as the following.

GENERAL COMMUNITY LEADERS BY REPUTATION, JONESVILLE, June 1967

Name	Tally	Frequency
Johnny Bishop	⟋⟋⟍ ⟋⟋⟍ 11	12
William Jones	⟋⟋⟍ ⟋⟋⟍ ⟋⟋⟍ ⟋⟋⟍ ⟋⟋⟍ 111	28
Henry Smith	111	3
Lewis Adams	⟋⟋⟍ ⟋⟋⟍ ⟋⟋⟍ ⟋⟋⟍ 11	22

With such a form, names can be listed as nominated on the schedules and tally marks made for each nomination. It is then a simple matter to count the tally marks by each name and record the frequencies in the frequency column. By totaling the number of nominations and the frequencies, one can determine other measures, such as mean number of times leaders are nominated, the percentages of interviewees who nominate any particular leader, and others.

The *second* step in summarizing the responses would be to make an *array* of the nominated leaders in the order of the number of times mentioned. The array should also include the ranking of leaders and the frequency of times mentioned. The following suggested form could be used.

GENERAL COMMUNITY LEADERS BY RANK ORDER AND FREQUENCY, JONESVILLE, June 1967

Rank	Name	Frequency
1	William Jones	28
2	Lewis Adams	22
56	Julia Wilkerson	2

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Depending upon the purpose of the study, some researchers would eliminate from the array those named only once or twice.

Another way to view the responses is to develop sociograms to determine who names whom.[38] Bonjean adds insight to the data gained by the reputational approach by determining which leaders are nominated by only top leaders, by only low-level leaders, and by both top leaders and low-level leaders.[39] Those named only by the top leaders he calls ''hidden'' leaders; those named only by low-level leaders are called ''symbolic'' leaders; and those named by both top and low-level leaders are called ''visible'' leaders. The understanding or use of these more sophisticated procedures would require familiarity with the cited references and other pertinent literature, or consultation with the social scientist suggested above as interviewer or with a professional community organization consultant as suggested in Part I of this series.

Each question in the interview schedule can be treated similarly to the question illustrated above. That is, various summaries can be developed by the use of tallies, frequency distributions, arrays, and sociograms.

The names of persons named and ranked by the foregoing procedures should not be disclosed beyond the individuals carrying out the study. This type of data should be treated as *confidential* and should be used only as a guide to determining individuals, organizations, and factions to involve in the health study-planning-action process.

Additional Observation

The procedures described give us mainly the names of power actors and power organizations. A ranking of leaders by number of times mentioned does not tell us the power structure, pattern of interaction, or clique structure among these actors. The questions on factions and ''go-betweens'' yield some insight into the pattern of interaction. The alert interviewer may also gain some insight by probe questions about which top leaders work together or against each other. After the interviews, additional insight can be gained by certain observations of the patterned relationship between influentials and organizations. After being sensitized by the leadership survey, one can quickly gain cues to interaction patterns by noting (1) names in the news, (2) sides taken in community issues, (3) visiting patterns, (4) who has coffee with whom, (5) who frequents whose office, and (6) kinship ties and other patterns.

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Identifying the Decision-Making Process

After determining the reputed influentials, observing patterns of interaction, and reading the local newspaper, one can probably generalize about the process by which the important decisions are made in a community. One could develop standard questions in the interview schedule about where and how important decisions are made. Our experience in several studies indicates, however, that this is a question one keeps constantly in mind but does not ask all respondents. It may be asked as a probe question of a few individuals with whom the interviewer has established a high degree of confidence and rapport.

A few examples of the decision-making groups and processes will illustrate our point. The writer was asked to make a study of a small county seat of approximately 5,000 people. On the first day in town, he interviewed five knowledgeables and had a good indication of who the top leaders were. The next morning in a quiet motel restaurant, the four men who had been nominated most often as top influentials were observed having breakfast together. In addition, they met every morning for breakfast during the four days of the study. Further observations and inquiries indicated that this "informal leadership clique" met daily to discuss community and county affairs. They went their separate ways to meet lower level leaders for coffee at 10:30 a.m.

In a larger, more diversified community, it was found by the second day of study that important projects, to be successful, must be approved by the chamber of commerce. In a still larger and more complex community, there appeared to be a division of labor. A special industrial development organization exercised great power over economic matters. The local community social council (division of United Fund) was very influential in the social service areas of health, welfare, and recreation. The chamber of commerce appeared to lead in affairs relative to planning, development, and utilities. There was general consensus about each organization's areas of influence. In addition, the organizations were tied closely together by overlapping membership.

In a medium-sized community, it was found that basic decisions about which major project to push each ye~ were made by a semisecret community development organization. Once the decision was made, the chamber of commerce, to which all the members of the semisecret organization belonged, carried the main burden of implementation. The decision making we have been

discussing in these examples occurs in what was described in preceding sections as coordinative interstitial groups.

Both the leadership form or structure, as well as the persons who occupy the positions of leadership in a community, are constantly changing. The original identification study must, therefore, be updated. This updating is perhaps best achieved by continuous testing of the earlier conclusions reached about who or what are the influential individuals, organizations, and factions in a community. If continuous updating is not convenient, the identification study may be repeated at 2- or 3- year intervals.

The efforts to this point have been to discuss the nature of community and community leadership as well as to discuss a method of identifying the community leaders, organizations, and factions. An example of an interview schedule prepared for the identification of leaders, organizations, and factions in a Georgia metropolitan community is reproduced in Appendix A.

The idea of using reputational leaders and perhaps positional leaders to do more than identify themselves and other community leaders has been used in Kentucky and Georgia. This approach of using leaders as respondents to study needs, problems, attitudes, status of services, organizational structure, as well as leadership of the community, has been called *Community Reconnaissance Method*. A description of this method and its broader use is given in Appendix B.

The following section will be devoted to the involvement of these leaders, organizations, and factions in the environmental study-planning process. Since involving the leading citizens and organizations is an integral part of a broader process, their involvement will be discussed in relation to a discussion of the ''steps in the social action process.''

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INVOLVING COMMUNITY LEADERS,

ORGANIZATIONS, AND FACTIONS IN

THE PLANNING PROCESS

Importance

The importance of identifying and involving reputational leaders in planning involving potential change in the community or in organizations and programs therein was emphasized earlier by reference to the work of Gamson.[40] He found in his study of 18 communities that the side supporting change in community issues won only 30 percent of the time without the united support of reputational leaders. On the other hand, the change agents won two-thirds of the time with the united support of reputational leaders. It is especially important for health leaders to identify and involve generally influential leaders of the community because of their own particular standing in community affairs. It was pointed out earlier that few individuals considered as leaders in the special area of public health were named also as leaders in general community affairs,[41] and those named were named relatively few times.

There are other reasons why it is especially important to involve the influentials or decision makers in health planning. Mico states it this way:

> Generally speaking, the health field does not fare as well as others such as urban renewal, education, physical planning and economic development for the attention and involvement of community decision-makers, The problems of environmental pollution, health facilities planning, and the provision and financing of more adequate health services require complex community organizational processes which involve influential leaders, affect inter-agency cooperation, and cross political jurisdictional lines. As a result, the community organization efforts are often unsuccessful. Further-

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more, the health field is fractured by categorical programming
and planning efforts and often torn by controversial issues
such as medical care for the aged and fluoridation of water
supplies.[42]

If a study of the community leadership structure has been
made as recommended in the preceding section, the health offi-
cials should have already identified (1) top general influen-
tials or legitimizers, (2) leaders in specialized areas relevant
to health planning, (3) leaders in the subcommunities (cities,
counties, etc.), (4) the most influential organizations or
informal cliques where community-wide decisions are made, (5)
main factions in the community, (6) linkages between the fac-
tions, and (7) some general notation about how decisions are
made and legitimized in the community.

Steps in the Social Action Process

With knowledge gained by the study method described plus a
knowledge of who occupies official positions of authority re-
lating to the relevant health areas, one should be ready for the
next step of involving both positional and reputational leaders
in the proposed planning process.[43]

If it is remembered that timing and sequence are of utmost
importance, the following steps may be taken as the attempt is
made to involve community leaders and others in the proposed
health-planning process.

Step One: Recognizing and Describing the Health-Planning Problem

The first step in any social action begins when two or more
people recognize and define a problem.[44] Before approaching
community influentials, the local health officials or promoters,
or both, should have a well-formulated statement of the need or
problem, such as the ''need for an environmental health survey-
action program.'' The statement of the problem should include a
preliminary statement of the problem areas to be studied, such
as sewerage, water pollution, waste disposal, housing, and
neighborhood facilities and conditions, as well as some idea of
the geographical or governmental scope, or both, of such a
study. In addition, justification for tackling the problem area
should be well established by showing preliminary estimates of
(1) the extent of the problem(s), (2) the cost of continuing
neglect of the problem(s), and (3) the probable health and

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economic benefits to be derived from the proper solution of
the problem areas.

When possible, the proposed health study-planning program
should be associated with or shown as complementary to locally
popular programs or movements, such as ''￼ iustrial develop-
ment,'' ''Macon-on-the-Move,'' and ''O. . rd Oglethorpe.''

A well-developed preliminary statement of the problem based
on available records and other data will be one of the most
important tools in carrying out some of the following steps in
the planning process.

*Step Two: Determining Relevant Leaders, Organizations, and
Factions*

With knowledge gained by the leadership survey recommended
earlier plus knowledge of the governmental, professional, and
voluntary agency positions relevant to the health-planning area,
one should be ready to compile a list of leaders, organizations,
and factions relevant to the success or failure of the pro-
posed health-planning program. Suggested types of leaders and
organizations relevant to the health-planning process are:

1. Legitimizers or the top community influentials
2. Subarea leaders if the proposed study area includes more
   than one community, town, city, or county
3. Most influential (community decision-making) organizations
   or informal cliques
4. Key public health personnel who may be largely responsible
   for implementing the study-planning program
5. Leaders of factions and those who can act as ''go-be-
   tweens''
6. Leaders of the recipients of the services (This often
   means the involvement of the leaders of the ''poor,''
   Negroes, or other minority groups.)
7. Specialists who have special skills or knowledge relevant
   to the proposed areas of study
8. Those who *control* or *support* the health programs, such as
   the local boards of health, county commissioners, mayor,
   city council, state health department, professional
   associations, and mass media
9. Other service agencies of county or cities involved in
   the areas to be studied
10. Political leaders or officeholders of the political units
    involved
11. Planners representing interested agencies

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12. Social scientists who may be used for consultation and
    evaluation

This rather extensive listing of types of leaders and groups
is likely to involve considerable overlap in leadership. Con-
sequently, the actual number of individuals to contact may be
less than is suggested by the listing of types.

*Step Three: Initiating and Legitimizing the Health-Planning
Process*

After the problem is well defined and documented and the
relevant leaders and groups are identified, the next step is to
initiate the problem or need into the community beyond the
original small group who first defined the problem (the need
to study and plan for environmental improvement). The initiating
set or team should normally include two types. First, there
should be those who by virtue of their position and knowledge
can speak authoritatively on the environmental health needs in
the community. A second type may also be needed if the first
type does not stand in close or harmonious relationship to the
top influentials in the community. This type would be those
who have good entrée to the top influentials and who are very
sympathetic to the proposed planning program. In team fashion,
these two could ask for an opportunity to present their pro-
posed program in hierarchical manner to the top influentials
or legitimizers in the community. The basic purpose is to sound
out, seek approval, and ask for suggestions. To fail to ask
these key people to pass judgment before a public announcement
often means failure or a long delay.

The winning of the confidence and support of the legitimizers
is often difficult because of the usual characteristics of such
leaders.[4,5] Typically they are middle aged, from the higher
socioeconomic levels, and conservative in orientation. This
means that they tend to distrust the unknown, the unorthodox,
or the risky ventures. In other words, they will expect to be
shown. Leaders tend to act slowly and will take their time in
making decisions that may result in important and costly changes
in the community. Since they are well aware that new projects
mean money and that this may mean more taxes, they will care-
fully analyze the cost and benefits to the total community and
to themselves. In this analysis a careful statement of the
problem will help.

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Another characteristic of the top influentials is that they
usually are already very busy in community and private affairs.
They are not likely, therefore, to offer active aid in organiz-
ing and developing the program. In the larger communities about
the most the ''initiator'' could expect of a top influential
would be his ''approval'' or perhaps his willingness to act as
a ''front'' by serving on a special citizens committee or
policy committee. While declining more active participation in
the health-planning program, the ''legitimizer'' may suggest
capable young men who are ''leaders on the make.'' Top leaders
often have young men they are watching and grooming for leading
roles in their organization and in the community. These young
men are often looking for new leadership positions that might
serve as a mechanism by which to gain in community prestige.
The young leader's chances are greater if he gains his chance
at the suggestion of one who has the influence and resources
to support him and who has a vested interest in his success.

A few other guidelines are offered to the initiator or the
initiation team as they proceed in seeking the support of
leaders, organizations, and factions.[46] *First*, the proposed
planning program should be defined as noncontroversial by indi-
cating its benefits to all groups. *Second*, an effort should be
made to bridge gaps between important factions by: (a) enlisting
leaders respected by all sides, (b) enlisting support of repre-
sentatives of all sides, and (c) indicating benefits to all
sides. *Third*, the initiators should appear to recruit mass
support through gaining the support of influential and cohesive
organizations in the community. This is often important in
gaining the support or cooperation of government officials.
Fourth, great effort should be expended in gaining the consent
and support of potential sources of opposition. According to
Rossi, ''The most successful community organizers whom I have
encountered were extraordinarily skilled at this prime task and
spent upward of half of their time at it.''[47] *Fifth*, though
health leaders and health programs may become subordina' it
is often wise to make the health-planning program a part of a
larger and popular movement. For example, if industrial devel-
opment is the popular program of the day, the environmental-
health-planning program should be billed as supplementary or
complementary to it. *Sixth*, if the initiation is in the local
public health department, assurance should be sought that the
department has made the necessary preliminary study, evaluation,
and conditioning of personnel to support any lay interest that

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might evolve. *Seventh*, efforts should be made to see that no publicity of plans for a study is made until the legitimization process has been completed. This does not mean, however, that efforts should not be made to increase the public's awareness of the problems in environmental health.

The emphasis upon starting at the top levels of leadership should not be interpreted to mean that movements to improve the environment of a community should always start in the public health department or that nothing should be done without the sanction of the top leadership.

Step Four: Diffusing the Proposal to the Public

The step of educating the public about the need for environmental health planning is an extension of earlier stages. Up to this point, recognition and definition of problems, approval of the planning program, and motivation to act will have involved only a small number of people. This is the point to broaden the base of involvement. If other individuals and groups are to support the cause, they must have the opportunity to be informed and convinced. This is also the point to involve a different type of actor. Earlier, the need was for the informed and socially sensitive to recognize and define the problem as well as to gain approval quietly from a few leaders. The need at this stage is for a different type of salesmanship. Showmanship, zeal, and oratory are required. The diffusion team should include those individuals recognized by the public as "action leaders." This group may involve public-spirited citizens with recognized speaking ability, socially minded ministers, and leaders in mass media. It may or may not include public health personnel or others involved in the earlier stages.

The task of the diffusion group is to lead the public (individuals and organized groups) to recognize and define the need to study and plan for environmental improvement as *their need* and to commit themselves to act. Since it is assumed that during the preceding steps contact has been made with the key influentials, agencies, and organizations, the focus should now be upon the potential voters, potential clients, and lesser organizations.

Many techniques are available for diffusing the need for an environmental health study-planning program as well as for educating the public regarding the need to implement specific projects that might grow out of such a program.[18] Some techniques include the use of a speaker's bureau for civic organiza-

tions, community adult education seminars, self-surveys, health
committees of service and civic clubs, mass media, annual en-
vironmental health week, annual evaluation programs, exploita-
tion of crises, and others.

Step Five: Organizing to Study and Plan

Once the idea that an environmental health survey-planning
program has been sanctioned, the next question is ''What group
or organization should make the study and develop the plans?''
There are three basic approaches to selecting an organization
for study and planning: (1) hire an agency or commercial firm
to conduct the study and make recommendations, (2) assign the
task to an existing community organization, or (3) create a
new organization specifically for the survey-planning program.[49]
Combinations of these methods may be feasible.

If action is the ultimate goal of a community health study-
planning program, the first approach listed is not likely to
be very effective. Research indicates that ineffective studies
usually involve a high proportion of professionals and few
permanent lay citizens.[50] The significance of incorporating
community leaders and other lay citizens into the study-plan-
ning process has been stated this way:

> Probably due, in part, to our particular form of government
> in the United States, lay advisory groups to support official
> agencies have come into wide-spread use. These devices are
> reported to serve varying functions such as: (1) a way of
> getting the layman's point of view structured into official
> plans, (2) a sounding board by which public officials may
> test out plans developed by technical specialists, (3) a
> way of educating the public and gaining public support, (4) a
> way of gaining access to certain professional and technical
> abilities not otherwise available, (5) a means of getting
> coordination between loosely structured political units, and
> (6) a way of bridging gaps between political factions or
> other basic divisions within the community.[51]

Experience in six Georgia[52] communities has led to the con-
clusion that a modification of the second approach works best in
small communities or basically rural counties. That is, the
study-planning process is likely to be more successful if an
established community organization assumes the basic sponsorship
while inviting representation or co-sponsorship from other
organizations, agencies, and groups. This seems to be the best

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method because of the usual absence of paid staff members and
the difficulty of maintaining communications through volunteer
help. In larger communities that can afford a full-time study
coordinator and perhaps paid consultants, the third approach of
creating a new study-planning organization is likely to be more
successful. For guidelines for such an organization designed to
study and plan health services see *A Self-Study Guide For Com-
munity Health Action-Planning, Volume One,* a Report of the
Community Action Studies Project, National Commission on Com-
munity Health Services, Inc., published by The American Public
Health Association, Inc., 1740 Broadway, New York, N.Y., 10019.
For another brief discussion of organization for environmental
health implementation see *Environmental Health Planning Guide*
(Office of Urban Environmental Health Planning, Public Health
Service, U.S. Department of Health, Education, and Welfare,
1967) pp. 85--86. In any case, the involvement of the identified
leaders in the survey and planning process in communities of all
sizes in Georgia, was found to increase greatly the speed and
amount of later implementation of the plans.

It is recommended that social science or community organiza-
tion consultants be used in planning organizational procedure
for maximum implementation.

Step Six: Studying and Planning for Action

Since the Office of Urban Environmental Health Planning has
developed the *Environmental Health Planning Guide* for studying
and planning for improved environmental conditions in communi-
ties, the remarks here will be brief and general.

If action is expected, the most important principle to re-
member is that the study-planning process must go beyond the
usual study-recommendation stage. This principle of the need
to go on to the point of establishing priorities and a plan of
action is shown in a study of the results of 500 community
health surveys:[53]

> This study indicates that there are three conditions usually
> associated with studies which only ''catch dust.'' *First,* the
> ineffective studies usually involved a high proportion of
> professionals and few permanent lay citizens. On visiting
> these communities a large proportion of these highly mobile
> professionals had gone on to other pastures. *Second,* most
> of the ineffective studies only listed conditions, needs,
> and recommendations. They did not develop a priority of
> goals or objectives nor did they lead other groups such as

lay advisory groups to do so. *Third*, these studies seldom
involved the all-important step of developing a plan of
action for carrying out the goals decided upon.

The finding of this ''study of studies'' and other evidence
leads to this conclusion: if any type of community survey is
worth doing at all, it should involve (1) the participation
of lay citizens beginning with the first decision of whether
or not to conduct the study, (2) the establishment of a
priority of goals based upon relative importance and logical
sequence and (3) a plan of action to implement the goals.[54]

A ''plan of action'' usually includes the following com-
ponents:[55]

1. A priority of goals to be reached
2. Means or activities for achieving the goals
3. Provisions for financing activities
4. A time schedule for carrying out activities
5. A division of responsibilities
6. Arrangements for supervision, communication, and coordina-
   tion in carrying out activities
7. Implementation of the plan of action
8. Evaluation of the plan or project
9. Plans for continuation of the study-planning-action-evalua-
   tion program

As lay citizens and professional health personnel work
together in the environmental health study-planning process,
it is well to keep in mind the roles both should play. In modern
complex community planning, the professional and technical
specialists are the primary *creators* of ideas for change that
are usually posed as alternatives for action. Increasingly,
the laymen and their elected representatives play the role of
rejecting, *modifying*, or *accepting* the proposed changes.

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APPENDIX A
INTERVIEW SCHEDULE

Macon, the county seat of Bibb County, is located on the "fall line" 6 miles from the geographical center of Georgia. The third largest city in Georgia, Macon had an estimated population in 1964 of 128,000, while Bibb County as a whole had a population of approximately 145,000. The dominant influence of Macon made it practical for studying community leadership to consider Macon and Bibb County as one unit.

The following interview schedule was designed to aid in the selection of leaders, organizations, and factions to involve in planning an adult community education program for Macon and Bibb County. The same procedures described in this monograph for the identification of leaders, organizations, and factions for health-planning purposes were considered appropriate as a base to involve these units in planning for adult education.

Reconnaissance for Selection of
Leaders, Organizations, and
Factions Macon—Bibb County, 1968

A. Identification

    Date: _____   Interview Number _____

B. Introduction

    Name
    Organization
    Sponsorship
    Purposes
    Confidential   (see interviewer instructions)

C. Interview Schedule

    1. First, would you please name about six or eight persons
    who you think have the most influence on general community
    affairs in the Macon-Bibb County community, regardless of
    whether or not you approve of the way they use their
    influence.

Name	Occupation/Position

    2. What is the main occupation or position of each?

3. Next, would you name two or three persons whom you con-
sider to be the most influential leaders in each of the
following specialized areas? Those already named as general
community leaders may also be named as leaders in special-
ized areas.

4. What is the main occupation or position of each?

Area		Name	Occupation/Position
Business and Industry	1.		
	2.		
	3.		
Politics	1.		
	2.		
	3.		
Education	1.		
	2.		
	3.		
Religion and Morals	1.		
	2.		
	3.		
Communications (Mass Media)	1.		
	2.		
	3.		
Welfare	1.		
	2.		
	3.		
Labor	1.		
	2.		
	3.		

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Area		Name	Occupation/Position
Recreation	1.		
	2.		
	3.		
"Cultural" Affairs	1.		
	2.		
	3.		
Law (Legal Affairs)	1.		
	2.		
	3.		
City or Community Planning	1.		
	2.		
	3.		
Women Leaders	1.		
	2.		
	3.		
Negro Leaders	1.		
	2.		
	3.		
Public Health Programs	1.		
	2.		
	3.		
Medicine	1.		
	2.		
	3.		

5. Name one or more groups or organizations having, in your opinion, influence on what happens in the Macon-Bibb County community.

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6. Would you please rank these organizations from the most influential to the least influential.

Group or Organization	Rating (1, 2, 3, etc.)
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

7. What do you consider to be the basic *factions, cleavages,* or *areas of opposition* in the Macon-Bibb County community?

8. Who is the best person to act as a link between these factions?

Faction	Link
_____	_____
_____	_____
_____	_____
_____	_____

D. Respondent Characteristics

Finally, I would like to ask you some questions about yourself, not to identify you as a person, but to determine the opinions of broad classes of people. (DO NOT ASK FOR INFORMATION ALREADY KNOWN.)

1. Age: _____ 2. Sex: _____ 3. Race: _____

4. What is your main occupation and position (within an organization)?

Occupation	Position/Organization
_____	_____
_____	_____
_____	_____

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5. How many years of education have you completed?

Elementary or High School _____ (number of years)
College _____ (number of years)
Other _____ (number of years)
_____ (what?)

6. Residence: Do you live within the City of Macon _____,
in the suburbs _____, or in the county _____?

7. How long have you lived in Bibb County? _____ number
of years

8. Have you lived here all of your life, except perhaps for
a temporary absence due to military, schooling, etc.?
            Yes____;   No____

9. Do you presently hold any political/governmental office(s)?
            Yes____;   No____

If yes, which one(s)? _____
_____

Elected _____
Appointed _____

F. Sample Introduction

    I am _____ from the University of
Georgia. I am here representing a joint effort among the univer-
sity, your local junior college, and the Greater Macon Chamber of
Commerce. My immediate purpose is to identify a number of gen-
eral community leaders, specialized leaders, and influential
organizations.

    Later a team of faculty and staff members from the univer-
sity and Macon Junior College will come in to interview these
leaders concerning their views of the needs and problems of
Macon and Bibb County.

    Information about these needs and problems will be of use
to your Macon Junior College in developing its adult community
development program. It will also be of use to the Greater Macon
Chamber of Commerce, the Macon-Bibb County Planning Commission,

the Heart of Ger gia Planning and Development Commission, and other leaders in continuing to ''Move Macon'' in your chosen direction. From the university's point of view, we are interested in studying through the eyes of local leaders the needs and problems of the community for the value the information gained will have in helping us understand ''urban problems'' in general. This understanding will aid us in making more realistic our statewide program in urban and community development.

Please keep in mind that the answers you give me are confidential. That is, they will not be connected with your name. Only I will see your answers. From all the responses, I shall prepare a list of the names of leaders who will be asked to discuss the needs and problems of Macon a·d Bibb County with the research team that will visit your community in November.

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APPENDIX B

THE RECONNAISSANCE METHOD OF COMMUNITY STUDY

The procedure suggested in this monograph for determining the influential people in a community has usually been referred to as the *panel and snowball techniques of determining reputational community leadership.* This idea of starting with a few ''knowledgeables'' and asking them who the community leaders are is based upon the assumption that community leaders know more than nonleaders about the individual leadership of the community. This assumption can be extended to the notion that these same people also know more about the specialized leaders, decision-making community organizations, community factions, and links among factions. This of course was the case in this monograph. This idea has been extended still further in what has been referred to as the ''Community Reconnaissance Method.''

Sanders,[56] Nix,[57] and others have used the ''panel'' or ''snowball'' technique, or both, to find general and specialized leaders for the purpose not only of studying and involving leadership but also of using these leaders as interviewees in the study of other dimensions of the community. The studies by Sanders and associates have been published as the Kentucky Community Series by the Bureau of Community Service, University of Kentucky.

A modification of the Sanders' approach has been used at the University of Georgia. This work has led to the *Community Social Analysis Series.* The first three studies in this series (Savannah-Chatham County, Macon-Bibb County, and Augusta-Richmond County)[58] were conducted in support of ''Environmental Health Survey Training Programs'' in these communities. The later volumes of the series on El Pinar, Spain,[59] Athens-Clarke County,[60] and Oglethorpe County[61] were more general in purpose. That is, they were not aimed at the implementation of any specific area of community improvement but at any or all phases of community.

A brief description of the "Community Reconnaissance Method" follows as quoted from the Oglethorpe Study.[61]

THE COMMUNITY RECONNAISSANCE METHOD

Definition

A community social analysis using the "Reconnaissance Method" is a quick, efficient approach to determine certain relevant aspects of the social structure, processes, and needs within a community for the support of community development programs. It is a way of getting the leaders of a community to "talk to themselves," and this report is largely a reflection of the community as seen through the eyes of a sample of its leaders.

Importance

Many good technical studies with sound recommendations are made by professionals from outside the community but remain on the shelf. This condition is less a mystery than it once was. Increasingly, it is realized that physical, economic, educational, governmental, and other recommended technical changes are preceded by changes in the social structure of the community. That is, the present conditions are, in large measure, the result of the prevailing attitudes, values, aspirations, beliefs, behavior, and relationships of the citizens. Hence, the community is not likely to change much except by force or outside pressure unless these elements of the community social structure are changed. How do you change the attitudes, values, aspirations, beliefs, behavior, and relationships of a significant proportion of the citizens of a community? It is well established that this is not an easy task. The starting point, however, in trying to change anything is to determine what it is that one is trying to change. That is, in order for the citizens of Oglethorpe County to change the social structure of their community to obtain other desired goals, they need to understand themselves as they presently exist. This means a careful look at the present social structure and processes of the community.

Purpose

This "community social analysis" is a survey of the parts of the social structure of a community for the basic purpose of promoting local awareness, understanding, initiative, and con-

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trol of the development of Oglethorpe County and its subcom-
munities. The more specific purposes are to determine the fol-
lowing elements of the community structure and processes:

1. Basic attitudes and values
2. Aspirations (felt needs and problems)
3. Present status of community services and facilities
4. Reaction to public issues
5. Social processes (areas of cooperation and conflict)
6. Organizational structure
7. Leadership patterns

An understanding of these elements should aid local leaders
and citizens to:

1. Identify the felt needs and problems of the community
2. Rank the needs and problems of the community
3. Organize or mobilize to deal with chosen needs and problems
4. Study (with the aid of specialists when necessary) the
   needs and determine specific goals or projects
5. Develop a plan of action to accomplish locally determined
   goals
6. Find resources (local, area, state, and national) to deal
   with needs and objectives
7. Act to carry out the plan of action

Method

The method of study is what has been referred to as the
social reconnaissance method. This method involves:

1. *Library research.* This included a survey of newspapers,
census data, local history, special studies, Overall Economical
Development Plan, etc.

2. *Development of an interview schedule.* A preliminary inter-
view was prepared by using certain standard questions and others
derived from the library research and from discussions with
local citizens. This preliminary schedule was submitted to the
directors of the local sponsoring organization for modification.
It was then pretested for clarity, revised again, and prepared
in its final form.

3. *Field interviews.* The approach to the selection of re-
spondents was to prepare a nominating questionnaire on which
members of the countywide Oglethorpe County Civic Club and
Oglethorpe County Jaycees, as well as top positional leaders who
were not members of these organizations, were asked to nominate

two people as the most influential leaders in the county and in
each town and community within the county. They were also asked
to nominate two leaders in each of the following areas or
categories: government, business, civic affairs, women, welfare,
industry, finance, agriculture, education, religion, news media,
Negroes, and health. From those nominated most often, a beginning
list of 50 was derived. Members of the sponsoring organization
contacted each of these persons to explain the purpose and
nature of the study and notify them that a member of the research
class at the university would call soon to make an appointment
for an interview. When the original nominees were interviewed,
they were asked to nominate about six of the most influential
citizens in the county. Those most often nominated were, in turn,
contacted to be interviewed. This process resulted in 74 persons'
being nominated more than one time each. Of these, 69 were inter-
viewed. There were no straight refusals; however, five of those
nominated, or about 7 percent, were not interviewed, because of
illness or of difficulty in scheduling an appropriate time before
the survey period was over.

    4. *Youth interviews.* In addition to the adult leader inter-
views, small group interviews were held with the seniors in both
the Oglethorpe County High School and the Oglethorpe County
Training School.

Report and Follow-up

    In this type of study, the information derived from library
research and field research is tabulated, analyzed, and written
up to be submitted to the local sponsoring group. The report,
as modified by the sponsors, can then be made public through
public meetings and news media as well as by distribution of the
written report. If the reporting is properly performed, inter-
ested citizens can follow through by meeting, identifying and
ranking needs, organizing study groups, bringing in specialists,
determining community goals, finding resources, and taking action
to reach community goals.

APPENDIX C

NOTES AND REFERENCES

1. Robert Presthus, *Men at the Top: A Study in Community Power* (New York: Oxford University Press, 1967), p. 405.

2. William A. Gamson, ''Reputation and Resources in Community Politics,'' *American Journal of Sociology*, LXXII (September, 1966), 30.

3. Frederick L. Bates and A. L. Bacon, ''Community as a Social System: A Theory of Community Structure'' (paper read at the annual Southern Sociological Society meeting, Atlanta, Georgia, 1965), p. 10.

4. *Ibid.*, p. 6.

5. Charles J. Dudley, Harold L. Nix, and Frederick L. Bates, ''Community Power Structure: A Structural Approach'' (paper read at the annual Southern Sociological Society meeting, New Orleans, Louisiana, April, 1966); and Donald J. Shoemaker, ''An Analysis of Community Power Structure Utilizing the Concepts of Exchange and Coordinative Relationships'' (unpublished Master's thesis, The University of Georgia, Athens, 1968), pp. 105-111.

6. Bates and Bacon, *op. cit.*, p. 9.

7. *Ibid.*, p. 5.

8. This statement does not mean that certain political offices are not vested with the authority to control certain types of behavior of members of all groups within their political jurisdiction. However, all members of all groups and organizations in a political jurisdiction are all members of one encompassing group—the ''political'' group.

9. Ronald C. Powers, *Identifying the Community Power Structure* (North Central Regional Extension Publication No. 19. Iowa State University, Ames, Iowa, 1965), pp. 7-8.

10. Harold L. Nix and Charles J. Dudley, *Community Social Analysis of Augusta-Richmond County* (Community Social Analysis No. 3. Institute of Community and Area Development, University of Georgia, Athens, and Georgia Department of Public Health, Atlanta, 1966), p. 32.

11. Harold L. Nix, Jennie McIntyre, and Charles J. Dudley, ''Bases of Leadership: Cultural Ideal and Estimates of Reality,'' *Southwestern Social Science Quarterly,* XLVIII (December, 1967), 423-32

12. Linton C. Freeman, *et al.,* ''Locating Leaders on Local Communities: A Comparison of Some Alternative Approaches,'' *American Sociological Review,* XXVIII (October, 1963), 797-98.

13. *Ibid.*

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15. Floyd Hunter, *Community Power Structure: A Study of Decision Makers* (Chapel Hill: University of North Carolina Press, 1953).

16. Robert A. Dahl, ''A Critique of the Ruling Elite Model,'' *American Political Science Review,* LII (June, 1958), 463-69.

17. Illustrative of these comparative studies are: Freeman, *loc. cit.;* Presthus, *op. cit.,* pp. 421-26; and M. Elaine Burgess, *Negro Leadership in a Southern City* (Chapel Hill: University of North Carolina Press, 1960).

18. Charles M. Bonjean and David M. Olson, ''Community Leadership: Directions of Research,'' *Administrative Science Quarterly,* IX (December, 1964), 289.

19. Harold L. Nix and Charles J. Dudley, *Community Social Analysis of Savannah-Chatham County* (Community Social Analysis No. 1. Institute of Community and Area Development, University of Georgia, Athens, and Georgia Department of Public Health, Atlanta, 1965); Harold L. Nix, *Community Social Analysis of Macon-Bibb County* (Community Social Analysis No. 2. Institute of Community and Area Development, University of Georgia, Athens, and Georgia Department of Public Health, Atlanta, 1966); Harold L. Nix and Charles J. Dudley, *Community Social Analysis of Augusta-Richmond County* (Community Social Analysis No. 3. Institute of Community and Area Development, University of Georgia, Athens, and Georgia Department of Public Health, Atlanta, 1966).

20. Nix and Dudley (No. 3), *op cit.*, pp. 43-44.

21. Roland L. Wa ren, ''Toward a Reformulation of Community Theory,'' *Human Organization*, XV, No. 2 (published by The Society for Applied Anthropology, Summer, 1956), 8-11.

22. Bonjean and Olson, *op. cit.*, pp. 289-95.

23. Ernest A. T. Barth, ''Community Influence Systems: Structure and Change,'' *Social Forces*, XL (October, 1961), 58-63; Robert O. Schulze, ''The Bifurcation of Power in a Satellite City,'' in Morris Janowitz, ed., *Community Political Systems* (Glencoe, Illinois: The Free Press, 1961), pp. 50-53; Bonjean and Olson, *op. cit.*, pp. 294-95.

24. Harold L. Nix, Donald Shoemaker, and Ram Singh, *Community Social Analysis of Oglethorpe County* (Community Social Analysis No. 5. Institute of Community and Area Development, University of Georgia, Athens, and Georgia Department of Public Health, Atlanta, 1967), pp. 36-40.

25. *Ibid.*

26. *Ibid.*

27. Barth, *op. cit.*, pp. 58-63.

28. Bonjean and Olson, *op. cit.*, pp. 280-82.

29. F. Stuart Chapin, *Experimental Designs in Sociological Research* (New York: Harper, 1955).

30. For an evaluation of these various approaches see: Bonjean and Olson, *op. cit.*, pp. 283-87; Freeman, *op. cit.*, pp. 791-98; John Walton,''Substance and Artifact: The current Status on Research of Community Power Structure,'' *American Journal of Sociology*, LXXI (January, 1966), 791-98; Presthus, *op. cit.*, pp. 130-38.

31. Similar approaches to the identification of community leaders are described in: Charles R. Adrian and David A. Booth, ''Simplifying the Discovery of Elites,'' *American Behavioral Scientist*, V (October, 1961), 14-16; Powers, *op. cit.*, pp. 1-11; and Irwin T. Sanders, *Preparing a Community Profile: The Methodology of a Social Reconnaissance* (Kentucky Community Series No. 7. Bureau of Community Services, University of Kentucky, Lexington, 1950).

32. This question may be variously phrased depending upon local usage. Examples are: ''Who are the persons in this community who carry the most weight in community affairs?''

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"Who are the locally powerful people who can get things done or stop local projects?" "Whose approval is usually needed to get the people in this community to accept (or reject) an important change?"

33. Name areas expected to be relevant to the planning process in the community being studied.

34. Nix, Shoemaker, and Singh, *op. cit.*, p. 38.

35. Nix (No. 2), *op. cit.*, pp. 25-26.

36. Robert O. Schulze and Leonard U. Blumberg, "The Determination of Local Power Elites," *American Journal of Sociology*, LX (November, 1957), 290-96.

37. Adrian and Booth, *op. cit.*, pp. 14-16.

38. Hunter, *op. cit.*, pp. 119-22.

39. Charles M. Bonjean, "Community Leadership: A Case Study and Conceptual Refinement," *American Journal of Sociology*, LXVIII (May, 1963), 672-81.

40. Gamson, *op. cit.*, p. 121.

41. See footnote 19.

42. Paul R. Mico, "Design for Research in Community Health Behavior" (paper read to Research Council, American School Health Association, New York, October 3, 1964).

43. For other examples and discussions of the steps in community social action process see: Harold L. Nix and Imogene Dean, "Experimental Neighborhood Health Service Center" (manuscript in process of publication by the Institute of Community and Area Development, University of Georgia, Athens, and Georgia Department of Public Health, Atlanta, 1968); and Stewart G. Case and Carl J. Hoffman, *Spring Boards to Community Action* (Extension Service Pamphlet 18, Colorado State University, Fort Collins, 1964).

44. Although the recognition of the need for planning may occur first outside the community, little is likely to occur until insiders come to recognize and view the problem as their own.

45. David A. Booth, *A Guide to Local Politics* (Institute for Community Development and Services, Michigan State University, 1961), p. 15.

46. For other discussions of guidelines see: Peter H. Rossi, "Theory, Research and Practice in Community Organiza-

tion,'' in Charles R. Adrian, *et al.*, *Social Science and Community Action* (Institute for Community Development and Services, Michigan State University, 1960), pp. 14–15; and Harold L. Nix and Charles J. Dudley (No. 3), *op. cit.*, pp. 48-68.

47. Rossi, *loc. cit.*

48. Nix and Dudley (No. 3), *op. cit.*, pp. 60–62; Case and Hoffman, *op. cit.*, pp. 9 and 17.

49. American Public Health Association, *A Self-Study Guide for Community Health Action-Planning, Vol. I* (A report of the Community Action Studies Project, National Commission on Community Health Services, Inc., 1967; and Charles R. Hoffer, ''Social Action in Community Development,'' *Rural Sociology,* XXIII (March, 1958), 49–51.

50. Paul R. Mico, ''Community Self-Study: Is There a Method to the Madness?'' *Adult Education,* XIII (March, 1965), 288–92.

51. Nix and Dudley (No. 3), *op. cit.*, pp. 58–59.

52. *Ibid.,* pp. 60–62.

53. Mico, *loc. cit.*

54. Nix and Dudley (No. 3), *op. cit.*, p. 52.

55. Harold L. Nix, *Community Planning for Environmental Health* (Institute of Community and Area Development, University of Georgia, Athens, and Georgia Department of Public Health, Atlanta, 1965), p. 5.

56. Irwin T. Sanders, *Preparing a Community Profile: The Methodology of a Social Reconnaissance* (Kentucky Community Series No. 7. Bureau of Community Service, University of Kentucky, Lexington, 1950).

57. Joseph B. Aceves and Wilfred C. Bailey, *Community Social Analysis of El Pinar, Spain* (Community Social Analysis No. 4. Institute of Community and Area Development, University of Georgia, Athens, and Georgia Department of Public Health, Atlanta, 1967); also see footnotes 19 and 24, *supra.,* for citations of numbers 1, 2, 3, and 5 of the Community Social Analysis Series.

58. See footnote No. 19, *supra.*

59. Aceves and Bailey (No. 4), *loc. cit.*

60. Harold L. Nix, Ram N. Singh, et al., *Community Social Analysis of Athens-Clarke County.* (Community Social Analysis

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Series No. 6, Institute of Community and Area Development
a d Department of Sociology and Anthropology, University
of Georgia, Athens, Ga., August 1969).

61. Nix, Shoemaker, and Singh (No. 5), loc. cit.

62. Ibid., pp. 1-4.