Identifying Social Service Needs of Muslims Living in a Post 9/11 Era: The Role of Community-Based Organizations

Micheal L. Shier  
John R. Graham

Abstract: In this qualitative study the investigators sought to better understand the ways in which service provider organizations (n=19) working with Muslim service providers have adapted to the changing social and political contexts in a post-9/11 era in New York City, and how this changing environment has affected the types of services that Muslims need. Service providers described two general ways in which services were adapted: 1) they have sought to address limits in service delivery programs that were a result of emerging sociopolitical dynamics (such as increasing discrimination) through adaptations to existing programs or through the development of new initiatives, programs, and organizations; and 2) they have adapted programs and services to meet the emerging sociocultural demands (such as changing attitudes towards help-seeking, and presenting problems of services users) of the Muslim population. The study illustrated the role of service provider organizations in adapting existing services, or creating new services, in response to a changing sociopolitical context. Social work education must focus attention on how social workers can adapt and create organizations that are responsive to the changing needs of service users. More curriculum content is necessary on the intra- and inter-organizational context of direct social work practice, with particular attention to innovation and adaptation within and between human service organizations.

Keywords: Social work, social environment, service delivery, Muslims, organizations

Social work research supports the notion that socioeconomic and sociopolitical events within a social environment can have a direct impact on social service user groups’ experiences (Greene, 2008; Zastrow & Kirst-Ashman, 2010). Social scientists have found that complex socioeconomic and sociopolitical factors (such as the events of 9/11) can influence the types of services and programs that populations need to ensure their well-being (Hacker, 2002; O’Connor, 2001). A major theoretical framework informing this type of understanding is the person-in-environment approach in which social work serves as a bridging agent between the service user and the complex environment in which services are offered (Kirst-Ashman & Hull, 2008; Rogge & Cox, 2002).

In practice, the person-in-environment approach stresses the role of the social work practitioner in helping individual service users navigate their social environment. This can include support to individuals seeking employment, community access, and mental health treatment; among other forms of direct intervention where the social worker
themselves act as a bridging agent for a social service user to meet their individual needs. However, this approach only considers the direct (or micro-level) aspects of how social workers act as a bridging agent between the social environment and service users (Ezell, 2001; Schneider & Lester, 2001; Spencer, Gunter, & Palmisano, 2010). Instead, social service organizations (and in particular, non-profit organizations) have also been found to be active agents in addressing emerging issues or challenges within the social environment (Boyd & Wilmoth, 2006; Choca et al., 2004; Gulati & Guest, 1990; Kline, Dolgon, & Dresser, 2000 Spergel & Grossman, 1997). What this previous research suggests is that the mezzo (or organizational) level interaction with service user groups is also important and can be instrumental in addressing service user needs.

The present qualitative study focused on understanding the mezzo level experiences of service provider organizations working predominantly with Muslim service users living in New York City. Our main question was: As a result of the changing social and political contexts after the September 11, 2001 (9/11) terrorist attacks, in what ways (if any) did social services providers working with Muslims adapt their services? This study illustrates that social service needs of individuals cannot be assessed or determined effectively without examining the broader sociopolitical context in which clients are living in, and that service provider organizations within local communities are instrumental in assessing changing (or emerging) service user needs and responding through adapted or new programs and initiatives.

**Literature Review**

The effect of September 11, 2001 touched all parts of American life. Social scientists have studied its impact on American attitudes towards their government (Kimberly, Brewer, & Aday, 2009), legal system (Morgan, 2009), and social structures (Gross, Aday, & Brewer, 2004). Numerous scholars have examined how Americans experienced this collective trauma (Updegraff, Silver, & Holman, 2008), with some research indicating that some residents living around crash sites were at risk of post-traumatic stress (PTSD) (DiGrande et al., 2008; Wilson, Lengua, Meltzoff, & Smith, 2010) and suicide (Claassen et al., 2010). Research has also shown that the nation’s sense of social trust may also have been impaired (Gross et al., 2004). Gross and colleagues (2004) found that individuals exposed to television news coverage of the September 11, 2001 terrorist attacks experienced declines in levels of trust towards other individuals.

Muslims have been specifically impacted. For instance, numerous studies illustrate that Muslims have been the subject of increased Islamophobia if living in the United States (Jalalzai, 2011), or other countries (Mandaville, 2009; Sheridan, 2006). Islamophobia has generally been defined as the fear of Islam and Muslims with increased prejudice and discrimination directed to them due to their religion. Public opinion polls conducted in the United States have showed public opinion towards Muslims has generally been negative since 9/11. One study illustrated that 50% of Americans thought that Muslim individuals were being unfairly targeted since 9/11, but by January 2002 the proportion of Americans who felt this way decreased to 31 percent, rising to approximately 35 percent by September 2002 (Panagopoulos, 2006). A year following the terrorist attacks, the majority of Americans (approximately 60 percent) were reported
to believe that the Muslim “world” considered itself at war with the United States. In 2002 there were about 42% of Americans (a number only decreasing to 39 percent by 2003) who believed that the American government should have more powers to monitor Muslims (Panagopoulos, 2006).

To add, after the attacks on the World Trade Center, the Muslim community living in the United States, and in other parts of the world, particularly the West, became widely mis-represented in the mainstream media (Hodge, 2005; Kenan, 2005). The term terrorist has generally become associated with Muslim. Hence, many Muslims appear to experience negative sociocultural, sociopolitical, and socioeconomic consequences, especially those who live in New York City. They experience more stereotypes, more hatred directed to them and appear to be feeling more segregated from the larger mainstream population (Bornstein, 2005; Peek, 2003). Employment discrimination of American Muslims after 9/11 has become more common (Cavico & Mujtaba, 2011) and many acts of vandalism, threats, and attacks on mosques have occurred. One study illustrated that Muslims living in New York City experience more fear, than other ethno-religious minority groups, that a hate crime will be directed at them and they are more anxious about the future (Abu-Ras & Abu-Bader, 2008; Akram, 2002). Employment-based discrimination towards Muslims has increased 150 percent since 9/11 (Pelofsky, 2010). Likewise, hate crimes directed towards Muslims remains high when compared to many other religious groups (Federal Bureau of Investigation, 2011). The numbers of hate crimes towards Muslims have decreased considerably when compared to the 1600 percent increase in hate crimes directed towards Muslims directly following the 9/11 terrorist attacks (Potok, 2011), but recent reports have shown increases beginning again in 2010. For instance, there was a 50 percent increase in hate crimes towards Muslims in 2010 when compared to 2009 (Federal Bureau of Investigation, 2010). These trends demonstrate the continued prevalence of hate crimes directed towards Muslims post 9/11. Recent anecdotal evidence from news reports following the 2013 Boston Marathon bombings reaffirms the prevalence of this negative sentiment directed towards Muslims in the United States (Gray, 2013).

Post 9/11 there were also public policy changes related to national security and immigration which led to a substantial increase in the number of deportations of undocumented immigrants within the United States. The passage of the Homeland Security Act led to an increase in financial resources used to monitor immigrants within the United States and provided greater flexibility for immigration officers to detain illegal immigrants (Besthorn, 2008). These policies affected the well-being of Muslims, who now had to deal with the possibility of deportation (in the case that they were undocumented migrants) and detainment. Furthermore, under the Homeland Security Act, efforts to address the situation of undocumented immigrants within the United States were coordinated among multiple government departments (including the Department of Health and Human Services). As a result, individuals who needed health and human services became less likely to seek such support because of fears it would impact their immigration situation. These policies also led to Muslims now needing more services related to employment discrimination, legal services as some became the victims of hate acts and detention, and supports promoting community inclusion as the general public
perception towards Muslim became negative. Many of New York City’s Muslim communities then started turning towards their mosques for services (such as for legal, financial and subsistence resources) to deal with the increased discrimination and inequality that they were facing, whether it be at the workplace, when travelling, when accessing government services, within the school systems, and generally when undertaking their day to day activities (Abu-Ras, Gheithb, & Cournosc, 2008).

The dominant focus within the research literature has been on investigating experiences of individual Muslims post 9/11 (Abu-Ras & Abu-Bader, 2009; Carter, 2010; Hall, 2007). Other studies have looked into the experiences of social work practitioners working with Muslim service users (Adams, Boscarino, & Figley, 2006; Matthieu, Lewis, Ivanoff, & Conroy, 2007; McTighe, 2009). Both research trajectories focus on identifying gaps in knowledge and training needs of service delivery personnel to assist Muslims (Colarossi, Berlin, Harold, & Heyman, 2007; Miller, 2001). Few studies have looked at how service provider organizations that work with Muslim service users have responded to the changing sociopolitical context post 9/11. Waizer, Dorin, Stoller, and Laird’s (2005) exploratory research described the need for service providers to re-focus service delivery goals and the types of services offered based on the emerging needs of members in the community (both Muslim and non-Muslim alike). But their research only describes an organization within New York City being responsive to the immediate needs that emerge following a crisis. For instance, they describe the need to be responsive with food and other forms of subsistence aid. They describe organizational processes that are necessary to be effective in their response to the immediate crisis, such as being coordinated or having adequate infrastructure support. Based on the description of their case study analysis, this one organization did not change or adapt to meet the emerging needs of a population of service users because of a changing sociopolitical context. Instead, they describe an organization that is immediately responsive to help deal with a particular crisis. In this particular case, it is apparent that human service organizations responding to social service users post 9/11 were simply looking to address the needs that individuals had because of the act of terrorism itself.

The assumption within much of this research is that the social environment did not permanently change because of the terrorist act and that the role of service provider organizations is only to respond to the immediate crisis. Other research on the role of human service workers in responding to the needs of service users following a situation of terrorism has similarly made this assumption. For instance, the focus is primarily on individual service users and the implications of the terrorism experience for individual-level functioning with a focus on addressing experiences with trauma and grief in certain population groups, such as children (Baum, 2005; Kaplan, Pelcovitz, & Fornari, 2005). Within these studies, emphasis is placed on the role of practitioners in being responsive to these individual-level psycho-social needs by providing therapeutic interventions or outreach services to affected individuals (Miller, 2003). However, what has become apparent following the 9/11 terrorist attacks is that the sociopolitical context has changed permanently and this has resulted in different social welfare needs among Muslims. For example, Kaplan and colleagues, (2005) described methods of intervention when working with children directly impacted by the 9/11 terrorist attacks. However, their research did
not comment on the longitudinal impacts of the 9/11 terrorist attacks on Muslim children and their experiences. The present study is the first to consider the impact of 9/11 on human services that served a predominantly Muslim clientele living in New York City.

Methods

Data were collected in 2004 from all five of New York City’s densely populated boroughs. A total of 19 social workers or related human service professionals participated in face-to-face interviews with the researcher and/or a trained research assistant. Since changes in public policy would likely impact adaptations to service provision differently in community-based organizations and public sector programs of support, we differentiated between participants working in community-based organizations (whether they received government funding or not) and those that were working directly for government programs. Our focus was on the efforts of community-based organizations that were providing services and supports (including counseling services, resources, community access, etc.) to Muslims.

Purposive sampling methods were used to identify participants. Initially, a member of the research team conducted a preliminary screening of key informants through interviews with leaders (both professional and religious) in the Muslim community in New York City. The inclusion criteria of the study were that all respondents must be working with Muslim service users and/or Muslim communities providing some form of mandated individual, familial, or community support such as advocacy, referrals, implementation of community development projects, counseling, and so on. Many participants were Muslim, but not all were. Table 1 provides a description of participant gender, educational background, area of practice, and religious community of service users. The study received ethics certification and approval from the University of Calgary’s Conjoint Faculties Research Ethics Board.

Table 1. Characteristics of Study Participants

<table>
<thead>
<tr>
<th>Gender and Frequency</th>
<th>Educational Background and Frequency</th>
<th>Categories of Area of Practice</th>
<th>Religious Community of Service Users</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female - 9, Male - 10</td>
<td>Uncompleted Post-Secondary - 3</td>
<td>Corrections</td>
<td>Shi’ia</td>
</tr>
<tr>
<td></td>
<td>Certificate - 1</td>
<td>Immigration services</td>
<td>Sunni</td>
</tr>
<tr>
<td></td>
<td>Bachelor - 9</td>
<td>Child welfare</td>
<td>Ismaeli</td>
</tr>
<tr>
<td></td>
<td>Master - 4</td>
<td>Youth development</td>
<td></td>
</tr>
<tr>
<td></td>
<td>PhD - 2</td>
<td>HIV/AIDS support</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Domestic violence</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Mental health</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Housing support</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Income support</td>
<td></td>
</tr>
</tbody>
</table>

Data Collection

Qualitative interviewing techniques were utilized to collect data (Holstein & Gubrium, 1995; Patton, 1990; Seidman, 1991). Initially, participants were contacted by telephone and informed of the study by one of the research team members. After
respondents agreed to participate, the initial interviews were conducted in-person by a
trained research assistant, usually in the respondent’s office. Most participants were
interviewed twice for approximately one and a half hours each time (some participants
declined participating in a second interview). Two interviews were conducted, several
months apart, to allow the researchers to follow up with content reported in the initial
interview. In some cases (for participant convenience) the second interview was
conducted over the telephone. The interviews were digitally recorded with consent.

A semi-structured, open-ended interview guide was utilized. The interviewer asked
the respondent a question from the interview guide, allowing sufficient time for an in-
depth response. Depending on the extent of the response or the reaction of the
interviewee (i.e. inquiring for more clarification) probing questions were utilized to get at
the phenomenon under study. Questions included: What are the models of social work
intervention used by you and your agency? What has been the agency’s role after the
September 11, 2011 terrorist attacks? What aspects of your training work well with
Muslim people? Are there aspects that don't work well? How does your ethno-religious
background influence your practice? What are the most important pieces of knowledge a
practitioner needs in order to work in a Muslim context? Other questions related to ways
of implementing ethno-religiously sensitive practice techniques, practicing with clients of
the opposite gender, and discussing the agency’s role in the context of New York City
after the 9/11 terrorist attacks.

Data Analysis

Qualitative methods of analytic induction and constant comparison strategies were
used to analyze the data (Goetz & Lecompte, 1984; Glaser & Strauss, 1967). Specifically,
emergent themes (Charmaz, 2000; Williams, 2008) and patterns (Creswell, 2009;
Fetterman, 2008) were identified that focused specifically on how participants described
their interaction with clients and other factors that could be considered external to their
organization. First, the researchers read through all the interviews with the goal of
identifying common themes related to the different ways in which service providers
responded to the changing social environment factors external to their organization post
9/11. These themes were then coded based on the theme they represented, and the data
were searched for instances of the same or similar phenomena. Following this, the themes
were then translated into more general categories and refined until all instances of
contradictions, similarities, and differences were explained, thus increasing the
dependability and consistency of the findings. All members of the research team worked
collaboratively on this stage of research to maintain the credibility criteria of the study.
That is, each of the three members of the research team independently coded the data,
keeping notes about their own thoughts and impressions of the themes (i.e. audit trail),
and then consulted with each other. Two general categories related to the organizational
level context of service delivery post 9/11 emerged from the analyses. Within each of the
two categories, data were analyzed further following the same processes as described
above until all findings were coded. The following section provides the findings,
supported by representative participant quotes.
Findings

The two general themes that emerged were: 1) organizations sought to address limits in service delivery programs that were a result of emerging sociopolitical dynamics (such as increasing discrimination) through adaptations to existing programs or through the development of new initiatives, programs, and organizations; and 2) organizations adapted programs and services to meet the emerging sociocultural demands (such as changing attitudes towards help-seeking, and presenting problems of service users) of the Muslim population.

Addressing Limits of Service Delivery Programs

When systemic issues in society go unaddressed and traditional methods of service delivery are not challenged, there can be an ongoing repetition of service usage that does not meet changing service user needs. Most research has preferred to focus on the role of practitioners working with service users in addressing these systemic issues or service delivery challenges, with less emphasis on how these issues are addressed at an organizational level (Ezell, 2001; Lundgren, Curtis, & Oettinger, 2010; Schneider & Lester, 2001; Spencer et al., 2010). This omission is problematic since locally based non-profit direct social service organizations have taken on increasing responsibility over the last three decades in addressing the direct needs of service users (Maloney & van Deth, 2008; Mayer, 2003; Mulvale, 2001; Powell, 2007; Salamon, 2002). The findings from this study contribute to this literature by pointing out the role undertaken by predominantly Muslim service providers in New York City in addressing limitations in existing programs and services as a result of the changing social and political context post 9/11. Respondents highlight that their community-based organizations responded to these changing needs by adapting existing programs and by developing new initiatives, programs, and organizations.

By Adapting Existing Programs

Following the 9/11 terrorist attacks, public policy (such as immigration and national security policy, with the advent of the Homeland Security Act) and general public perception towards Muslim individuals changed considerably (Jalalzai, 2011). As a result, local community-based social service organizations were challenged to address emerging issues of discrimination that Muslims who lived in New York were facing, along with their increasing fears of detainment and deportation if they accessed government social support. While previously, individuals might simply have accessed benefits on their own, following 9/11 more outreach was required from social service agencies to reach individuals in need. Beyond outreach, other respondents described the need to adapt programs to be more focused on advocacy. One respondent commented on how Muslims now experienced more violations of human rights in their local communities, unfair access to resources, poor employment opportunities and unlawful detainment:

The needs of [people], basically [we asked] ‘what should be the first thing we should do?’, and we found out that so many people were uneducated especially
just in speaking English or writing English that it was greatly needed. So we started doing ESL courses and as we did ESL courses we got legal representation, we did legal clinics, we did “know your rights” clinics, we gave help to people who were detained.

Addressing language barriers is important for all new immigrant groups, but it became particularly important for Muslims living in New York City post 9/11 so that they could advocate for their rights when being questioned about their legal status by authorities. Respondents also said that, among programs aimed at supporting individuals directly affected by the 9/11 terrorist attacks, they perceived an absence of support to Muslims who were now the subject of a growing public resentment. For instance, one respondent said:

...[Respondent identified initiative] was the initiative we launched immediately after 9/11 because the city and the country seemed to only be focused on psychological healing and America defending itself and attention to the victims. We (Muslims) all were suffering along with the rest of the country, but it was clear also that there was something else at play here with the hate crimes, and the scapegoating of south Asians. Immediately after (the attacks) I got a random call from a funder, a south Asian funder at [Respondent names foundation] asking about the situation because the word was spreading within the south Asian community – south Asian and other Muslim communities – that we were isolated and there was really no attention or recognition of what was happening with our community.

Respondents also said that help-seeking by Muslims changed because now they required more direct support. Muslims felt so vulnerable that agency staff had to be present when Muslims were dealing with the legal and immigration system. Agency staff reported having to really advocate for Muslims who now felt fearful even when they had done nothing wrong, especially if they were interacting with the legal authorities. There was a tremendous sense of fear and isolation by Muslims living in a post 9/11 climate in New York City.

One respondent said,

So we become the third person sitting in the office with the lawyer to provide them with what the client is saying ...That again happens in the housing. People are usually afraid when they sit in front of a lawyer so we not only do that but we also provide a kind of a moral support. When they go to the immigration judge, we stand together with them...Going with them to the court so that they do not feel alone. This is even in the cases where people with legal backgrounds have received Notices To Appear.

Social service agencies also had to provide increased support in other areas of services users’ lives. For instance, some respondents talked about having to provide support to assist children facing discrimination in schools. One respondent shared:

For example: say if I was a Muslim person and I have to report a crime to the police, I worry are they going to ask me for my social security number or are
they going to ask me if I am documented or not. If they are doing that then I am better off not asking for help. So not only are people now scared of asking for help to the law enforcing agencies but that fear has been extended to asking for social services. Even the concrete type of social services like your benefits, medical care and public assistance.

By Developing New Initiatives, Programs, and Organizations

Some organizations also began challenging these emerging sociopolitical dynamics by developing new initiatives, programs, and organizations or by restructuring existing organizations. Respondents identified six ways that their organizational focus changed when assisting Muslims. First, respondents described changing program mandates and their general goals of service delivery.

This program now offers a bit of counseling and it’s a space where youth can share, name their feelings and understand it within a broader context. You know the context of post 9/11, being south Asian in America, being an immigrant, being a minority, being a man, etc. Then there’s an organizing piece. They wanted to do something. They wanted to exercise their new skills or share what they’ve learned. What they’ve decided to do is to put on a play which highlighted some of the challenges that they face and I thought it was quite powerful. As this respondent describes, a key focus of organizational efforts for some organizations was on creating awareness and validation among Muslims about their experiences with discrimination.

Second, other service providers described how they created organizations to respond to some of the needs of Muslims living in New York City. One respondent described:

We were able to come together quickly...we all took ownership of the organization and we took the responsibility of responding to the media, responding to children, to interfaith groups. That was our responsibility, and only ours in the sense that even if somebody else was out there to do it we wanted to be the people who were the go ‘teach people about Islam.

This respondent describes the need to develop a new organization following 9/11 that sought specifically to educate others on who Muslims were. There appeared to be a great misunderstanding of what Islam was.

A third theme was that some service providers felt they had to change their organizational make-up by changing the diversity of human resources and the specific demographic categories (such as gender and age) of service users that qualified for services. For instance, one respondent said:

Well I would say that we get a lot of phone calls and a lot of inquiries for help and I think the main thing is that we want to expand our services. We also are a multi-ethnic staff of Muslims and we want to continue to expand on that because that alone helps us break down stereotypes that people have; ethnic stereotypes
or ethnic preferences. So that’s something that you can just do and it speaks for itself. I think that is very important.

A fourth theme was that some service providers felt they had to change the mission of the organization so that they addressed the misperceptions of Muslims held by the general public. Instead of just offering individual level services some organizations began public education initiatives. Now agencies were finding that they had to undertake advocacy-based initiatives to address the discrimination experienced by Muslim service users. For instance, one respondent described:

There is certainly a lack of understanding or even lapses of understanding of the needs of the Muslim community and what goes on in their lives. So I have been focusing a lot on educating people and raising awareness of what the trauma of 9-11 has done to us collectively and how it has changed the lives of the Muslim community. Especially those that have come directly under attack.

A fifth theme described how service providers responded to the sociopolitical context by changing the way that their services were offered.

The workshop environment [type of service delivery model this organization was using before September 11, 2001] may not be the best situation, and also parents may not want to talk about their situation, their child, or their family, particularly in the heightened fear of immigration, almost McCarthy like period that New York City at least, if not the country, is living under. Also there have been difficulties in terms of people reporting on each other to the FBI, and nobody wants to draw attention to themselves in this really heightened, politicized environment. We had to find different ways of training parents, and this was not the best way.

The final theme in this category was the recognition by organizations of their need to interact in collaborative advocacy arrangements with other organizations and community groups:

And yes, we do, the advocacy part is in collaboration efforts, like for example, we did participate in the freedom right movement. We did…we put our point of view towards the Mayor for the Executive Order 41 which is the do not tell policy. And [long pause] we focus on every issue which is important to an immigrant and whatever can be done, we try to do. We are young. We are not even two years old, so we take our help of the umbrella organizations and advocacy based organizations and join hands with them.

Some respondents also described the need to work with other community-based actors and connecting with cultural groups:

Yes, this is the one that just happened last week, December 2. We wanted to work in a low threshold way into the south Asian community. We were talking about drugs and alcohol which are often the negative side effects of stress. Especially after 9/11, that’s something that we wanted to address as part of our work. That’s the mandate of our grant—prevention and treatment of drugs and alcohol.
Obviously we connected that to stress management and the factors that cause stress in these communities that can lead to abuse of alcohol and drugs and domestic violence that emerges and sexual health, as well as hate crimes and racial discrimination obviously. In order to address these factors, we planned a community event where we brought together social service providers such as lawyers, doctors, and employment specialists and some of our social workers who acted as consultants and could speak to people one-on-one, give them advice and services on an individual level at this community forum.

Another respondent described the need to develop relationships with other organizations and work collectively towards some larger systemic goals.

Because we want experts, so we actually got in touch with them and got them. We got the New York Civil Liberties Union, the New York Immigration Coalition, AALEF (Asian/American Legal Education Fund). We are also now working with the city board. We are working with private attorneys also – (respondent gives name) one of the best immigration attorneys. We’re also working to help to help to initiate a coalition BORDC – Bill of Rights Defence Campaign.

Refocus Programs and Services to Align with Sociocultural and Demographic Changes

Community-based human service organizations are challenged to adapt to emerging trends within the social environment (Gronbjerg, 2001; Spall & Zetlin, 2004; Strolovitch, 2006). These adaptations (or innovations) have been defined in a typology of three categories: 1) adaptations to programs and initiatives to meet the changing administrative and technological needs of the organizations (including fundraising, resource sharing, and technological improvements) (see for example: Mano, 2009; Sargant, 2001); 2) direct practice innovations including implementation of evidence based practices and changing methods of intervention (see for example: Cook & Sabah, 2009; Murray, 2009; Simpson, 2009); and 3) program implementation, including new program development to meet changing or emergent client needs and the procedures utilized in the way services are provided (see for example: Blue-Howells, McGuire, & Nakashima, 2008; Prince & Austin, 2001; Wood, 2007). In this order, Jaskyte and Lee (2006) refer to these three types of innovative or adaptive programs or initiatives as administrative, product, and process innovations.

Respondents here provide evidence that their organizations undertook product and process innovations by refocusing existing programs to align with changing sociocultural and demographic needs (such as attitudes towards help seeking or increasing the level of services available for a specific gender) of Muslims living in New York City. For instance, some respondents described that patterns and attitudes towards help-seeking among Muslim people in New York City changed resulting in the need for more informal processes of helping:

*This is what’s happening. Do you think if this individual witnesses a rape, a murder, do you think he’s going to say, “oh that’s the person,” no way. I had another case – I came from work – a 12-hour shift...individuals crying on my*
doorstep. I asked them what happened. He said he was unable to urinate for the past 12 and ½ hours. I said, “why don’t you go to the hospital? Why don’t you call 911?” And he’s crying and said, “because I’m undocumented. I’m afraid to go there.” I took him immediately to the hospital – the doctors worked on him for two hours – operated on him. And the doctor informed me if he did not come in at that moment he would have been in critical condition. His bladder would have burst. He had some sort of blood clot.

Besides changing patterns in service utilization and access, other respondents identified that Muslim men would require more services and some organizations adapted the focus of their programs that might only provide services for women and children:

*Some people find that women come to us more often after the special registration and 9/11. After special registration you will see men, a lot of men coming here for legal advice and legal services.*

Similarly, another respondent described:

*We have males coming here to the centre. They were shy about it but some others you know they just feel they have to do it because they were not in a good situation and they needed help.*

Some respondents also described how the presenting issues of service users had changed and this resulted in service delivery adaptations to adequately reach the population in need. For instance, one respondent described:

*I’ll give you examples – pre 9/11 a lot of women who were undocumented and had found themselves in abusive relationships would, if encouraged enough, seek counseling, seek advocacy, seek legal help. We have the Violence Against Women Act that allows them to self petition for themselves if they are undocumented and their abusive husband or spouse is a green card holder …now post 9-11 these women are very hesitant to go and ask for help unless there has been a breach of trust. The women who are being abused at home, and I am giving you a scenario where the abuser says “try going out and asking for help, the children will be taken away and you will be put on a plane and be deported”. Whether that would actually happen or not that's enough to put fear in the woman’s mind to not access help.*

Likewise, another respondent commented on how the issues faced by youth in the community had changed resulting in changes in program focus to deal with the psycho-social implications of experiencing discrimination or the fear of deportation:

*Most of the young people were shocked and they were upset and they were grieving and they were confused, but the one thing that they experienced which was unique is – after the attacks and the rumors about the attack spread very quickly, is they suddenly felt like they were being scapegoats or that they were responsible for it. Then there were the special registrations targeting them as a community, and some of these kids, kids who were born here or had been here*
who only know America even if you know they came here when they were small, were like “well ok I thought this was my country...where do I fit in’.”

Respondents also identified that they saw changes in clients’ cultural identity. For one respondent service delivery adaptation was about recognizing the new dynamics between Muslim cultural groups:

Yes, I mean sometimes Muslims would be active within their own Muslim cultural groups within a certain area and would build a mosque together, would organize together, help each other get jobs and things like that. But now it has become much broader and it is beginning to expand beyond those ethnic boundaries.

Discussion and Conclusion

For respondents in this study, social environment factors such as rights violations, changes in public perceptions about a service user group, the emergence of restrictive public policy, the lack of acknowledgement of social injustice by the general population, and the absence of supports and empathy from government institutions, all acted as triggers for organizations to adapt after 9/11. The result were changes to organizational mandates and the general focus of service delivery, the creation of new organizations, changes to the organizational structure and the diversity of personnel within organizations, new missions and goals within organizations, adaptations to service delivery approaches, and increasing collaboration with other organizations and community groups. As a result of the changing social environment for some Muslim service users after 9/11, from the perspective of these respondents, these adaptations were important because patterns and attitudes of help seeking, types of services needed, the demographics of the service user population, and the presenting issues within the service user group all changed.

The findings demonstrate the need for social workers and other human service practitioners to be adaptive and flexible in the program delivery models offered in their organizations. Extending these ideas into other practice settings might be useful for social work practitioners who struggle to become adaptive and flexible as service progresses. This research gives service provider organizations some ideas about where to begin thinking about what factors external to their organization are impacting their services. If service providers can make these connections between social environment change and service user needs they might be able to respond differently (as service providers in this study did) to the changing needs that service users have.

There are some limitations of this research. This research is exploratory and, as is the case with all qualitative research, the findings are not generalizable to all organizations providing services to Muslim service users. In fact, some human service organizations are more adept at responding to those social environment factors that promote or support marginalization of certain groups within the population (Jones, 2006; Netting, O’Connor, & Fauri; 2007; Schmid, 2004). Our findings identify ways in which some human service organizations providing services to Muslim client groups had adapted their services after the events of 9/11. We also identified what factors acted as triggers for these changes. These excerpts help to highlight those sociopolitical and sociocultural factors that they
were responding to, providing useful insight for the transferability of the findings to other contexts where service providers are working with marginalized groups in society made vulnerable by negative social environment factors.

The data presented in this study were collected in 2004. This is an important period, following a several-year hiatus since 2001, that provides historical perspective with which the reader may begin to put the data in proper context. But further research based on the present context of services for Muslim service users needs to be undertaken to determine the extent that these factors contribute to service delivery adaptation in the present. Nonetheless, the 2004 data still provides a context for better understanding the role of community-based or nonprofit service delivery organizations in addressing the needs of service user groups and the aspects of our social environment that contribute to organizational adaptation. For this purpose, the data and findings are particularly useful for social welfare theory development.

For instance, large portions of the system of social welfare in North America, and throughout many parts of the developed world, have been changing modestly since the mid-1990s. In many places there has been further government decentralization, heightened individualism, and neo-liberal policies supporting financial retrenchment of welfare state spending (Evers, 2009; Jordan, 2008; Gonzales, 2007; Mulvale, 2001). Likewise, nonprofit and nongovernmental organizations have become more involved in directly addressing the changing social welfare needs of individuals and communities (Anheier, 2004, 2009). This study provides some empirical evidence of the role of organizations in addressing changing needs as a result of sociopolitical changes in our social environment.

Mulroy (2004) clarifies these emerging dynamics of the role of community-based organizations and service user need through a discussion of an ‘Organization-in-Environment’ approach. She highlights how organizations and communities are embedded in a hierarchy of structural conditions, but at the same time they have the capacity to change macro inequities that exist within society. This organization-in-environment approach is evident in the case of the Muslim service providers in this study. These agencies, of which the practitioner participants from this study were a part, played an active role in meeting the social welfare needs of some Muslim individuals and groups in New York City after extreme sociopolitical shifts that emerged out of public reaction to the 9/11 terrorist attacks. In many cases these organizations acted as a first wave of response by assessing immediate changing needs of Muslim service users. What these participants describe is that in order to be responsive to changing needs—developed from ongoing changes within the social environment—service providers, generally, need to be actively engaged in responding to these negative sociocultural and sociopolitical aspects of the social environment. For instance, practitioners need to look for changes in the demographic aspects of the service population; they need to examine the sociopolitical and sociocultural context impacting client groups; and they need to undertake ongoing assessment of the role of their organization in defining service based on changing service user needs that are in conflict with government policies.
While these data show that events happen that require service organizations and practitioners to change in many different ways, it is important to ask: how do they respond if these ‘events’ are slow progressions, in situations where clients have simply become passive recipients of a service that is defined by an ineffective government policy or externally mandated initiative? These findings suggest that social work education could train students to better recognize and adapt to the implications of locality – not just cultural factors related to a demographically defined sub-population, but also political factors, public perception, economic conditions, geographic parameters, and social relationships. Content within social work education could focus not just on organizational management, but also methods of collaboration, program and service delivery development, and ongoing community or environmental assessment.

The research here also demonstrates the complexity of the social environment and the implications for social service user groups that are specifically affected by the sociopolitical and sociocultural context of the present. Moreover, the insights that the respondents in this study provide are practical, and many can be carried out without enormous commitments of resources. But also, many of the ways these respondents describe adapting and changing services to meet evolving needs are complex and require a substantial commitment on the part of the service provider and an effort of actively seeking resources to adjust service mandates. This creates significant challenges for social workers and other human service professionals in community-based settings to adequately adapt services to changing service user needs.

Within our current social environment context there may be potential for scaling up these insights to any agency that works with Muslim communities. And further research to consider how to scale up, and evaluations of such activities, would be valuable. This is necessary to adequately investigate the role of social work and its functional purpose with groups or individuals negatively affected by 9/11 in the United States and elsewhere in the world where similar experiences exist (such as in Canada and European countries). More fundamental though, there needs to be an adaptation to mainstream social work knowledge and education within traditional welfare state countries which begins to recognize the role and function of direct service providers in nonprofit and nongovernmental organizations in adapting their services to meet changing service needs. As demonstrated by the respondents in this study through this case example of service providers for Muslim service user groups in New York City post 9/11, it is evident that practitioners and organizational-level service providers have a key role in assessing need and responding through revised organizational mandates and practices.

References


**Author note:**
Address correspondence to: Micheal L. Shier, Penn School of Social Policy and Practice, University of Pennsylvania, 3701 Locust Walk, Philadelphia, PA 19104-6214. Email: mshier@sp2.upenn.edu