Community Development

Cornelia Flora
Iowa State University

Nancy Arnold
University of Montana - Research and Training Center on Disability in Rural Communities

University of Montana Rural Institute
scholarworks-reports@mso.umt.edu

Recommended Citation

Flora, Cornelia; Arnold, Nancy; and Rural Institute, University of Montana, "Community Development" (2012). *Independent Living and Community Participation*. 37.
https://scholarworks.umt.edu/ruralinst_independent_living_community_participation/37

State of the Science Report

Community Development

Cornelia Flora
Iowa State University

Nancy Arnold
The University of Montana

The University of Montana Rural Institute

RTC RURAL

Research and Training Center on Disability in Rural Communities

Our physical communities – the places we live and the people with whom we live – shape our lives. Often, our communities choose us; we are born into them, and we simply stay because it is what we know. Some get to choose or create their community. Others choose or are forced to leave.

Rural communities differ widely in their economic base, culture values and practices, and social structure (Flora, 1992). The rural economy influences the opportunities with which we are presented, which in turn influences whether we leave or whether we stay. But the economy and jobs are not the only factors. A community's other resources such as social infrastructure, physical infrastructure, and governmental bodies build a community's narrative. That narrative, the story we tell ourselves and each other about why we do what we do, is central to our experience of community. These forces also influence who stays, who returns, or who moves to a rural community (von Reichert, Cromartie, & Gibbs, 2009). Communities that create an environment where all can maximize their potential, which remove structural and social barriers to participation, enhance their ability to keep and attract residents of all abilities.

Those who live in rural communities face continuing tensions between preserving a community's heritage and adapting to circumstances shaped by global forces; between exploiting resources in a way that treats the community as disposable or regulating them in a manner that supports and sustains the community; and between open and inclusive processes or closed and discriminatory practices. While communities never proclaim themselves unwelcoming to people with different abilities, many in fact present a very unwelcoming structure.

What is Community?

Community is the interaction among individuals for mutual support. Communities can be of interest or of place. While communities of interest are critical in impacting the policy environment in which we all live, communities of place provide the relationships, infrastructure, and the cultural setting that can allow each individual to meet his or her potential or which constrains the options available to individuals and families. Often communities are organized in ways that make life easier for those with resources but implicitly exclude those with few resources and those who are different. Community development provides a way to increase social inclusion, particularly for people with disabilities.

What is Community Development?

Community development (CD) is the process of increasing quality of life, ecosystem health, and economic security for ALL residents of a geographic area. Green and Haines (2008, p.7) define community development as "planned effort to build assets that increase the capacity of residents to improve their quality of life." These assets include multiple forms of community capital: natural, cultural, human, social, political, financial, and built (Flora & Flora, 2008). Community development is different from economic development or economic growth, which focuses only on financial and built capital often to the detriment of the other community capitals.

CD focuses on creating a healthy ecosystem where all people can thrive and includes opportunities for all residents to participate in their activities of choice. A community's ecosystem includes the geographic community of people, the individual species of flora and fauna, and all non-living factors with which they interact. A community's ecosystem can enhance or poison a geographical community. For example, the ecosystem of a community can cause impairments and diseases that

lead to disability as when water contamination poisons community residents. Similarly, the organization of a community can exacerbate disability as when its economy fails to provide employment opportunities. Alternatively, the design of a community can reduce disability as when city infrastructure creates access to places in a way that facilitates participation.

MODELS OF COMMUNITY DEVELOPMENT

The overall aim [of community development] is to work together in a situation in which everyone believes that her or his values are respected in the process of striving to reach outcomes that are a benefit to all (Archer et al., 1984).

Academics, policy makers, researchers, and community development practitioners use many models of community development, self-help, government planning, and social capital (e.g., Bullen, 2007). This paper discusses two fundamental models of community development that are particularly relevant: the Community Capitals Framework and the Community Empowerment model.

Historically, most rural community development focused on agricultural and industrial development. The Morrill Acts of 1862 and 1890 established the system of land grant colleges and the agricultural extension service. Among the 70 colleges and universities that evolved from the Morrill Acts are several of today's historically Black colleges and universities. Congress later recognized the need to disseminate the knowledge gained at the land-grant colleges to farmers and homemakers. The Smith-Lever Act of 1914 started federal funding of cooperative extension, with the land-grant universities' agents being sent to virtually every county of every state. Internationally, rural development has roots in colonialism (McNeely, 1999) but took a turn toward a philosophy of sustainability in the 1970s (Schumacher, 1973). Today, these trends

have merged into a community capitals approach to achieving the Triple Bottom Line (Elkington, 1998).

Community Capitals Framework

Community Capitals Framework is an approach to analyze how communities work (Flora & Flora, 2008). It was developed after studying the characteristics of sustainable communities. Community Capitals Framework provides both a theory of the basic structural elements of community and implementing mechanisms. These mechanisms include new governance processes and community organizing.

The concept of *community capitals* presents a way of understanding how assets are mobilized to achieve community development goals. Typically we associate the term capital with business and financial investments, but capital can come in many forms. The most fundamental definition of capital is a resource or asset that can be used, invested, or exchanged to create new resources. There are stocks and flows of community capitals. With more than 30 years of applying the Community Capitals Framework in the field, researchers have identified seven capitals that make sense to local people and help them understand how to work within their community. The researchers designated the capitals as natural, cultural, human, social, political, financial and built (Flora & Flora, 2008). They observed that the communities that were most successful in supporting healthy, sustainable community and economic development addressed these seven types of capital in their community development process. Based on their findings, the researchers and field-based specialists developed a workbook to assist communities in planning, strategizing, and monitoring community development projects.

The capitals can be conceived as a variety of bank accounts to store strengths, skills, opportunities, and other kinds of resources. Such a bank might offer seven types of capital accounts, making the assets in each available

to the community. These assets can be wisely invested, combined, and exchanged to create more community resources. But they can also be squandered or hoarded if the community doesn't use them wisely.

The Community Capitals Framework is used to identify the diverse resources and activities that make up a local economy, social system, and ecosystem. It provides a systematic framework for identifying asset flows and opportunities to recombine assets to be more inclusive of all community members and to enhance their access to capitals within a community. It also assists with mobilizing a community's resources to address a variety of issues and to expand options for responding to changes in ways that enhance the quality of life for all community residents.

Natural capital. This is the environmental account. It includes the resources that exist in the natural world: the soil, water supply, natural resources, nature's beauty, etc. We work with these resources to produce food, and we depend on them for our quality of life. Often disabilities separate people from natural capital, yet increasing access and seeing natural capital from the perspective of people with disabilities can enhance quality of life for all community residents.

Cultural capital. This is the account for our cultural resources. As our way of viewing the world, culture defines our traditional ways of doing and being. It is our habits and attitudes. It includes dances, stories, food and traditions, and also our values and spiritual beliefs. We draw upon this capital to bring unity and to guide our youth. Cultural capital is also a resource to attract tourism. However, hegemonic cultural capital – when the world view of those with power dominates – the cultural capital of excluded people, including residents with disabilities is undervalued and demeaned. Often the first thing that must change in a community to be more inclusive of people with disabilities is cultural capital, redefining the skills and abilities and wisdom their life experience brings to the community.

Human capital. Narayan defined human capital as "the norms and social relations embedded in the social structures of society that enable people to coordinate action and to achieve desired goals" (1999, p. 6). This is the human resource "people" account. It includes leadership capabilities, knowledge, wisdom, information, and skills possessed by the people who live in the community. Often the human capital of people with disabilities is ignored. Community development's focus on financial security as a kind of community development makes it possible for all to use their best capabilities to earn a living with dignity. It also means providing the support within the community to link people to income generation opportunities.

Social capital. This is the networking account. It includes the close bonds between and among family and friends, the people we know and depend on for starting a new business or dealing with a loss. It also includes our loose ties to other resources of people and organizations, such as someone we know in a government office who can help us understand the system. Social capital has been consistently used by the World Bank as a key to poverty reduction (Narayan, 1999). A great deal of the research on social capital examines its presence and impact on individuals, and thus tends to view community social capital as the sum of each individual's norms and social relations. In contrast, the Community Capitals Framework uses social capital as a characteristic of social structures, such as communities and organizations, which can be more – or less – than the sum of the stock of social capital of each individual within that community or organization. As people with disabilities tend to be disproportionately poor and excluded from social networks, their voices are seldom heard as community development is discussed and implemented. Both bridging and bonding social capital are critical in enhancing community inclusion for residents with disabilities.

Political capital. This is the ability to move a community's norms and values into standards, rules, and regulations that determine, among other things, the distribution of and access to all the other capitals. This account represents power and our connections to the people who have power. We draw upon this resource when we unite to solve a controversial issue. We build political capital by making connections with political and community leaders both inside and outside our community. Social movements are a critical part of changing dominant standards, rules and regulations, norms, and values to include consideration of people with disabilities.

Financial capital. This includes the resources related to money and access to funding such as savings, credit, grants, tax revenue, etc. Financial capital to enhance the other capitals can be internally generated or come via nongovernmental organizations (NGOs) or the Federal government, often through pass-through funds to state or local governments. Financial capital earned by and paid to people with disabilities is critical to community financial capital, as people with disabilities tend to spend their money locally to provide food, shelter, and transportation. But people with disabilities can combine financial capital with other capitals to provide key goods and services to the community, while generating personal income and employment for others.

Built capital. This is the building and infrastructure account. It includes houses, schools, businesses, clinics, libraries, water systems, electrical grid, communication systems, roads, transportation systems, etc., and makes them accessible to all, including accommodation for people with disabilities that helps include them in the community.

Community Governance

The Community Capitals Framework embraces the principles for the new governance of regional natural resources developed by Lockwood, Davidson, Curtis, Stratford, and Griffith (2010) and applies it to the community development process.

In this model governance moves beyond government programs and requires collaborative approaches. It is multi-level and cross-sectional. The eight principles of governance are described below.

1. Legitimacy refers to the validity of authority to govern, which is conferred by democratic stature but earned through community acceptance. Subsidiarity, where power is devolved to the lowest level at which it can be exercised effectively, is a critical piece of governance. This is critical so that the local circumstance of people with disabilities can be taken into account and integrated into positive actions for change.

2. Transparency refers to the visibility of the decision-making processes, how clearly the reasoning behind decisions is communicated and having information readily-available about who made the decision, how the decision was reached, and how the decision was justified. When there is transparency, attention is paid to the assets and opportunities for people with disabilities.

3. Accountability refers to allocating and accepting responsibility for decisions and actions, with demonstration of whether and how these responsibilities have been met. When people with disabilities are part of governance, they often are allocated the responsibility for others with disabilities.

4. Inclusiveness refers to opportunities for stakeholders to participate in and influence decision-making processes and actions. Providing opportunities for participation impacts when and where meetings are held: Are they handicapped accessible? Is transportation provided for those with limited mobility? Are there interpreters for those with difficulties hearing? Inclusiveness means careful consideration of how information is shared, including attention to language and the technology used. People with disabilities can only give input when they are thoroughly aware of the decisions under consideration.

5. Fairness refers to the respect and attention given to the views of all stakeholders, consistency and absence of personal bias in decision-making, and consideration given to distributing costs and benefits decisions.

6. Integration refers to connections and coordination across and between different governance levels, organizations at the same level of governance, and alignment of priorities, plans and activities. For example, social service agencies and public works agencies coordinate on how to make places and information accessible.

7. Capability refers to the ability to effectively deliver on responsibilities including attention paid to and by systems and knowledge management, collective experiences, and the skills, leadership and knowledge of all community residents. The capability of people with disabilities is often overlooked. Instead, they are defined by their limitations.

8. Adaptability refers to incorporating new knowledge and learning into decision-making and implementation; anticipating future conditions, opportunities, and risks; utilizing collective reflection; and rearranging internal processes and procedures in response to internal and external change. When the insights of people with disabilities are not included, the adaptability of the entire community is decreased.

Community Capitals and People with Disabilities

For people with disabilities, community development may be much more than assuring services are provided to them through or maintaining the jobs created through local social service agencies in a community. Community development is a process of participating in community life. It provides a mechanism people with disabilities can use to influence the arrangement of

community structures and the use of its capitals in ways that promote participation in all its elements.

In times of the perception of shrinking financial resources, it is critical that people who use the services provided by social services agencies and who typically are thought of as marginal or dependent are viewed as community assets, not just recipients of public programs. People with disabilities are sources of community capitals and should use those capitals as participants in a community development process. When communities include people with disabilities, the whole community benefits. In particular, political, built, and cultural capital that is accepting and supportive of difference allows everyone to live better. The perspectives on community that people with a variety of disabilities bring to the table can give a fuller picture of the assets a community has and how they can be recombined and invested in to make the community even better for all residents.

Although community developers and planners may be aware of physical access problems that impact the mobility of people with disabilities, there is much less accommodation in community development for the hidden disabilities that include mental health. Due to a crisis in the availability of mental health care in most rural areas, residents are not able to fully utilize their potential in providing for themselves, their families, and their community. Part of community development must include acknowledging mental health as problem of disease, not character, and seeking collective ways to provide support and access to treatment. Perhaps one of the greatest obstacles to effectively dealing with mental illness in rural areas is cultural capital: "Why doesn't Leonard just pull himself together?" Communities that educate each other about mental illness can help remove the stigma that keeps people with this disability from participating in building a strong community. Social inclusion improves the health of all members of a community.

Community Capitals Approach to Achieving the Triple Bottom Line

The *triple bottom line* means that development efforts – public or private – should be held accountable for more than a financial bottom line. Rather, there are three intertwined bottom lines: profit and loss, social benefits and harm, and environmental consequences. The triple bottom line (TBL) thus consists of three Ps: profit, people, and planet. In this framework, the proper goal is sustainability. This requires measurements of outcomes over time because, what you measure is what you get.

These ideas have grown out of development efforts around the globe, including development failures and successes. Failures include the indiscriminate logging of the Amazon basin, the excessive use of hydrocarbons and the exploitation of cheap labor in China, and the lack of regulation of labor and environment in other places. Successes include such large scale efforts as *fair trade* and small scale community development efforts such as in Kalamazoo, Michigan and, in the disability community, Castledale, Utah (Ipsen, Seekins, Arnold, & Kraync, 2006).

A Brief Tour of the Triple Bottom Line and Disability

Community residents with disabilities continue to be assets to communities and to contribute to achieving a positive triple bottom line – economic security, social inclusion, and healthy ecosystem – as they invest their stocks of the seven capitals to create new capital flows, making the capitals cumulative rather than competitive. As a result of the participation and inclusion of people with disabilities, the community as a whole can become more sustainable and more resilient, and wealth creation can occur.

People with disabilities can have an awareness and appreciation of **natural capital** in terms of its sounds, smells, and views.

Those who wheel or use a white cane along trails, sidewalks, and paths can appreciate aspects of natural capital the same as others if given the chance. In turn, that appreciation can be included in community-based tourism activities, increasing the social and economic values of place that others might take for granted. Attention to the texture of soil, the taste of water, the sounds of bird songs, can contribute to efforts to monitor ecosystem changes to encourage action to improve ecosystem health. And making others aware of these can bring new people to town for longer, more enjoyable periods of time.

Cultural capital translates natural and human capital into appreciation and action. Cultural capital that appreciates the assets of all its citizens allows new actors and new ideas to contribute to wealth creation.

People with disabilities can contribute powerful **human capital** to community efforts to enhance the triple bottom line. Their individual potentials, skills, knowledge, self-efficacy, and leadership – often overlooked – can make a positive contribution to the environment, the economy, and equity. The experience and insights gained from being in society from a different vantage point expands the range of possibilities for an improved triple bottom line.

Not only is the bonding **social capital** of people with disabilities who organize in their own interests critical in building welcoming communities, but the bridging social capital they bring through their participation in groups outside the community on a regional, state, and national level is also critical. And by enhancing community social capital through equitable inclusion of people with disabilities, the support system for everyone in the community – true social inclusion – is improved.

People with disabilities can enhance community **political capital** through making clear the norms and values that inadvertently exclude those who are not "able" and in identifying the key points where changes must

occur. By providing input on implementing and enforcing existing rules and regulations or by helping to develop and implement new ones, people with disabilities have the ability to make their voices heard and to achieve outcomes. By listening and acting on those recommendations, communities can improve their collective decision making and their ability to influence policies that hurt the environment, people, and economic security.

Although people with disabilities are less likely to have large amounts of **financial capital** than others in the community, they do earn and spend money. By determining to buy at establishments that contribute to the triple bottom line, they can encourage other residents to follow their example and enhance the community's triple bottom line. And by being a community that is attentive to the special needs and assets of disabled people, tourists and innovators find a welcoming place to invest.

Built capital is often equated with creating wealth. What is often forgotten in built capital investments is the need to consider them as *stacked* (i.e., they often contribute to more than one community capital and collective goal). For example, curb cuts that make it easy for wheel chairs also make it easier for tourists to wheel their suitcases. Trails that accommodate adapted bicycles can attract families for a trail-ride vacation. Infrastructure that accommodates people with special needs ultimately serves everyone.

The triple bottom line for community development means awareness of ecosystem health, and monitoring it. It means concern for economic security and wealth creation, especially for low net-worth individuals. And, because it by its nature fosters social inclusion, it greatly expands the resources available for wealth creation, wealth that will stick in the local community.

Community Empowerment

Another approach to community development is based on exchange theories of political science (Ostram, 1998; Parenti, 1970; Waldman, 1972) and theories of community empowerment (Rappaport, 1995). These theories have been applied to issues of community health and development (Fawcett et al., 1995), mental health (Nelson, Lord, & J. Ochocka, 2001), poverty (Alinsky, 1946, 1971), and disability (ADAPT). They have been used as a tool for organizational management in public and private settings (Campbell & Martinko, 1998) and extensively in rural development in the United States (Muarry & Dunn, 1995) and internationally (Burkey, 1993). These theories are also related to the recent emergence of participatory action research (Whyte, 1991) and community based participatory research in health, medicine, and education (Fox, 1991).

Generally, empowerment techniques involve a facilitator who structures a setting in a way that allows the participants to identify the issues that are important to them, set goals for action, determine acceptable approaches, and establish the criteria for judging success. For example, Alinsky (1971) worked for social justice around issues of race, housing, and other issues identified through the passion of community members. In the United States, the Industrial Areas Foundation (IAF) follows this tradition of organizing and achieving change through identifying people's passions. The IAF has 59 affiliates in 21 states, Canada, the United Kingdom, Germany, and Australia. It typically works within a community by identifying and conducting meetings to hear people's concerns about an issue. Individuals are invited to participate through contacts with society's third sector (e.g., voluntary institutions such as churches, labor locals, parent associations, and homeowner groups). IAF develops teams to research facts and develop possible solutions. It also conducts leadership training and personal development so community individuals can represent their issues and achieve their desired outcomes.

For example, in central Iowa, AMOS, the IAF affiliate, worked with community members upset about the lack of access to mental health. A facilitator organized community discussions at which local residents told stories of their inability to hold a job because of severe depression or other mental health disabilities, and their inability to find treatment to help them manage their disability. Others told of sons, husbands, daughters, and wives that committed suicide for lack of access to treatment. Others told about their children or nephews suffering from mental illness who were incarcerated because they could not function and received no treatment in the Iowa jails and prisons. These stories influenced group members to become both emotionally involved and determined to do something. As a result, a Mental Health Care Team was formed to address issues that create barriers to effective mental health and addiction services in central Iowa. Their two main goals are to remove the stigma associated with mental illness and addiction and to improve access to care for those who need it. NAMI Iowa (a not-for-profit Alliance for the Mentally Ill of Iowa) joined AMOS as an institutional member.

AMOS also formed a mental health care research group to find out what was being done about the issue in their area, their state, nationally, and internationally. The researchers included those with mental health disabilities, who had insights in terms of what to look for in institutions, laws, rules, and regulations. The research included finding out who had power to influence access to mental health care in that area. A major medical center in the local area had the potential to deliver mental health care, and the team met with its board of trustees. After that meeting, two members of the team ran to serve on the board of trustees.

Next, an AMOS team facilitated a Community Conversation with providers of mental and addiction services and a powerful Iowa Senator to preview his legislative agenda related to that issue. During their Fall Issue

Assembly they developed a public agreement with the senator to work together to integrate mental health services into the Iowa Department of Public Health. The team next facilitated a second Community Conversation with two medical doctors who train providers on a Comprehensive Continuous Integrated Systems of Care. This was followed by individual meetings with local health care leaders to listen to their perceptions of the gaps, barriers, and priorities in the mental health and addiction service system. These Community Conversation were used to develop a legislative agenda. A fact sheet was then prepared and widely circulated to stimulate further community conversations.

In the United Kingdom, the independent consultancy and developer *Changes* uses a variation of this same approach for empowered and empowering communities, agencies, and citizens. In their approach, the employees of government agencies are seen as potential allies of excluded people, including people with disabilities, but who lack the power within their organization to do what they know will be more inclusive. One way they work is to convene the excluded people to help them form a group that goes through a ten step process:

1) Develop the passion to want to influence
2) Know why you want influence
3. Be willing to have a goal to influence
4) Know what you want to change
5) Be organized to influence
6) Know the political landscape
7) Know who to influence
8) Link with others to influence
9) Know how to influence
10) Influence

Each step has an indicator, and the *Changes* staff have found that working in this order is extremely important. They view their approach as a journey from internal anger to external action, forming groups and giving them a framework for action.

Future trends

Currently there are pressures for communities to focus on economic development and ignore community development. This is due to the recent financial crisis, which pushed more and more responsibility onto local communities while limiting their ability to raise the revenue to fulfill their responsibilities. It also is because many hold the assumption that paying attention to issues other than the accumulation of financial wealth is a form of socialism. In reality, these situations argue for implementing community development activities, which then will identify the need for and pave the way for economic development.

Recommendations for research, programs, training

There is a need to identify communities that are Positive Deviants (i.e., those communities who, despite a larger context of wrong institutions, wrong processes and societal pressure to ignore people with disabilities or label them as a burden, accept and celebrate their presence, and recognize and seek to improve their access to the capitals already in the community). By doing this the positive deviant communities are investing in those capitals to increase their stocks and flows for the benefit of the entire community. The purpose of identifying those communities is to document what works in these communities to make them inclusive and measure the costs and benefits involved in their inclusive approach. This is the first step toward developing a menu of strategies that other communities can adapt to better serve the needs of all their residents.

There are two paths that those concerned about the inclusion of people with disabilities in communities can take. The first is participation in ongoing community development efforts to keep everyone aware of the assets that people with disabilities provide for community development and why

community development approaches need to include them. The second path, which can be followed simultaneously, identifies the barriers that exist to inclusion of people with disabilities in the community and brings together people with a passion to change the situation. Training for each type of organizing can provide people with disabilities and their advocates the tools necessary for positive community change.

This review suggests several concrete steps for NIDRR's future research and knowledge translation activities for rural disability and rehabilitation.

1) Expand the number of and develop projects that use community development and ecological models for conducting research and knowledge translation.

2) Sponsor research to identify communities that are Positive Deviants (i.e., those communities who, despite a larger context of wrong institutions, wrong processes and societal pressure to ignore people with disabilities or label them as a burden, accept and celebrate their presence, and recognize and seek to improve their access to the capitals already in the community).

3) Conduct research to replicate the World Bank Model of poverty reduction to test its ability to reduce disability and increase participation.

4) Sponsor research to develop community readiness instruments for community disability issues.

5) Explore knowledge translation of established community development practices that includes disability and rehabilitation.

6) Conduct a systematic review of community development and disability literature to identify evidence-based practices.

7) Sponsor a summit on community development and disability.

8) Assess the value added contribution of accessible communities to promoting economic activity.

9) Explore cost effective approaches to ensuring community infrastructure is designed and built with access in mind (i.e., universal design).

10) Develop an access monitoring program that parallels the ASCE model of infrastructure assessment, reporting, and advocacy.

11) Engage disability agencies in leadership development, both as provider and recipients, to build human capital.

References

Aigner, S. M., Raymond, V. J., & Tirimizi, S. N. (2001). *Empowering Rural Communities: A Perspective After Five-Years.* The Empowerment Zone/Enterprise Community Initiative Research Project. North Central Regional Center for Rural Development.

Alinsky, S. D. (1946). *Reveille for Radicals.* Chicago: University of Chicago Press.

Alinsky, S. D. (1971). *Rules for Radicals*. New York: Random House.

Archer, S. E., Kelly, C. D., & Bisch, S. A. (1984). Planning and Change Processes. *Implementing Change in Communities: A Collaborative Process* (pp. 21-50). St. Louis: The C.V. Mosby Company.

Ayres, J. (1996). Essential Elements of Strategic Visioning. In Norman Walzer (Ed.), *Community Strategic Visioning Programs* (pp. 21-36). Westport, CT: Praeger Publishers.

Blakely, E. J., & Bradwhaw, T. K. (2002). *Planning Local Economic Development, Theory and Practice* (3rd Edition). Thousand Oaks, CA: Sage Publications.

Brooks, M. P. (2002). *Planning Theory for Practitioners.* Chicago, IL: Planners Press, American Planning Association.

Burkey, S. (1993). *People First: A Guide to Self-Reliant Participatory Rural Development*. Atlantic Highlands, NJ: Zed Books Ltd.

Campbell, C. R., & Martinko, M. J. (1998). An Integrative Attributional Perspective of Empowerment and Learned Helplessness: A Multimethod Field Study. *Journal of Management, 24*, 173.

Christenson, J. A. (1989). Themes of Community Development. In J. A. Christenson & J. W. Robinson, Jr. (Eds.), *Community Development in Perspective* (pp. 26-47). Ames: Iowa State University Press.

Development Training Institute. (2001). Timeline: A History of Community Development Policy in America.

Drabenstott, M. (2006). Rethinking Federal Policy for Regional Economic Development (First Quarter 2006). *Federal Reserve Bank of Kansas City, Economic Review*.

Elkington, J. (1998). *Cannibals with Forks: the Triple Bottom Line of 21st Century Business.* Oxford: Capstone Publishing.

Emery, M., Fey, S., & Flora, C. (2006). Using community capitals to develop assets for positive community change. *CD Practice, 13.* Retrieved May 21, 2011, from http://www.comm-dev.org/commdev/collection/2006%2013.pdf

Fawcett, S. B., Paine-Andrews, A., Francisco, V. T., Schultz, J. A., Richter, K. P., Lewis, R. K., . . . Fisher, J. L. (1995, October). Using empowerment theory in collaborative partnerships for community health and development. *American Journal of Community Psychology, 23*(5), 677-97. doi: 10.1007/BF02506987

Flora, C. B. (1992). Rural communities: Legacy and change. Boulder, CO: Westview Press.

Flora, C., & Flora, J. (2008), *Rural Communities, Legacy + Change* (3rd Edition). Boulder, CO: Westview Press.

Flora, J. L., Sharp, J., & Flora, C. (1997).

Entrepreneurial social infrastructure and locally initiated economic development in the nonmetropolitan United States. *The Sociological Quarterly, 38*, 623-645.

Fox, K. J. (1991). The Politics of Prevention: Ethnographers Combat AIDS Among Drug Uses. In Ethnography Unbound edited by Michael Buraway et al. (pp. 227-249). Berkeley: University of California Press.

Gilchrist, A. (2009). *The well-connected community: A networking approach to community development.* Great Britain: The Policy Press.

Green, L., & Kreuter, M. (2005). *Health Promotion Planning: An Educational and Ecological Approach* (4th Ed.) [from the Community Toolbox]. Mountain View, CA: Mayfield Publishers.

Green, G. P., & Haines, A. (2002). *Asset Building and Community Development*. Thousand Oaks, CA: Sage Publications.

Green, G. P., & Haines, A. (2008). *Asset building and community development second edition*. Thousand Oaks, CA: Sage Publications.

International Institute for Sustainable Development. (2000). *Appreciative Inquiry and Community Development*. Retrieved May 21, 2011, from http://www.iisd.org/ai/

Ipsen, C., Seekins, T., Arnold, N., & Kraync, K. (2006). A citizen led program for rural community economic development: Two case studies. *Journal of the Community Development Society 37*(3), 53-69.

Klaas Nijhuis, & Rivera, J. (2003). New Hampshire Manufactured Home Park Project, School of Community Economic Development. Southern New Hampshire University, 2003 National CED Symposium Proceedings.

Lockwood, M., Davidson, J., Curtis, A., Stratford, E., & Griffith, R. (2010). Governance Principles for Natural Resource Management, *Society & Natural Resources, 23* (10), 986-1001.

McNeely, J. (1999). Community building. *Journal of Community Psychology, 27*(6), 741-750.

Murray, M., & Dunn, L. (1995, January). Capacity building for rural development in the United States. *Journal of Rural Studies*, *11*(1), 89-97.

Narayan, D. (1999). Bonds and Bridges—Social Capital and Poverty (Poverty Research Working Paper No. 2167). Washington, DC: World Bank.

Nelson, G., Lord, J., & Ochocka, J. (2001). *Shifting the paradigm in community mental health: towards empowerment and community.* Toronto: University of Toronto Press.

Ostrom, E. (1998, March). A behavioral approach to the rational choice theory of collective action: Presidential address, American Political Science Association, 1997. *The American Political Science Review, 92*(1), 1-22.

Participatory action research. (1991). In Whyte, William Foote (Ed.). Newbury Park, CA: Sage Publications.

Pigg, K. E., & Bradshaw. T. K. (2003). Catalytic Community Development: A Theory of Practice for Changing Rural Society. In Brown, D. L. and L. E. Swanson (Eds.), *Challenges for Rural America in the Twenty-First Century* (pp. 385-396). University Park: Pennsylvania State University Press.

Ravesloot, C. H., Seekins, T., Cahill, T., Lindgren, S., Nary, D. E., & White, G. (2007). Health promotion for people with disabilities: development and evaluation of the Living Well with a Disability program. *Health Education Research, 22*, 522-531.

Rappaport, J. (1995). Empowerment Meets Narrative: Listening to Stories and Creating Settings. *American Journal of Community Psychology*, *23*(5), 795-807.

Reichert, C. von, Cromartie, J., & Gibbs, R. (2009). Counterstream Migration to Geographically Disadvantaged Rural Counties. Papers from the Annual Meeting of the Association of American Geographers.

Savitz, L. A. W., & Weber, K. (2006). *The Triple Bottom Line: How Today's Best-Run Companies Are Achieving Economic, Social and Environmental Success—and How You Can Too.* San Francisco, CA: Jossey-Bass.

Schumacher, E.F. (1973). *Small to beautiful: Economies as if people mattered.* New York: Harper and Row.

Standford, Laura (2008). Social Exchange theories. In L. A. Baxter & D. O. Braithwaite (Eds.), *Engaging theories in interpersonal communication: Multiple perspectives* (pp.377-389). Thousand Oaks: Sage Publications.

Willard, B. (2002). *The Sustainability Advantage: Seven Business Case Benefits of a Triple Bottom Line*. British Columbia: New Society Publishers.

Resources

Journal of Community Development Society

Bowling Alone

Small is Beautiful

Community Tool Box