



# COMMUNITY MEMBER EXPERIENCES WITH COLLABORATIVES: PRELIMINARY FINDINGS

September 2021

The first two-and-a-half years of the Aligning Systems for Health project highlighted the importance of community co-leadership in cross-sector collaboratives.<sup>1</sup> Community co-leadership is expected to help collaboratives focus on community concerns and promote more equitable outcomes. Understanding community members' prior experiences with collaboration may help institutional partners better collaborate with community partners, improving the odds of successful co-leadership.

In July and August 2021, the Georgia Health Policy Center (GHPC) conducted interviews and a focus group with 15 community members who have participated in, and in some cases been affected by, collaboratives in their communities. Participants were identified through GHPC partner organizations in California, Mississippi, Florida, and Georgia.

Participants took part in interviews that lasted one to three hours. Interview questions focused on:

- Participants' perspectives on cross-sector collaboration, based on experiences either providing or receiving services; and
- Ways that institutional partners in health care, public health, and social services can collaborate effectively and equitably with community members.

Interview participants then joined in either an additional interview or a two- to three-hour focus group to:

- Review the themes that emerged during the interviews; and
- Share ways to identify goals and to measure outcomes in community-oriented collaboratives.

This brief reviews themes drawn from the interviews and focus group and was reviewed and revised in partnership with the participants. By thinking about these themes, institutional partners can improve their odds of successful collaboration with community members.

## THEMES

### Helpful Actions

Participants were often familiar with multiple collaboratives and could compare their experiences. In several cases, helpful activities were recommended. These include promoting community decision-making,

<sup>1</sup> Aligning Systems for Health is a project of the Robert Wood Johnson Foundation and is coordinated by the Georgia Health Policy Center. Researchers at the Georgia Health Policy Center recently published a review of research on community voice in health collaboratives. Petiwala, A., Lanford, D., Landers, G., Minyard, K. (2021). Community voice in cross-sector alignment: concepts and strategies from a scoping review of the health collaboration literature. *BMC Public Health*, 21, 1-11. Available at <https://link.springer.com/article/10.1186/s12889-021-10741-9>

supporting community capacity for leadership, promoting the inclusion of community researchers and experts, building relationships with community members, working with trusted community leaders, improving communications between institutions, and clearly planning for programs ending or programs continuing.

In many cases, participants' community organizing activities focused on social services at the local level. However, a few participants also pointed out needed systems changes. One suggestion was to increase funding for needed programs. Another suggestion was to reduce funding to middleman organizations so it could be better used for direct service provision. Other ideas included policies and grant programs that improve accountability. Accountability to community leaders or leadership committees was thought to be especially important.

### Relationships, Time, and Commitment

A few participants expressed frustration with institutional partners who did not build community relationships, who entered communities largely for self-serving reasons, or who involved themselves with communities only to leave without first planning their exit with community members. To address these issues, participants suggested long-term relationship building, connecting with community members through partners the community trusts, and involving community members in planning.

Several participants discussed the need for planning "if," "how," and "when" institutional partners leave the community, for example when a grant runs out. Some participants noted that relationships should be designed to outlast grants. Others underscored the importance of having people from the local community as formal members of the collaborative and its institutions from the beginning. Other participants discussed the importance of planning collaborative efforts so they do not fizzle — for example by planning a distinct end to specific efforts, by making plans to continue, or by helping build the community's capacity to sustain initiatives after startup efforts and funding.

### Community Priorities

Some participants felt that they, and other community members, were often not asked about the services provided in their communities. Even more than before, institutions have had difficulty adapting and selecting the most helpful services during the COVID-19 pandemic. Participants noted that accessing even normal services within their communities had become more difficult and that this was causing even greater health and social service needs than before.

Several solutions for ranking needs were discussed. These focused on working with community partners who may be able to help institutional partners understand and address community needs. Several types of community members were described as trusted in communities. These included community committees, community health workers, social service providers, and community leaders.

### Community Leadership Groups and Accountability

Participants stressed the importance of community groups shaping activities, identifying goals, and assessing outcomes. Participants highlighted the importance of community scientists, researchers, experts, and resident leaders. Approaches to problem identification and program assessment were also recommended, including a results-based accountability approach. The results-based accountability approach was described as being helpful for two reasons: It helps clarify language for everyone involved, and it emphasizes community member leadership at the beginning, middle, and end of a project. Data collection and analysis was also described as critical. Data can be useful in daily operations, and it can also be helpful for measuring the successes and setbacks of collaborative efforts as a whole.

### Competition Between Organizations

Competition between organizations was identified as a problem in several cases. For example, while data was described as important, participants noted that it does not always flow freely because competition over funding had discouraged data sharing. Competition was also described as diluting service provision or resulting in services mimicking each other instead of addressing different needs.

## Community Expertise

Some participants noted that when they are introduced at meetings, they are often overlooked or dismissed. They are often introduced by name only, without their background, while other leaders and researchers are introduced with background and titles. In some cases, community members were not included in the whole meeting. Participants described feeling disrespected and uneasy in these cases. Participants suggested giving community members the same respect and comforts as others at meetings. Participants also suggested stressing the educational backgrounds and professional and experiential expertise of community members as much as the expertise of others in collaborative group settings.

## Moral Commitment

Participants often felt a sense of duty for engaging in community organizing, working with researchers, and interacting with collaboratives in their communities. This was accompanied by a strong sense of moral commitment. Several participants said they expected a similar sense of commitment and responsibility from institutional partners. Some of the participants also said that compassion is a must for institutional partners and anyone else who works with community members.

In some cases, moral commitments can serve as a safeguard. One participant noted, "Our communities trust us to look out for their best interest and to advocate as such. It has often been said that 'if you do not stand for something, you will fall for anything.'" In this sense, having a sense of moral purpose helps create focus and serves as a tool for assessing whether the right path is being taken.

## Partner Communication

While participants widely welcomed having decision-making influence, some situations were identified in which institutional partners failed to communicate among each other. In those situations, community-based organizations became overtaxed in their roles as communication hubs. To address this problem, participants suggested a "both-and" approach. In this approach, institutional partners work together without the need for constant intervention on the part of community members, but institutional partners also help build community capacity for participation in central decision-making.

## CONCLUSION

Knowing community members' prior experiences with collaboratives may help institutional partners better collaborate with their community colleagues. The objective of this brief is to provide a glimpse of the experiences of several community members in cross-sector collaboratives. The community members who took part in this study came from across the country and interacted with collaboratives as community organizers, as service users, or as both. During interviews and focus groups, participants shared their thoughts on helpful actions, relationship building, timing, commitment, community priorities, community leadership groups, accountability, community expertise, moral commitment, and partner communication.

Institutional partners wishing to collaborate with community partners may be more successful if they invest in building relationships with community members and understanding community contexts. This brief contains several issues that may be good to consider in the process of building collaborative relationships with community members.

## ALIGNING SYSTEMS FOR HEALTH

Health Care + Public Health + Social Services

55 Park Place NE, 8th Floor  
Atlanta, GA 30303  
[ghpc.gsu.edu/project/aligning](http://ghpc.gsu.edu/project/aligning)