The Human Progress and Human Services 2035 Scenario Effort

• Engage human services community
  – Better understand long term opportunities and threats;
  – Use scenarios that facilitate preparation, imagination & aspiration;
  – In order to better prepare for and create the future.

• National Scenarios, Mississippi & 7 other state and local partners

• Funded by The Kresge Foundation
Lead up to
Human Service Scenarios
Objectives for Today’s Scenario Workshop

• Use Scenarios to “Step Into” alternative futures for human progress and human services
  • Imagine, Aspire, Focus Concern
  • Consider the implications for human services directions, goals and strategies in each scenario; develop recommendations
• Identify “Robustness” across scenarios of strategies and recommendations
• Refine recommendations
• Enhance your partnerships, understanding, shared aspirations and goals (but not to develop a specific plan)
Agenda

9:00 Welcome and Introduction
   ➢ John Davis, Executive Director, Mississippi Department of Human Services
   ➢ Clem Bezold, Institute for Alternative Futures

9:30 The Mississippi Human Progress and Human Services 2035 Scenarios

10:20 Exploring One Future in Your Mind’s Eye

10:45 Break

11:00 Stepping into Your Scenario with Your Scenario Team

12:15 Break

12:30 Listening to Implications Across Scenarios (Working Lunch)

1:30 Next Steps & Feedback

2:00 Adjourn
Roles & Rules

Rules
- Have Fun
- Be inventive
- Imagine
- Aspire
- Phones muted

Roles
- All Participants are Futurists
- Clem & Mary are Facilitators
- Small group facilitators and reporters
Scenarios & Scenario Construction

Scenarios are parallel stories about the future.

Scenarios:
• Bound uncertainty
• Stimulate imagination
• Focus aspirations

Scenarios are developed by:
• Defining the topic/focus of the scenarios (what level, what questions, what focus/topic)
• Identifying system and key drivers shaping the topics
• Developing forecasts for the drivers exploring expectable, challenging and surprisingly successful future space
Levels/Focus for Scenarios

**Macroenvironment**
The Economy; Employment; Internet
Social Media; Climate Change;
Demographics; Chronic & Infectious Disease

**Operating Environment**
Jobs; Poverty; Racism; Education

**Organization/Topic**
Human Progress and Human Services in Mississippi
Forecast, Scenario Zones:

Visionary/Surprisingly Successful

Expectable

Challenging

Zone of High Aspiration

Zone of Conventional Expectations

Zone of Growing Desperation
Developing these Mississippi Human Progress and Human Services 2035 Scenarios

1. With MDHS—identify key drivers, review plans, forecasts

2. Develop expectable, challenging, and visionary forecasts of key drivers and human service areas
   - Input - National Advisory Committee & 37 other experts
   - Develop the “Front Stories” – the macro- and operating environments for Mississippi;
   - then “Back Stories” for each of the 6 specific human service areas: aging, behavioral health, child youth and family, disability, housing and income supports

3. In the process with MDHS—7 forecasting meetings with more than 30 leaders from the Mississippi human services community
STEPPING INTO YOUR SCENARIO

Today- Use the Scenarios to Explore, Consider Implications

Step into your assigned scenario

Consider the implications for short and long term recommendations
Mississippi Human Progress and Human Services
2035 Scenarios

1. Expectable – Mississippi Rising
2. Challenging – We Fall Down, But We Get Up Again
3. Visionary – Opportunity for All
4. Visionary – Generous, Empathic and Helpful
Likelihood & Preferability Poll
Mississippi Human Progress and Human Services 2035 Scenarios
Columns DO NOT have to add up to 100%. The scenarios are NOT to be viewed as mutually exclusive.

<table>
<thead>
<tr>
<th>SCENARIO</th>
<th>Likelihood (0% to 100% for each)</th>
<th>Preferability (0 to 100 for each; 100 = totally preferable)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scenario 1: (Expectable) Mississippi Rising</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scenario 2: (Challenging) We Fall Down, But We Get Up Again</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scenario 3: (Visionary) Opportunity For All</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scenario 4: (Visionary) Generous, Empathic and Helpful</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Scenario 1: Mississippi Rising
Scenario 1: Mississippi Rising

- Overall slow national economic growth
- Simultaneously, increasing national job loss to automation – 7% by 2025 – ‘Gig’ work
- More severe weather events - heavy downpours and flooding, sea level rise, reduced agricultural yields, increases in heat stroke
- Internet to all in MS; smart phones smarter, do more; virtual reality & virtual counselors, coaches
- Mississippi population ages, with declines in rural areas; some growth in metropolitan areas; micropolitan areas stagnant
Human Services Overall – 1

- Human service (HS) demand was influenced by population changes, economic shifts, and poverty levels
- Poverty decreased in some counties in the 2020s; in the least well-off counties poverty increased
- HS federal funding decreased 2017 to 2021; some regrowth in 2020s, with periodic retrenchment
- Better coordination among HS providers, partners– some data integration
- Technology, tele- & virtual visits
- Automation of eligibility and some case management, positions
- Gen Plus strategies successful; HS more generative
- Some movement to “pay for success” model
Aging Services – 1

• Growth of diabetes and Alzheimer’s
  – By 2030, more than 164,200 seniors in Mississippi have diabetes
  – More than 41,000 people with Alzheimer’s by 2035
• Senior centers expand & virtualize
  – Churches particularly important
• More NORCs, communal housing, ADUs, multigenerational homes
• TeleMedicine & virtual care
• Robots, smart homes, self-driving vehicles, affective computing assistants
• More family members provide care – impacts
• Community health workers deployed
Behavioral Health Services – 1

• Need for services grew – economic/ environmental stresses, exclusion, addiction including opioids, ACEs, etc.
• Care diminished as health care and access evolved
  – Department of Mental Health (DMH) remained the largest public provider
• More focus on prevention and predictive analytics, better understanding of adverse childhood experiences (ACEs)
• Mobile Crisis Response Teams successful
• Reaching rural areas, particularly the Delta, remained challenge
• Intelligent agents, often via smartphone apps, provide some behavioral care
  – Human counselors remain
Child, Youth and Family Services – 1

• Demand shaped by poverty, substance use and abuse, economic recessions, environmental disasters, and job loss to automation
• Funding dropped during the late 2010s and during periods of economic decline
  – State unable to fill gaps
• Delivery changed due with data integration and across public and private service providers, and health and social service sectors
  – Data enabled more prevention and early intervention
• Gen+ strategies
Disability Services – 1

- Need increases; Alzheimer’s; diabetes (69,000) by 2030; lack of prenatal care; substance abuse
- Racial and income disparities
- Benefit levels reduced, eligibility stiffened
- The waiting list for IDD waiver services remained long
- Telehealth and virtual reality
- Technology helped some: self-driving cars; digital assistants; 3D printing incl. smart prosthetics; home monitoring and home care robots
- Some covered by Medicaid and Medicare
- Schools and job training programs more inclusive
Housing Services – 1

• Homelessness/housing insecurity increases – homeless veterans on coastal areas; racial disparities
• Efforts to increase stock of low income housing:
  – Some communities organized ’housing task force’
  – Some increase in mixed income neighborhoods
  – Zoning to allow secondary units,
• Churches provide more shelter and meals, particularly during environmental crises
• Hurricane damage increased in the 2020s
  – Community Development Block Grants and other funding to rebuild was reduced
Income Support Services – 1

• Income supports experienced cuts, and stricter regulations, 2017-2021

• Need increases

• EITC remains; 390K received average of $2800; more in 2020s

• Food program funding cut; SNAP moved to a block grant system

• In the 2020s, funding rebounded; jobs and skill training used predictive analytics
  – Access to work/training in rural areas challenged

• LIHEAP and child care subsidies continue; periodic funding declines
Questions ????
And

Likelihood & Preferability Poll
Mississippi Human Progress and Human Services 2035 Scenarios

<table>
<thead>
<tr>
<th>SCENARIO</th>
<th>Likelihood (0% to 100% for each)</th>
<th>Preferability (0 to 100 for each; 100 = totally preferable)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scenario 1: (Expectable) Mississippi Rising</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scenario 2: (Challenging) We Fall Down, But We Get Up Again</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scenario 3: (Visionary) Opportunity For All</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scenario 4: (Visionary) Generous, Empathic and Helpful</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Scenario 2: We Fall Down, But We Get Up Again
Scenario 2: We Fall Down, But We Get Up Again

• Recurring challenges:
  – 2017-2021 Federal human services cuts
  – Ongoing job loss to automation; growth of “gig work”
  – Slow or declining economic growth; Great Recession of 2023
  – Extreme heat, floods, droughts, fires, major hurricanes and sea level rise more frequent
  – Technology advances – More online, AI, virtual tools, health care
Human Services Overall - 2

• Federal cuts 2018-2021 and around the Great Recession of 2023
• Human services took advantage of flexibility with block granting
  – Community based solutions
• Human service agencies and clients showed creativity - do more with less, coordinate and automate
  – About 15% of HS jobs automated
• Community and home self-sufficiency efforts increase
• Increased collaboration among providers
• Greater reliance on non-profits and faith based organizations
Aging Services – 2

- Economic hardships, boomers, diabetes & Alzheimer's increase need for aging services
- Social Security payments / Medicare treatment options periodically reduced
- Technological and medical advances in 2020s — Most not accessible to low income seniors
- Funding cuts led to greater reliance on informal services
- Churches provide services including respite care and organizing senior volunteers
- Some reduction in family members available to be caregivers; impacts for those that do
- Isolation worsened
Behavioral Health Services – 2

• Need for services increased - economic downturn, increased substance abuse and vulnerability
• Availability of services diminished
• More uninsured
• “Virtual counselors”, accessible to the wealthy and those still on Medicaid managed care
• Prisons remain major sites for behavioral health services; disproportionate effect on Black/Hispanic populations
  – Second Chance Reentry Program terminated
• Predictive analytics used for triage during cuts
Child, Youth and Family Services – 2

- Increased poverty, domestic abuse, family instability, opioid & substance abuse led to greater need for services
- Federal funding decreases
- More children enter the foster care system - foster care taken over by a court appointed receiver in the 2020s
- More disconnected youth and economic impact
- Programs cut or eliminated included: child care subsidies, programs to provide school clothing, transportation assistance, home repairs funding, and job training
- Child & family service workers stressed; some automation
- Churches mobilized and coordinated resources
Disability Services – 2

- Increased need driven by higher unemployment and poverty, recurring environmental challenges, increase in diabetes and Alzheimer’s.
- Developmental disabilities grew fueled by parental drug abuse, lack of prenatal care and spread of diseases.
- Benefits cut, eligibility requirements more stringent.
- Technology advances reduced some disability - came to the low income last.
Housing Services – 2

• Funding decreased; housing insecurity increased
• Driven by job loss, rent burden, disabilities and increased domestic violence
• More multigenerational homes
• Churches repeatedly provide housing/meals
• Around the state multigenerational housing grew in the 2020s – often not by choice.
• Laws and regulations allowed more unrelated individuals to share housing units, permit secondary dwelling structures
  – Often met with hostility
Income Support Services – 2

- Restrictive measures on TANF; limited cash benefit amounts and time limitations; job categories narrowed, made worse with job loss
- Many families resorted to extreme measures, did without, or found alternative sources. Home and community gardening grew, as did the underground economy.
- More people required emergency assistance, medical assistance, and temporary disability assistance but funds and services often not available.
- Job loss to automation/ recessions reduced the 390,000 of Mississippians benefiting from Federal EITC payments.
- Food insecurity worsened across the state; SNAP reduced, moved to block grant, then eliminated
- Other food programs periodically reduced
- Some child care cut federally
  - Family and neighbor child care increased with greater unemployment
## Mississippi Human Progress and Human Services 2035 Scenarios

### Questions ????
And

### Likelihood & Preferability Poll

#### Mississippi Human Progress and Human Services 2035 Scenarios

<table>
<thead>
<tr>
<th>SCENARIO</th>
<th>Likelihood (0% to 100% for each)</th>
<th>Preferability (0 to 100 for each; 100 = totally preferable)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scenario 1: (Expectable) Mississippi Rising</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scenario 2: (Challenging) We Fall Down, But We Get Up Again</td>
<td></td>
<td><strong>Yellow</strong></td>
</tr>
<tr>
<td>Scenario 3: (Visionary) Opportunity For All</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scenario 4: (Visionary) Generous, Empathic and Helpful</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Scenario 3: Opportunity for All
Scenario 3 – Opportunity for All

• 2017-2021 – Economy & stock market grew; job loss to automation; poverty and inequities grew

• Transformations – 2020 to 2035
  – Fairness, equity and inclusion
  – Economics; employment
  – Technology including “abundance advances”
  – Family and community self-sufficiency
  – Voting
  – Policy changes – taxation, housing, universal health care, public safety, universal basic income

• Neighbors had always helped each other, but became more systematic in trading services, enhanced by technology that lowered the cost of living
Human Services Transform – 3

- More effective and efficient, high automation & intelligent agents
- Integrated, shared data; automatic enrollment
- Universal basic income eliminates TANF, SNAP, EITC, other programs & staff
  - Human services and others ensured those receiving UBI were making meaningful contributions
- Two, and multi, generational strategies successful
- Upstream, preventive approaches supported by information; focused on thriving
- Support effective use of “abundance advances” and financial literacy/planning
- Human services more integrated, customized, flexible, and generative
Aging Services – 3

• Formal, informal, and virtual senior centers all grew

• Senior services integrated into libraries, schools, churches, cafes, and other settings

• More volunteering; and production/co-production and trading goods and services

• ‘Smart homes’ and universal design

• Medical and tech advances, many covered by Medicare for All

• Elder abuse and neglect declined, though some financial abuse targeted UBI
Behavioral Health Services – 3

- Poverty, economic insecurity reduced; lowered behavioral health needs
- Universal access to health care with behavioral health parity
- Mississippi increased “one stop shops” for health care
- Effective/inexpensive software apps proved to be very successful in the 2020s as virtual behavioral counselors; human/technology combination customized for each individual
- Better understanding of ACEs, environments and genetics aided care
- Genetic therapy, other advances covered by universal health care
- More patients moved out of institutional care
- Community mental health centers more virtual; physical centers largely outpatient treatment for behavioral health or substance abuse
- “Freedom Homes”
With UBI greater family stability, increased high school graduation, reduced teen pregnancies and child abuse and neglect

Mississippi’s gen + programing was successful in promoting education, economic support, social capital, education and health

More children stayed in their homes; but if taken out-of-home the UBI payment follows the child to foster home

More informal child care networks

Head Start and Pre-K universal and under the same federal agency; better teacher training and technology.

Self-sufficiency for families and communities strengthened by abundance advances and basic income
Disability Services – 3

• Disability, or its impacts, reduced -- driven by:
  – Slowing/reversal of chronic diseases
  – Safer and healthier work places and lifestyles

• Disability payments evolved due to UBI

• Education more inclusive

• Disparities in disabilities across the state better addressed through universal access to Health care, a focus on equity, and the promotion of healthier lifestyles

• Medical and technological advances:
  – 3D printing, home monitoring and home care robots, direct brain control of limbs, genetic analysis & some repair; self-driving cars  -- Many included in Medicaid
Housing Services – 3

- UBI funds enabled many families to pay their rent consistently
- UBI lead to a migration to lower cost areas
- Programs enable low income families to buy homes: match savings for a down payment; revising credit scoring, not penalizing gig work/job changes
- More public housing built, more vouchers
- Efforts to increase mixed income neighborhoods
  - Density; Accessory dwelling units
- 3D printing, low cost solar and other energy
- LIHEAP and weatherization funding continued
- Households produce more food and become more self-sufficient including community gardening, home aeroponics, cultured meat and 3D printed foods. HS and Agricultural extension support this
- Chronic homelessness reduced
Income Support Services – 3

- UBI eliminated TANF, EITC, others
- Child support guidelines restructured
- More informal child caring
- Making meaningful contributions increased, including caring for children and elderly; growing food; other volunteering
- Home ownership supported by down payment savings match program; financial capability training
Questions ????
And
Likelihood & Preferability Poll
Mississippi Human Progress and Human Services 2035 Scenarios

<table>
<thead>
<tr>
<th>SCENARIO</th>
<th>Likelihood (0% to 100% for each)</th>
<th>Preferability (0 to 100 for each; 100 = totally preferable)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scenario 1: (Expectable) Mississippi Rising</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scenario 2: (Challenging) We Fall Down, But We Get Up Again</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scenario 3: (Visionary) Opportunity For All</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scenario 4: (Visionary) Generous, Empathic and Helpful</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Scenario 4: Generous, Empathic, and Helpful
Scenario 4 – Generous, Empathic and Helpful

- Value changes – equity
- Policy transformations: Universal health care, housing, income supports, justice, education, the environment
- Steady economic growth, “gig economy”, job loss
- Job training focused on skills needed in jobs or work that would not be automated
- Living wage in 2020s, pay protections for gig workers; “full employment” redefined
- Tech supports sustainable, equitable communities- “abundance advances”
- Home/ community self sufficiency increased
Human Services Overall – 4

• Human Services Transform
  – Support equity and family self-reliance
  – More targeted, predictive, automated and effective
  – Two generation/multi-generational strategies
  – HS shifts toward wellness; enables prevention and optimal services; customized care; predictive analytics; support abundance advances
  – Greater community connectivity
  – Integration with agencies, non-profits, other partners

• Navigators, some are virtual
Aging Services – 4

• Formal, informal, and virtual senior centers all grew
• Technology advances included: Tele-health, virtual reality care, advanced bio-monitors, smart home technology, and secure data bases
  – Most advances available to low income seniors
  – Human service workers facilitate effective development/use of these advances
• Many diseases & their disability prevented or slowed
• More accessible housing, group living, cohousing, and aging-in-place; Universal design
• Employment for seniors evolved
• Elder abuse declined
• Social, physical isolation reduced
Behavioral Health Services – 4

• Behavioral health integrated with universal health care
• “Meaningful day” for all, including persons with disability
  – Employment, volunteering, learning, etc.
• Better understanding of genomics, epigenetics, ACEs, environmental factors aided care
• Homes for adults with behavioral health issues evolved with special smart home technology
• DMH serves those with more severe needs
Child, Youth and Family Services – 4

- Gen+ approach expanded – focus on root causes, family crises, more targeted workforce development and education
- State reinvigorated with a revamped Federal WIOA
- Better paid teachers contribute to more effective, equitable education
- Businesses were attracted to the Delta, living wage enabled workers to remain
- Data integrated across many agencies, with protections; enabled predictive analytics
- HS partnerships with schools, public safety, and employers
- Need for foster care was reduced; more children stay in-home
- Families more able to take foster kids
- Head Start and Pre-K universal, aided by teacher training & tech
Disability Services – 4

• Disability reduced by:
  – Reductions in drug use, consistent pre-natal care, genetic screening; slowing/reversal of chronic diseases, safer work places

• Technological advances included: self-driving cars, 3D printing, brain control of limbs, home monitoring and care robots, advanced treatments for genetic and other diseases

• Many provided through universal health care

• Homes evolved with special smart home technology
Housing Services - 4

• Housing services well integrated, consumer focused; use predictive modeling and advanced analytics

• Mississippi & Feds encouraged home ownership; Efforts included matching savings for mortgages, lower cost homes through 3D printing, tiny homes, ADUs

• Some tax incentives and regulations to install low cost energy; take vouchers;

• Areas near military bases increased efforts to rehabilitate homeless veterans and create shared living spaces

• Churches focused more on emergency and ongoing support efforts; fostered equity and inclusion

• Homelessness reduced
Income Support Services – 4

- Federal funding for income supports rose and allowed states greater flexibility and ability to coordinate across programs
- Work requirements reduced and adjusted, included broader education/training, optimal jobs for the person, & volunteer efforts
- EITC amended to apply proportionately to single individuals and childless couples as to those with children
- EITC income ceilings were raised
- SNAP funding rebounded in 2020s
- Community food production increased
- TANF payment levels expanded, as did the length of time they could be received; TANF became Aid for Needy Families
- Child care payments expanded. Child care providers work more flexible hours to support gig worker schedules.
- Living wage led many, particularly two income households, to move to financial self-sufficiency (while abundance advances lower cost of living)
Questions ????
And
Likelihood & Preferability Poll
Mississippi Human Progress and Human Services 2035 Scenarios

<table>
<thead>
<tr>
<th>SCENARIO</th>
<th>Likelihood (0% to 100% for each)</th>
<th>Preferability (0 to 100 for each; 100 = totally preferable)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scenario 1: (Expectable) Mississippi Rising</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scenario 2: (Challenging) We Fall Down, But We Get Up Again</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scenario 3: (Visionary) Opportunity For All</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scenario 4: (Visionary) Generous, Empathic and Helpful</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
REVIEWING YOUR SCENARIO

Scan your scenario narrative
Review the slides for your scenario
In your small group discuss your answers to the two questions & develop your Scenario Team Answers

1. Human Service success, implications in your scenario in the next four years
2. Long term - Recommendations, focused on changes in the 2020s, 2030s to achieve success in human services in your scenario
MDHS Strategies and Goals

See Handout
Listening to the Scenario Reports

What do you hear in two or more scenarios?

What strategic implications?

What recommendations?

Which are “robust”? These work in 2 or more scenarios.
<table>
<thead>
<tr>
<th>SCENARIO</th>
<th>Likelihood (0% to 100% for each)</th>
<th>Preferability (0 to 100 for each; 100 = totally preferable)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scenario 1: (Expectable) Mississippi Rising</td>
<td>60</td>
<td>51</td>
</tr>
<tr>
<td>Scenario 2: (Challenging) We Fall Down, But We Get Up Again</td>
<td>51</td>
<td>30</td>
</tr>
<tr>
<td>Scenario 3: (Visionary) Opportunity For All</td>
<td>23</td>
<td>33</td>
</tr>
<tr>
<td>Scenario 4: (Visionary) Generous, Empathic and Helpful</td>
<td>28</td>
<td>67</td>
</tr>
</tbody>
</table>
Next Steps and Feedback
IAF Advice:

Monitor how the futures unfold
Anticipate opportunities and threats
Pursue your recommendations
Check your aspirations & create your preferred future for human services!
Last Words
And
Thank you!!