Disputes involving two or more groups or organizations in a community have been very much in the news and on the minds of Americans in the last 15-20 years. Such confrontation as the lunch counter sit-ins of the early 1960s, Birmingham, Selma, Watts, Chicago, Detroit, Newark, Ocean Hill-Brownsville, the 1968 and 1972 political conventions, and Wounded Knee have signaled the politicization of grass-roots groups aiming to wrest their share of the power and resources away from politicians, lawyers, bureaucrats, and other professionals.

Attempts to intervene in community disputes have grown accordingly, with a variety of goals on the part of intervenors, and with a wide range of outcomes of intervention. Since the mid-1960s we have intervened in numerous such disputes, and more recently we have been studying them on a national basis and monitoring the emergence of the new field of "community conflict resolution." Our aim, through the Community Conflict Resolution Program at the University of Missouri-St. Louis and the Office of Environmental Mediation at the University of Washington, has been to develop a language, a network of intervenors, and an awareness of the ethical implications of their work on the part of intervenors.

In this chapter we first define community disputes and present a composite case of a typical dispute. Then we turn to the development of a
The nature and problems of the intervener role are most frequently seen in community disputes—the mediator—then are analyzed.

In the concluding sections of the chapter, we outline the basic assumptions, values, and criteria of a system of ethics for intervention in community disputes. These criteria are applied to case vignettes drawn from our studies of disputes. Finally the system is summarized in the light of common problems facing intervenors and the groups with whom they work.

Proportional empowerment, justice, and freedom are the root values of the ethics we propose. Because the issue in all community disputes is each interest group's ability to advocate its own needs, power becomes the central reality. Unless all parties to a dispute have some negotiable power, joint determination of the outcome is impossible. This chapter is aimed at developing the implications of this position for intervenors in community disputes in the light of the questions of target group participation and intervention consequences posed in the Introduction to this book.

COMMUNITY DISPUTES: A DEFINITION AND A TYPICAL CASE

Community disputes are a form of social conflict. Lewis Coser's (1968) widely accepted definition of social conflict is:

a struggle over values and claims to scarce status, power, and resources in which the aims of the opponents are to neutralize, injure or eliminate their rivals. Such conflicts may take place between individuals, between collectivities or between individuals and collectivities (p. 232)."¹

Community disputes are a form of social conflict having the following characteristics:

1. They involve two or more parties.
2. These parties have differing goals.
3. These goals relate to mutually salient issues.
4. The disputes occur at and between differing system levels.
5. They are of varying intensity and duration.
6. They result in widely varying kinds of termination.

¹Other recent works on social conflict that have been valuable in providing a basis for development of the concepts of community conflict intervention include Angell (1965), Barnard (1957), Boulding (1962), Brickman (1974), Coleman (1957), Deutsch (1973), Kahn and Boulding (1964), Kramer and Specht (1969), Kriesberg (1973), Mack and Snyder (1957), Walton and McKersie (1965), and Williams (1947, 1972).

Each community dispute represents a particular combination of these dimensions. Community disputes emerge when traditional mechanisms of social control such as ideology, media, laws, custom, police, or religion no longer adequately keep national interest-group competition in equilibrium. Equilibrium—often called “community stability” or even “peace”—is maintained as long as two crucial conditions are met:

Power (the control over decisions about allocation of resources) is perceived as legitimate by sufficiently large numbers of persons in the system.

Resources (goods, services, jobs, facilities, land, etc.) are defined as adequate and their distribution as equitable.

The everyday life style of communities and their institutions may be characterized in terms of these two conditions as falling somewhere along a continuum that ranges from cooperation to crisis:

COOPERATION ↔ COMPETITION ↔ CONFLICT ↔ CRISIS

When power is seen as legitimate and resources as adequate, cooperation is the dominant mode of interaction. When the legitimacy of established authority and the adequacy of existing resources or the equity of their allocation are questioned, competition exists. Conflict represents intensified competition, of which large proportions of the system members affected are aware. It arises when the existing power arrangements are seen as non-legitimate and resource allocation as inadequate. Crisis occurs when the holders of power (“in parties”) being challenged by subordinate groups (“out parties”) define the situation as serious enough to take new and unusual action to avoid or minimize what they perceive to be severe costs (see Cormick, 1971a; Laue, 1971).

The system level at which the conflict occurs distinguishes community disputes from others treated in this book. There are five levels of social organization within and between which conflicts may take place: an organization, a neighborhood, an institution (the educational system within a city, for example), a community, or a transcommunity (a Standard Metropolitan Statistical Area or region, for example). Assorted clients, consumers, constituents, employees, and other outside parties challenge service professionals, providers, representatives, employers, and other in parties for inclusion—student/school, patient/health care system, welfare recipient/welfare system, black neighborhood group/white-controlled planning department, tenant/landlord. The focus of intervention for this chapter is most often a dispute within a community rather than a community-wide dispute.

It is important to recognize that this framework makes a fundamental distinction between personal or interpersonal problems (which are often defined and treated in terms of individual pathology or difficulties in
communication and relating to others) and systemic problems (which have their root in the distribution of power and resources within the system). This distinction, and problems associated with inappropriate applications of intervention across system lines, are treated in greater detail in the section on ethics.

Race and racism are factors in many, if not most, community disputes. Racism is pervasive and particularly malicious in the United States. Because racism has meant the historical exclusion of racial minorities from decision-making processes in American communities, the axis of many community disputes is white/nonwhite, and the issue is power. We have observed that whenever different racial groups are involved in a community dispute—or whenever the projected outcomes will change the shape of the power distribution between whites and nonwhites—race or ethnicity becomes the controlling dynamic in the dispute (Laue, 1968).

In sum, every community dispute is a game of power. Power is the issue, power is the goal, and the effective use of power is the strategy for all sides in any conflict. And if race is involved, the power struggle becomes more intense, the stakes higher, the sensitivities greater, the duration of the dispute longer, and the outcome less predictable.4

Intervention in community disputes refers to deliberate attempts by outside or other organizations, persons, or forces to influence the course of events in a conflict or crisis situation. Generally, the intervenors perceive their role as helping the disputing parties resolve their differences in what the intervenors see as a positive or socially desirable manner.

There are a number of persons and organizations who practice community dispute intervention, among them human relations commissions, religious groups, government agencies at all levels, psychologists, civil rights groups, and university research and training centers. They include such organizations as the Community Relations Service of the U.S. Department of Justice, the Federal Mediation and Conciliation Service, the Institute for Mediation and Conflict Resolution (New York), the Community Disputes Services Division of the American Arbitration Association (New York), the Community Conflict Resolution Program at the University of Missouri-St. Louis, the Center for Teaching and Research in Disputes Settlement (University of Wisconsin), the Department of Law, Justice and Community Relations of the United Methodist Church (Washington), and the Office of Environmental Mediation (University of Washington, Seattle).

Individuals and organizations practicing community dispute intervention have brought with them a variety of backgrounds and approaches to the field, including labor-management bargaining, psychological and psychiatric models, sensitivity and encounter approaches, models from international relations, and intergroup and human relations approaches. The somewhat limited applicability of these approaches to community disputes is a major focus of the remainder of this chapter.

A Typical Case: Elmwood Hospital and the Chicano Community Coalition

The important structural and dynamic characteristics of community disputes may be illustrated by the following composite case, based on a number of situations in which the authors have intervened.3

Elmwood is a medium-sized, 450-bed private hospital. It is well equipped for inpatient care and has an open-heart surgery team which is a matter of special pride. None of the trustees lives in the hospital’s service area, although some of their parents once did. Most of the trustees are professionals or businessmen, and their main function is to help in fund raising.

Until five years ago, Elmwood was in the middle of a white, working-class community. Now, however, it is on the edge of an expanding Mexican-American barrio that has crossed the expressway and is moving eastward. A part of the Mexican-American community is served by a public hospital on the west side of the highway. Those on the east, however, are turning to Elmwood. Few private physicians remain in the area, and Elmwood and its outpatient clinic are the main source of medical care for the new minority group residents.

The new residents now make up approximately 65 percent of the hospital’s service area. Most are in low-paying service jobs or on public assistance. Infant mortality is three times as high as in the rest of the city. Malnutrition is a problem, as is tuberculosis, lead poisoning, and other diseases associated with a deteriorating urban environment. Most cannot afford to enter the hospital when sick, and consequently rely on outpatient treatment in what is now an overburdened facility.

Like most private hospitals, increased costs have put Elmwood in a financial squeeze. It has become increasingly difficult to attract interns and residents and harder to retain present professionals. Although the hospital’s director is somewhat sympathetic to the medical care problems of the surrounding community, he sees his first priority as building the hospital’s institutional strength.

3 This scenario was adapted from a teaching case developed by the Institute for Mediation and Conflict Resolution, New York.
Citizens in the surrounding community would like the hospital to increase its almost nonexistent efforts in preventive medical care, to improve and expand outpatient facilities, to establish a satellite health center with day-care facilities, and to train a mobile Spanish-speaking paraprofessional health team to provide diagnostic services throughout the community. "This is what a neighborhood hospital is all about," they say.

A neighborhood group, the Chicano Community Coalition (CCC), sent a letter to the director asking that the hospital initiate these efforts and requesting that he meet with them to discuss how the community and the hospital could work together. Although the community is deeply concerned about its medical problems and resents the fact that an Anglo institution has not acted before this on its own initiative, the letter was not unfriendly.

The letter was not answered immediately.

A few days after receiving the letter, the Elmwood board of trustees announced the acquisition of a site on which it said it would build a heart research facility, a six-story nurses' residence, and a staff parking lot.

On learning of these plans, the leaders and members of the Chicano Community Coalition were incensed. About 50 coalition members came to the director's offices and vowed not to leave until the hospital agreed to meet the following demands:

1. Replacement of the board of trustees with a community-controlled board
2. A 100 percent increase in outpatient facilities
3. Establishment of a neighborhood health center and day-care facility on the newly acquired site
4. Establishment of a preventive diagnostic mobile health team, consisting of neighborhood residents chosen by the coalition
5. Replacement of the director by a Chicano chosen by the community
6. Making the hospital a bilingual institution at all levels

While the director indicated that he would gladly meet with the group's leader to discuss the matters raised in the letter, he also stated quite forcefully that he considered the new demands arrogant and destructive, and that, in any event, he would not meet as long as the de facto occupation of his office continued.

The coalition repeated its intention not to leave until a meeting took place and the demands were accepted.

This description offers a broadly representative example of the type of community dispute that is becoming commonplace as citizens' groups compete with established institutions (and, often, with one another) for control over the allocation of the scarce resources available—whether health care, jobs, space, recreation, housing, education, or other goods, services, and statuses. The Elmwood case contains the following characteristics, which are typical of most community disputes:

It involves an ethnic minority, historically a victim of discrimination based on linguistic as well as physical characteristics.

It involves a facility that delivers service to the community and is staffed by professionals who believe they are doing good and important work.

The dispute is affected by demographic and physical changes in the urban environment which are little understood and certainly cannot be controlled by any of the parties involved.

There is not only a multiplicity of issues, but of parties as well (the board of trustees, the administration, the various segments of the coalition, and soon, we may assume, additional parties such as physicians, nurses, service staff, police, etc.).

The resources—hospital beds, availability of professional personnel, space and money for research and/or patient care—are perceived as scarce.

At least one party is considerably weaker than the others in terms of organizational structure, staying power, and the ability to influence the decisions of the others.

A simple yes or no solution of the type provided by litigation will not serve the various needs of the parties, and a package in which all win something is called for.

Unilateral determination of the immediate outcome (by the most powerful party, as is typically the case) will not provide a lasting solution; clients and community as well as care givers must be involved if any solution is to "stick."

The situation now has escalated to the point where the establishment representatives likely would define it as a crisis.

Given the situation, what are the next steps? What avenues to solution to the dispute are available? How can options for settlement be kept open for all the parties? These are the questions to which intervenors initially would address themselves. Any move taken by an intervenor in such a situation would be subject to ethical inquiries about its impact on the lives and well-being of all the parties, their organizations, the institution, and the quality of health care in the community.

What types of intervention might ensue? Using the Elmwood case as a vehicle, an intervention role typology is presented and analyzed, and one role, the mediator, is discussed in greater detail in preparation for our discussion of the ethics of intervention in community disputes.
activist and reactivist may either become members of the group or be so closely aligned with it that they become directly involved and take the group's goals fully as their own. They have little or no ability to empathize with any party other than the one with which they are identified. In fact, the activist role is drawn to indicate that the activist may, on occasion, fully merge his or her identity with the powerless party. Activists' skills usually include organizing, public speaking, devising strategy, and the ability to rally a following.

At Elmwood there would have been a number of activists present. Frequently coalitions such as the CCC are the result of the efforts of live-in community organizers to define issues, suggest courses of action, and organize the community. Our experience has been that physicians, particularly chiefs of staff, often act in a reactivist role, using their influence to prevent what they fear will be a sell-out by the hospital administration.

**Advocate**

An advocate is not a member of a disputing group, but serves as an advisor or consultant to that group. Advocates support the goals of the group and promote its cause to the opponents and to the wider community. They are better able to extend their boundaries than the focused, more committed activist. The typical advocate for the establishment party is the management consultant, while the community organizer is the most frequent type of out-party advocate. A negotiator representing any of the parties also exemplifies this role type. Requisite skills include those of the activist, plus the ability to envision and achieve conflict termination and arrange contingencies so it can take place on what the advocate's party defines as good terms. The slight overlap of role lines between in- and out-party advocates designates the area where negotiations may begin as the advocates reach out to the other sides. Sources of support for the advocate's work may include any of the parties, as well as foundations, religious bodies, public agencies (Legal Aid, for example), and the like.

During confrontations such as those at Elmwood, which involve professional organizations with high levels of technical expertise, there usually are a number of advocates present. Often public health students and faculty at local institutions will enter such disputes to provide the client groups with the expertise necessary to negotiate technical issues. Some of the demands (the community health center and roving diagnostic team, for example) suggest the contribution of such advocates in this case. Should the board's attorneys seek an injunction to remove the CCC members, a legal advocate would probably come forward to represent the coalition.

Most urban hospitals have a community relations officer or staff,
a large part of whose function is to advocate its cause to the
surrounding community and the wider public. In addition, a frequent
institutional reaction in cases like Elmwood is to engage a consultant
to run communications workshops or other sensitizing programs for
staff to improve their working relationships with the protesting client
group, the result of which often is deflection of community pressure.

Mediator

Mediators do not have their base in any of the disputing parties and thus
have a more general, less party-parochial view of the conflict. (The dot-and-
dash line representing this role in Figure 1 encompasses both of the parties,
rather than being centered on one of them, as is the case with the activist and
advocate roles.) The mediator is acceptable at some level of confidence to all
of the disputing parties. A fiscal and organizational base acceptable to the
disputing parties (and ideally, in most situations, independent of them) is
crucial. Mediators assist the parties in reaching a mutually satisfactory settle-
ment of their differences, usually by means of face-to-face bargaining sessions.
Mediation skills are too numerous and too well known to catalogue here, but
a brief analysis of the nature and problems of this role in community disputes
follows this section.

At Elmwood, a mediator might have entered the dispute in a
number of ways. The mayor of the city might request that the
parties meet with a mediator in the interest of the total community.
One or the other of the parties might have felt it to be in its interest
to seek a settlement and may ask a mediator to enter the dispute.
The mediator would have to find a way to be invited in or accepted
by the opposing party. Should the parties begin negotiations on their
own, they might jointly request the intervention of a mediator. A
mediator or mediation agency might attempt to enter the dispute
through its own contacts and on its own volition. Or, should an
injunction be sought, the courts might "suggest" mediation. The
authors have studied or intervened in similar disputes in which each
of these entry modes has occurred.

Researcher

The researcher may be a social scientist, a policy analyst, a media
representative, or (as is increasingly the case in confrontations arising from a
planned event such as a demonstration or political convention) a trained lay
observer, who provides an independent evaluation of a given conflict situation.
The researcher perceives the conflict in its broadest context and is able to
empathize with all positions. The impact of the researcher's intervention is
determined by the interpretation and importance accorded his or her findings
by the parties and by the wider public. It is difficult, however, for the
researcher to stay uninvolved. Researchers may find themselves subpoenaed by
one party to testify about alleged law violations by another party. They may
also be used by the out party to analyze the power structure of the in parry
in preparation for conflict.

At the Elmwood confrontation there is little doubt that the news
media would have a strong impact on the situation. If street demon-
strations evolved, there might have been visible independent observers
on the scene such as the observer committee established by the New
York City Bar Association. 3

Enforcer

The enforcer represents power to enforce conditions on conflicting parties
irrespective of their wishes. Enforcers often take the institutional form of a
formal agency of social control in the larger system within which the conflict
is set—the police or the courts—or perhaps the form of a funding agency or an
arbitrator. In Figure 1, the role is illustrated as a double line intersecting the
other four roles to indicate that the enforcer alone brings formal coercive
power to the situation. The enforcer brings the right to specify behavior that
may support the goals of any or all of the parties, or to provide a baseline of
legality and, flowing from it, a sense of the superordinate power realities to
which disputing parties must respond. One rarely sees a true arbitrator in
community disputes. The web of issues and parties usually is so complex that
no single person or agency has an appropriate base to command allegiance to
an imposed solution, and no statutory process for submitting such disputes to
arbitration currently exists. 4

We have already speculated on the possible role of the courts at
Elmwood. There is little doubt that a contingent of police would be
on the scene during the entire confrontation. Public officials such as
the mayor, depending on the current state of his popularity, might
bring sufficient independent leverage on the situation to enable the
police to perform as de facto arbitrators of the immediate course of
the conflict (but probably not of the final package).

3 In planned crisis events there is a growing tendency to establish such observer
forces. During the political conventions at Miami Beach in 1972, for example, local and
national religious bodies organized Religious and Community Leaders Concerned, which
had an extensive observer corps with widely published daily synopses of their observa-
tions. At the Republican Convention in Kansas City in 1976, religious leaders formed
Watch, Inc., for the same purposes. In addition to New York, the local bar association in
Washington has trained teams of lawyers to serve as observers at mass demonstrations.

4 The best illustration of a true enforcer's role that we know of was the activity of
Mayor Richard Daley in terminating the protracted conflict between black leaders, the
construction unions, and contractors in Chicago in 1969.
Each of these intervenor roles tends to appear in every community conflict situation. Usually, any individual intervenor or intervention organization can play only one role in any dispute. In fact, once an intervenor is typed in a particular role in one dispute, he or she may be unable to play a different role in another dispute. However, we have observed skillful intervenors playing two or more roles in the same dispute. The advocate- mediator is the best example. In this role, an intervenor combines mediation skills with the work necessary to organize and strengthen the weaker party so a settlement that will stick can be achieved. The key to this kind of role mixing is the perceived integrity and judiciousness of the intervenor.

There are a number of widespread misconceptions and problems regarding roles for third-party intervention in community disputes, among them (a) the indiscriminate labeling of all intervenors as “mediators,” (b) the notion that mediators in community disputes are or ought to be neutral (as the concept has developed in labor-management relations), and (c) the failure of many intervenors to be aware either of the fact of their intervention (activists and researchers are the most typical examples) or of the implications of their particular skills, biases, and power base on the parties and the dynamics of the dispute. These and other problems receive more extensive treatment in the section on ethics below.

The Nature and Problems of the Mediator Role

The role most often associated with intervention in community disputes is that of the mediator. Many who in fact are performing other intervention roles tend to call themselves “mediators.”

The experienced mediator performs a number of different functions in community disputes and crises, each designed to further the negotiations and the resolution process. It is particularly important to remember that the mediator is an aid to the negotiations and does not replace the joint decision-making process.

Mediators do not serve as a natural third party when they enter a dispute. Merely by advocating the negotiation or joint decision-making process as a way of dealing with a conflict, the mediators are advocating, in our view, positive change rather than repression. Their decision on when or whether to intervene is an important factor affecting the outcome of a dispute. So is the way they report one party’s issue-saliency to another.7

The negotiation process itself determines the extent to which a mediator can favor one party over another. Obviously, the parties would not accept the assistance of a mediator who had a reputation for unfairness. If a party felt that a mediator was acting unfairly during negotiations, it could require him or her to withdraw from the negotiations.

As a tool for achieving change, mediation has both advantages and disadvantages. Negotiations convert power and potential power into a settlement that reflects the relative strength of the parties. Community groups choose to negotiate when they wish to solidify the gains they have made so far, or when they want to buy some time to reorganize, develop new strategies, or further develop their power base. Mediators will assist change only if they understand and respect these motives.

Mediation and the negotiation process are often the quickest routes to gaining concessions from the opposition, for established institutions are coming to recognize and accept these processes. Indigenous leaders who develop good negotiation skills, who understand the mediation process, and know how to use mediators can help achieve the goals of their organizations.8

Mediation may also be the best route to achieving legitimation with the established institutions, and a way of setting up direct communication in an otherwise noncommunicative or chaotic situation. In this context, a mediator often helps grass-roots or citizens’ groups gain recognition, overcome internal problems of representation and leadership, establish new contacts, cut through red tape, locate new resources, or use the resources they already have to the best advantage.

Mediation is not suited to all conflicts and disputes. Disputing parties always need to carefully weigh all of the pros and cons before pursuing this course of action.

THE ETHICS OF INTERVENTION IN COMMUNITY DISPUTES

The ethics of intervention in community disputes center on the nature and quality of decisions made by the intervenor, and whether those decisions promote the core values outlined in this section: freedom, justice, and empowerment.

From this standpoint, the single ethical question that must be asked of every intervenor in community disputes at every decision-making point in the intervention is:

Does the intervention contribute to the ability of relatively powerless individuals and groups in the situation to determine their

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7 Often parties in a dispute wish to use a mediator to gain a sense of the importance of conflicting parties place on the issues under dispute and on their various goals and demands. What, for example, is negotiable for the other side(s), and what is truly nonnegotiable? For a discussion of this question as it relates to community disputes in particular, see Chalmers and Cormick (1970) and Cormick (1971b).

8 One of the critical issues in the emerging field is the availability of the processes of negotiation and mediation to all parties, especially those without experience or skill in these areas. Establishment parties generally are able to secure highly skilled negotiators, while out parties often cannot.
own destinies to the greatest extent consistent with the common good?

This question flows from a basic assumption about human nature and three values derived from that premise. Ethical principles supply criteria for decision making. Ethical criteria are implemented in specific intervention situations through the decision-making process of the intervenor. The framework and flow of our ethical system regarding community dispute intervention may thus be diagrammed as follows:

II. BASIC INUMPTION
III. DECISION-MAKING PROCESS
   VALUES
   ETHICAL PRINCIPLES
   ACTIONS OF THE INTERVENOR

Basic Assumption

Any consideration of ethics must be based on assumptions about the nature of human beings. Our basic assumption is that persons are by nature fallible, decision-making creatures who seek meaning. Human beings are, of course, many other things, but these are their most important characteristics, and this basic nature ought to be honored and fulfilled. Persons seek meaning through their interaction with others. Persons are, and ought to be treated as ends in themselves.⁹

Values

Three core values concerning appropriate goals for human beings and the social systems within which they live flow from this doctrine of persons. The three values may be summarized as empowerment, justice, and freedom. Empowerment is the requisite condition of individuals and groups to achieve the desired end-state of society—justice. A just society is prerequisite to the maximum attainment of freedom by all individuals in the system. The freedom to make responsible choices among a number of options and live with the consequences of those decisions is the process whereby the deepest forms of personal meaning are realized.¹⁰

Freedom

A person's nature is most fully honored—the person finds deepest meaning—when he or she has the maximum degree of freedom to determine his or her destiny consistent with the common good. Freedom for the individual exists only when the individual and the groups he or she belongs to have adequate power to negotiate rights and interests vis-à-vis their fellows.

Justice

Justice is the ultimate social good.¹¹ The just social system would be one in which power (control of decisions) is diffused, decision making is participatory, accountability for decisions is visible, and resources are adequate and equitably distributed. Justice can only result from the continuous interplay of individuals and groups adequately empowered to represent their own interests, with a minimum of superordinate umpiring to prevent power concentrations and, therefore, abuses. Given human fallibility, a system of justice cannot be constructed and implanted on a social system by wise and/or powerful outsiders. It must emerge from the interplay of empowered, meaning-seeking individuals and groups.

Empowerment

Assuming that all individuals and groups have a right to seek justice and freedom, empowerment for all is essential. To be fully human, individuals and their groups must make their own decisions and live with the consequences. Self-determination is impossible without negotiable power. Ultimately, no one speaks for another. Thus, individuals and groups must represent their own interests. Proportional empowerment becomes a crucial value. It refers to a condition in which all groups have developed their latent power to the point where they can advocate their own needs and rights, where they are capable of protecting their boundaries from wanton violation by others, where they are capable of negotiating their way with other empowered groups on the sure footing of respect rather than charity. Given the fallibility of judges, sociologists, politicians, philosophers, and theologians, we can only trust that

⁹ The Preamble to the Code of Ethics of the American Sociological Association (1971) cites the recognition of people as ends-in-themselves as the ultimate value toward which the work of sociologists should be directed.

¹⁰ Empowerment may be viewed, in Rokeach's terms (1973), as an "instrumental value," one that is essential to the achievement of social justice and personal freedom. Justice, then, becomes a "terminal value," but freedom remains instrumental in our system, its exercise leading to the ultimate terminal value: human fulfillment.

¹¹ In our view, justice subsumes the other two first-order values (in addition to freedom) identified by Warwick and Kelman (1973): welfare and security/survival. If social groups are proportionately empowered to represent and negotiate their own interests in the marketplace of societal decision making, their welfare and survival needs will be served vis-à-vis those of all other groups.
true substantiative justice will flow from the procedural safeguard of proportional empowerment.

Applying this scheme of core values to intervention in community disputes, we conclude that in a situation marked by a high degree of power imbalance among the parties, any intervention must enable the powerless party or parties to increase their power. Empowerment—and justice and freedom—are ends in themselves so long as all individuals and groups are equipped to advocate their interests to a similar degree. If only certain persons and groups are empowered, then other people cannot protect themselves and speak for themselves; and they inevitably come to be wrongly treated as means rather than ends.

It should be clear by now that we believe the coinage of community disputes is power—the ability to make or at least influence the decisions that affect one’s life in the community. The single ethical question, which must be put to every intervenor—whether the intervention contributes to the ability of relatively powerless individuals and groups in the situation to determine their own destinies to the greatest extent consistent with the common good—now comes into sharper focus.

Social change toward justice thus becomes the proper general goal for intervenors in community disputes, and empowerment of relatively powerless individuals and groups becomes the immediate ethical mandate.

Settlement of community conflicts and crises perse will not do as the overriding goal for community intervenors. When power imbalances are great—as is the case with most of the community disputes with which intervenors deal—a focus on settlement perse usually contributes to the strengthening of the status quo. Justice is only approached when all the parties involved in a dispute over power or resources have a share in shaping the settlement, that is, when joint determination rather than unilateral determination is the mode of operation. Joint determination is not possible unless all parties have negotiable power.

Ethical Principles

Ethics refers to a set of principles defining the rightness or wrongness of acts. Ethical principles flow from basic values about desired end-states and processes for achieving them. The desired end-states we posit regarding community life are the core values of social justice and personal freedom, and the procedural absolute for achieving these end-states is represented in the core value of proportional empowerment.

We have identified eight principles that we believe translate these three core values into operational criteria to guide intervenors in making decisions about intervention. They are stated in brief form here and applied to case examples near the conclusion of this chapter.

1. The actions of the intervenor (whether in entering a dispute, timing of intervention moves, selecting strategy and tactics, or helping fashion agreements) should contribute to proportional empowerment of powerless groups for social change.

2. The intervenor should promote the ability of the weaker parties to make their own best decisions through helping them obtain the necessary information and skills to implement power. The intervenor should assess the relative level of information, negotiating skills, and analytical ability of the parties and, if there is a considerable differential, help even the odds through training or other forms of advocacy. 12

3. The rationale for an intervenor’s decisions should be conscious, explicit, and (where consistent with the basic values of freedom, justice, and empowerment) public. Such decision-making requires the intervenor to engage in interchange on several levels (cognitive, between principles and anticipated action, with colleagues, etc.) and thus works to inhibit unilateral, uncritical decisions that may adversely affect the weaker parties in a dispute.

4. Since neutrality or claims to neutrality on the part of an intervenor in a community dispute almost always work to the advantage of the party in power, the intervenor should not claim to be (or worse, actually feel) neutral. Such a stance is evidence of the intervenor’s failure to make conscious, explicit, and (where possible) public decisions.

5. The intervenor should be intimately familiar with the dynamics of power and, where the situation involves race, the realities of racism. If this is not the case, the intervenor’s actions (even if well-motivated) will result in damaging the position of the weaker party and strengthening the hold of the party in power.

6. The intervenor should consistently advocate resolution of conflict or crisis through a process of joint decision making by the parties, because, in community dispute situations, the more powerful party virtually always has the ability to terminate the dispute through sheer physical or military force (a practice that violates the values of freedom and justice through empowerment).

7. Intervenors trained in one conceptual approach (one-to-one psychotherapy or labor-management bargaining and mediation, for example) should not transfer their intervention models uncritically to a different system setting (a racial/community dispute involving multiple parties, for example). To do so is to increase the probability that issues will be diverted and that

12 As Kelman has observed in reviewing this manuscript, refers to the intervenor’s contributions to structural changes, while the intervenor’s role referred to in point 2 involves the development of particular skills or capacities on part of the weaker parties.
The outcomes will not meet the most basic needs of the disputants. "Improving communication" or building temporary trust rather than building power for influence on decisions inevitably results in cooling out the disadvantaged parties or unnecessarily exacerbating the conflict in the long run.

8. While empowerment of the powerless is a premier value in our system, intervenors should not lend their skills to empowering groups who do not hold the values of empowerment, freedom, and justice for all people, regardless of race, sex, religion, or national origin. In fact, an intervenor should place a high value on working against such groups. Thus the value positions and ethical criteria outlined herein do not call for intervention activities that will further empower racists, sexists, fascists, militarists, or religious bigots, for to do so would be to contribute to violation of the very premise of human fulfillment from which these principles flow.

Action as Translation of Principles through Decisions

The flow from basic assumption to values to ethical principles is not fulfilled unless it culminates in action in specific concrete situations. The translating mechanism between principles and action is the decision-making process. The personal decision is the unit act of social ethics.

Every facet of intervention analyzed in this chapter flows from a decision or combination of decisions by intervenors or intervention agencies. Not to decide is to decide; to act without consciousness or comprehension of one's decision-making process is to decide. The actions or inactions of intervenors in community disputes have an impact on parties regardless of the decisional etiology of the act.

Decision is the linking concept between intervention ethics and intervention actions. Only by clearly tracing intervention decisions can we assess accountability, measure the actions against ethical criteria, and stimulate wide discussion among intervenors about their own actions. We focus on decision because we have encountered literally dozens of naive, well-motivated intervenors who never comprehended the detrimental impact of their decisions and actions on subordinate groups in a dispute.

Throughout this chapter, there have been numerous examples of the kinds of decisions intervenors must make. We may now summarize them in four basic categories, with examples of the types of questions an intervenor faces:

1. Entry decisions. Whether to intervene. What is the potential for enhancing the power of weaker parties by intervention? What are the prospects for successful termination of the conflict through one's intervention? What impact will the intervenor's entry make on the legitimacy of the weaker parties? On the power of the stronger parties?

2. Timing decisions. When to enter. Whether to enter at the start, or to let the process "cook." How to avoid the tendency to try to get weaker parties to the bargaining table before they are ready. How to relate one's own intervention to existing mechanisms for conflict resolution in the system.

Process decisions. Whether and when to allow, oppose, or promote escalation and system disequilibrium. Developing contingency plans for decisions should violence arise or escalate. Making decisions regarding shifting roles in the course of a dispute (from mediator to advocate for a weaker party, for example).


We now turn briefly to illustrating the application of the eight ethical principles to difficult decisions faced by intervenors in actual dispute situations. Some situations are disguised for obvious reasons; some are not. Some offer the obviously correct answer to the intervenor's decisional dilemma; others end with a question.

Proportional Empowerment

A young black psychologist was hired by the Harvard Community Health Care Plan in 1970 to help organize a Community Advisory Committee whose manifest purpose was to advise the physicians and administrators of the plan on the nature and delivery of health care needed. His greatest difficulty was in dealing with several black welfare mothers who stressed neighborhood health care centers. He met with them extensively, took them to lunch, and eventually hired them as paraprofessional aides for the plan. The women now had stable income, and the advocate had his package for his employer. But he had perceived himself as an advocate for the community, not the plan.

Did this outcome contribute to proportional empowerment? In the short run, probably not, for it in effect co-opted some of the strongest activists in the Community Advisory Committee and undercut the organizational base of the group. But minor redistribution of resources did take place (for example, the new jobs as paraprofessionals), and one could scarcely argue against securing the financial life of the families of the women who were hired, some of them probably for the first time. In the long run, it seems clear that power may have been added to the powerless group in the situation, for some of the women have functioned as inside advocates with the kind of experience and base in the community that the professional psychologist could not bring to the organization.

Promoting the Ability of the Parties to Make Their Own Best Decisions

A dispute arose between a major private urban university and members of the surrounding black community over planned cutbacks in a substantial and
highly valued community program sponsored by the university. The program included, among other benefits, hard-core job training and technical assistance for promoting minority economic development. It had been established partly in the hope that it would ease growing tensions between the university and the community.

Following an overt confrontation that included an effective sit-in by members and supporters of the program’s community advisory board, both parties to the dispute invited mediation.

It became apparent to the mediator that the protesting community group had agreed to engage in a process with which it was unfamiliar. Their lack of skill in negotiation could be expected to lead to their settling for something less than their relative power and influence would seem to indicate. If this should happen, the mediator could realistically predict heightened frustration that could lead to renewed tensions in the near future.

Accordingly, prior to the beginning of negotiations, the mediator engaged in informal training sessions and developed a lengthy draft of a “how to negotiate” pamphlet for the community-based group. Their understanding of the process improved, and their new skills led to an eventual settlement that the parties believed served the needs of both the community and the university.

Promoting Conscious, Explicit, and Public Intervenor Decisions; The Issue of Intervenor Neutrality

The following vignette dramatically illustrates these two ethical principles. In 1969 two private consultants, in collaboration with an official of a major religious denomination, ran a laboratory confrontation exercise for 10 police officers and 10 black community members in a large midwestern city. The exercise was planned to last for five days. The aim was to improve working relationships between the police department and the black community. On the second day the police, after refusing the blacks’ request to leave their handguns and holsters at the door, walked out, claiming foul language as the reason. The blacks, most of whom had taken leave from work for the week to engage in the laboratory, sat until Friday, but the police did not return. All three intervenors made efforts to persuade the police to return to the sessions, but the police chief and the mayor ordered them not to return.

As the end of the week approached, it became clear that money for the honoraria verbally promised the black participants by the consultants would not materialize because the workshop had not proceeded with both parties present. The two private consultants made no efforts to secure the money and did not consult with the group about the problem. The religious official assumed the responsibility for paying the black participants and secured the money on an emergency basis, making himself personally liable for the money.

The two consultants did not adhere to the suggested openness of exchange with colleagues and with the weaker party in making their decisions about payment to the black participants. This action is closely related to the consultants’ perception of their own role as simply neutral facilitators of the laboratory confrontation between blacks and police. A serious moral dimension involving the valuable time and the raised expectations of the black participants was at stake, but later conversations indicated that the consultants did not even recognize it as such, for they lacked (in our judgment) a basic understanding of the power differentials involved and the impact of their intervention on the situation.

Understanding the Realities of Power and Racism

Cormick, Laue, and another consultant were called for a one-visit intervention in an ongoing conflict surrounding a desegregating K-12 school in a blue-collar neighborhood in a large southern city. Our sponsor possessed good legitimation with the superintendent and the school board and felt that the time was appropriate for outside expertise to help move the situation along. In the course of the three-hour consultation, all three outsiders independently determined that:

The problem was largely outside the school, among the white parents rather than between the students.

What several of the school personnel perceived as a breakdown in school spirit in reality was a redefining of school spirit to encompass the needs and styles of the newly arriving minority students.

The superintendent of the system was forward-looking, and the lawyer for the school board was a recalcitrant racist who was exacerbating the problem.

It became clear that the superintendent agreed to our sponsor’s calling us in as consultants because he wanted support for recommendations he no doubt had made previously, to provide him with sanction to move. Without any formal communication among the three of us during the course of the meeting, each apparently decided to allow the superintendent to use us in this way, for we all perceived the problem in the system in the same way and believed the approaches he was advocating were appropriate. Our understanding of the dynamics of power and racism in these types of communities and situations—and our joint recognition of the positions of the superintendent and the attorney—made this outcome possible. If any one of the consultants had been naïve, the scenario that developed could have been disrupted and the initiative turned back from the hands of the superintendent to the school board attorney and others with his views.\textsuperscript{13}

\textsuperscript{13}Note the relevance of this example to the operational criterion regarding relations with antidemocratic groups and its illustration later in the chapter.
The Wounded Knee crisis of Spring 1973 is the most dramatic example of intervenors’ understanding and promoting the principle of joint determination. At Wounded Knee, representatives of the National Council of Churches and of the Community Relations Service of the U.S. Department of Justice literally helped prevent a massacre, this time of certain U.S. citizens (Indians) by U.S. Justice Department marshals, U.S. Army troops, local law enforcement officials, and vigilantes. They did so by the relentless running of communications back and forth between the American Indian Movement (AIM) and federal bunkers; by insisting that all parties thoroughly check out rumors rather than fire first, and then helping them to do so; by drafting the original 15-point agreement that led to the cease-fire by participants, and working in the de facto demilitarized zone at great personal risk to see that it was implemented; by standing up to military and other officials who publicly declared they wanted to “clear those savages out of here”; by facilitating negotiation; and by assisting in provision of food and basic medical services to the various parties in the dispute.

The unspoken (and probably, at the time, unconceptualized) aim was to keep the dispute negotiable rather than to permit its unilateral termination by the more powerful party through military force. The link to the core values of freedom, justice, and empowerment is dramatically clear in this case.

Inappropriate Application of Intervention Models

Two brief examples illustrate the importance of the ethical mandate concerning application of intervention models in inappropriate settings.

In a major Northeastern city in 1970, a new organization set up to intervene in community disputes was seriously and deservedly discredited because of inappropriate wholesale application of a highly rationalized model, originally developed for white-dominated labor union elections, to the process of composing a neighborhood housing board in an all-minority area. The insensitivities of the white officials were many. They ignored the importance of working hours of the election participants; low-income black styles of political participation and communication; the realities of the neighborhood’s informal political organization; the people’s orientation to time and deadlines; the people’s natural resistance to an all-white, all-male, tersely professional election staff. The result was an election process that failed, that had to be redesigned and rerun, and that set back the parent organization in its attempts to develop intervention in racial and community disputes.

The second example represents the more typical case: the application of psychological, psychiatric, or encounter models to community disputes, where the problem is essentially one of imbalance in power and resources rather than individual psychopathology. In this case, a highly paid private consultant hired by only one of the parties dramatically flew in to a medium-sized eastern city after arranging to bring city officials and black representatives to a secluded location during the height of a racial disorder in the early 1970s. The predictable scenario took place: verbal catharsis for both groups, eventual discussion of issues, inability of city officials to produce needed resources for the changes demanded (because the consultant had not educated them about the realities of urban racism and the inequities underlying disorder), heightened hostility and suspicion on the part of blacks after finding raised expectations cruelly dashed, and return of the participants to real life where existing political and economic power arrangements continued to control decisions. Establishment interests inevitably use such experiences to gather additional intelligence on minority community perceptions and groups before the temporary early euphoria of the communications/encounter gives way to a clearer perception by minority representatives of the political realities of the meeting.

An article on this intervention later quoted the consultant as referring to himself as a "doctor to the cities" and as saying that all the parties "seem to feel a little better" after they talk to him.

Intervenor Relations with Antidemocratic Groups

A serious dispute arose in a large city over construction of scattered-site low-income housing in a predominantly white blue-collar neighborhood. The neighborhood residents saw the project as designed for blacks and Puerto Ricans. The dispute escalated quickly. Major private and public leaders entered the verbal fray, and a series of large demonstrations by whites against the proposed housing were held.

A mediator was asked to intervene by the mayor. He succeeded in building good rapport with both the white residents of the area and the major civil rights spokesmen supporting the proposed new housing.

Both sides soon pushed the mediator for his position on open housing. He tried to avoid a complete break-off of negotiations by focusing on problems of planning the implementation—a strategy that indicated his position on the issue all the same. The white anti-housing group secured an injunction to stop the construction, some of which was being destroyed by arson and other vandalism, and the mediator was required to testify in court. A decision was required from him at this point as to whether he could continue to work with the anti-housing group. He testified that he not only was morally committed to the right of individuals to live where they chose, but recognized that it was the law of the land. He then initiated a series of meetings with federal and court officials because of his rising concern over police handling of civil rights and minority demonstrators. He succeeded in having the proceedings transferred from civil to federal courts, which eventually resulted in the use of federal marshals at demonstrations rather than the essentially antiblack local and state police.

The choice had been put to him by the situation: Is it more important to
continue as a mediator in the dispute, or to risk one's credentials with one of the parties by taking a strong and public advocate's role for open housing? The intervenor's values were clear; the choice was easy.

SUMMARY AND IMPLICATIONS:
THE INTERVENOR AND
THE TARGET OF THE INTERVENTION

Our aim in this chapter has been to analyze the nature of community disputes and the emerging field of community dispute intervention, to offer a sense of the multiplicity and complexity of intervention roles, and to develop an ethical framework for assessing this type of intervention and its outcomes. Our own values and the ethical principles flowing from them have been stated, and we have returned at many points in the chapter to focus on intervenors and their decisions, organizational bases, skills, and biases, and their understanding of and sensitivity to race, power, and process.

The core values of freedom, justice, and empowerment lead us to demand of all intervenors a conscious self-questioning about whether their intervention in specific situations will empower weaker parties and lead to joint determination of outcomes. We find that, given the fallibility of even the wisest of outside "princes and experts" (Benveniste, 1973), proportional empowerment is the only safeguard we may ultimately trust in the pursuit of justice and freedom.

The implications of these value positions for the three general questions posed in the introductory chapter regarding goal setting, target group participation, and intervention consequences are clear, we believe, and this summary section is organized around those questions.

In setting the goals for any social intervention, who speaks for the person, group, or community that is the target of the change effort? This question does not pose a problem regarding the powerful groups in community dispute situations. They are used to speaking for themselves and have the means to do so. Our ethical system, properly implemented in intervention, would empower weak or powerless community groups as well to speak for themselves through the ability to negotiate their own rights and interests. The intervenor's efforts to obtain empowerment and to even the odds through training or other approaches offer two important guidelines for response.

The tendency of intervenors to see and present themselves as professionals is a pervasive problem in intervention at all system levels and is especially crucial for intervenors in community disputes. This tendency is reflected in the working definition of social intervention offered in Chapter 1, which refers to "deliberate attempts by professionals to change the characteristics of individuals or groups, or to influence the pattern of relationships between individuals and/or groups" (italics added). The essential point is that a concern with the professionalism of the intervenor may presume the inability of the target group to cope with self-determination.

A subquestion posed for contributors to this book was, "In deciding whom they will recognize as spokespersons for the target group, how can the intervenors avoid conferring power on some segments of that group at the expense of others and taking on themselves the role of 'kingmakers'?" We believe a more important question is, "Why should the intervenor have the right to make such a determination at all?" The very essence of self-determination is the right of the individual or group to select its own spokespersons. The parties involved make that decision. Accurate and updated assessment of the viability and legitimacy of the relationship between the spokesperson and the constituency is the critical demand on the intervenor.

Ambiguities arise when intervenors attempt to give their goals the same priority as those of the target. When personal goals (for prestige, publication, change in clients or target, for example) strongly conflict with the goals of the parties who need empowerment in a dispute, intervenors should disengage themselves or not become involved initially. Many community-based health groups are now insisting that there be no health professionals on the governing boards of community health centers. Their position is that the necessary medical knowledge can be provided by doctors engaged as their consultants, that health-care recipients should decide where they are going, and the professionals' duty is to help them get there. Similarly, the responsibility of the intervenor is not to determine goals but to provide the technical assistance needed by the parties in achieving their self-determined goals.

Achieving self-determination requires the empowerment of the powerless—those individuals and groups of individuals who are disadvantaged and disenfranchised. It is only from this proportional empowerment that other desirable values of freedom and justice and, only thereafter, peace can flow. More important, the power of self-determination can preclude professionals such as ourselves from imposing our own definitions of justice on others.

The basic responsibility of the intervenor, then, is to use skills, position, and power to further the empowerment of the powerless. Proportional empowerment will prevent license without responsibility. It furthers the confrontation-interaction process through which groups ultimately discover their common as well as conflicting goals. Otherwise the powerful will continue to exercise their power and unilaterally impose their will, justify it as truth, manifest destiny, the white man's burden, God's will, "technical expertise on problems too complicated for average citizens to understand," or the "reasoned judgment of the City Planner's office."

In selecting the means of intervention, how does one assure genuine participation in the change process to the people who are its targets? Again, proportional empowerment is the only lasting, nonpaternalistic answer. Yet our concern grows that, now that the overt large-scale disorders have at least temporarily run their course, many intervenors working in the aftermath approach intervention with a token economy model rather than a political model. That is, they perceive their role as one of aiding in the process of making certain concessions in the allocation of resources rather than in
helping to significantly empower powerless groups. In this regard, many professionalized intervenors are similar to most establishment parties: They wrongly see resources alone rather than power as the arena for change.

The empowerment goals of our ethical framework may be phrased somewhat differently in response to the second basic question: How can community intervenors help powerless disputants regain their sovereignty from politicians, government agencies, and professionals so they can make their own basic decisions? Wrestling the process for dispute settlement away from lawyers and the litigation scenario in particular is a major objective if the goal of genuine participation in the change process for the target population is to be realized.

In assessing the consequences of social intervention, how does one take account of higher-order or unintended effects? Our approach to intervention practice and ethics is not very helpful in dealing with this question, for several reasons:

- The systems, parties, and issues involved in community disputes are so numerous and so complexly related that determining causal relationships between individual acts (by intervenors or others) is extremely difficult if not impossible. What causes, for example, the settlement of an Elmwood Hospital dispute that results in a community-controlled board of trustees?
- Success is hard to define in community dispute intervention. What may be success to one intervenor, may not be to another or to one, any or all of the parties with whom that intervenor has worked. We have our yardsticks of empowerment and joint determination, but they may not be sufficient in the eyes of the target group.
- Unintended or higher-order effects cannot be controlled, because the web in which community disputes are set is no smaller than the world. Illustrations of such effects are the impact of a health-care settlement in one city on plans in another city; the movement of an Alinsky organizer or a community mediator from one area to another trying successful models; or the impact of the writings of a HUD professional trained in Boston and working in Washington on Chicanos organizing in San Diego to oppose a freeway location defined as the best by all professional criteria.

In this context, intervenors in community disputes must recognize that their role is generally catalytic rather than directly causal, but they must keep themselves visible and ever available to groups with whom they have worked in the past to assess and share responsibility for higher-order or unintended consequences that may develop.

A final word must be directed to ourselves and other intervenors at all system levels. Intervenors must be on guard at all times against ideological captivity by the professional/client therapy model of intervention where the professional holds at least implicitly the assumption that the client or target group is sick. Disadvantaged groups are not sick. We do not have to protect them for their own good. Most especially, they do not need our definitions of what constitutes their best interest.

We believe that the most effective method of ensuring that intervention is not unethical is to give the clients or target groups the tools with which to protect themselves from the intervenor. The Institute for Mediation and Conflict Resolution, for example, has worked particularly hard to ensure that in every dispute in which it becomes involved there are people in the weaker groups familiar with and trained in the negotiation-mediation process, and who know what that process can and cannot achieve for them. Intervenors are not permitted the opportunity to be unethical. Expressing a similar commitment, the Community Conflict Resolution Program has published a series of pamphlets, including "Preparing for Negotiations" and "Evening the Odds through Training" to help disadvantaged groups cope with professional intervenors, especially establishment advocates posing as mediators or advocates of the weaker group. Grass-roots groups are then able to use the intervenor as a tool in the quest for their own definition of their goals and how to achieve them.

We conclude that, in addition to developing ethics of intervention, it may be time for us to learn how to make our ethics irrelevant by ensuring that the objects of our intervention have the wherewithal to protect themselves and their interests from our efforts—however skilled, sincere, and well-motivated we may be.

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