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MAKING ALIGNING WORK: NATIONAL EXPERTS REFLECT ON CONTEXT AND OUTCOMES FOR ALIGNING

Aligning Systems for Health: Health Care + Public Health + Social Services, sponsored by the Robert Wood Johnson Foundation and led by the Georgia Health Policy Center (GHPC), is focused on learning from stakeholders across the nation about effective ways to align these three sectors to better meet the goals and needs of the people and communities they serve.

This series mines the experience of catalysts, researchers, and funders who have been involved with efforts to align the three sectors through quarterly interviews (fall 2019 through spring 2021). These interviews with 10 selected experts are anchored around the cross-sector alignment theory of change. Following the structured interviews, participants are invited to a virtual, sense-making teleconference with GHPC researchers to assess the emerging themes across the 10 conversations.



The *Making Aligning Work* series captures themes, lessons, and trends from the interviews and sense-making sessions. This first brief focuses on themes around the context and outcomes of aligning efforts.



CONTEXT: CO-CREATION, URGENCY, AND HISTORY

Unlike past examples of collaboration that may have been grant-driven, the majority of interviewed experts say that current aligning efforts have a stronger sense of community engagement and community-based leadership. Many cite local examples that extend beyond community participation and the presence of a community voice at the leadership table to formal inclusion in governance and power-sharing arrangements, including board-level involvement.

Interviewees described the context of aligning case examples in a way that paralleled contextual drivers of alignment, as illustrated in the theory of change. In many cases the external context served as an accelerator of alignment activity. Urgency to align may be driven by a health-related crises (e.g., high levels of lead exposure in a community), or local alignment could materialize in response to state or federal policy that presents new opportunities that alignment efforts can capitalize on (e.g., Accountable Health Community model).

Lastly, while not new, several recognized capacity factors are emerging as common contextual drivers of successful local aligning efforts. Engaged and committed leadership, and an established history of collaboration, were repeatedly cited by experts. The importance of a working history is associated with sustained relationships and established trust, both of which are recognized as enablers of alignment.



OUTCOMES: MOVEMENT ALONG A CONTINUUM

Interviewees describe a range of observed outcomes resulting from aligning efforts that fall along a continuum. The outcome most commonly cited was collaboration itself. However, outcomes could be categorized as:

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Process — Collaboratives break down the arc of work aligning into important milestones that essentially build out the scaffolding essential for alignment. These process-related outcomes include steps associated with building a shared vision and commitment. Specific items include signing a memorandum of understanding or executing data-sharing agreements and processes.



Organization or system — These outcomes include capacity development and process improvement activities that further strengthen the infrastructure necessary for enduring alignment.



Impact — Some more established initiatives have achieved measurable outcomes, including fewer sick days, decreased emergency department admissions, and increased supply of healthy housing stocks.

Recognizing that outcomes will evolve with the duration and intensity of alignment activities, interviewees describe the alignment continuum as progressing from what may be perceived as transactional activities to a true interdependency across sectors. Collaborative relationships require working through process and organizational outcomes to establish a mutually beneficial infrastructure necessary to transcend to a more permanent, formalized interdependency that is believed to be the pinnacle of alignment across sectors.



INSIGHTS FOR ALIGNING

- Alignment across the three sectors is possible and there are examples.
- The four pillars described in the theory of change — purpose, governance, data, and sustainable financing mechanisms — are present in successful aligning initiatives, and tools to build them are an important part of supporting aligning for the long term.
 - The structure supporting alignment should follow strategy.
 - Further, the degree to which multisector activity is driven by a shared use case may drive success, as too broad of a vision may limit forward momentum.
- The partnerships needed to sustain aligning are complex and multifaceted.
 - Realistically, leadership and partners responsible for local aligning are not limited to representatives of the three sectors, and these partnerships benefit from a history of collaboration.
 - While it is imperative that the three sectors are equally represented and valued, it needs to be recognized that resources, roles, and motivation for participation may differ across the sectors.
 - There is a difference between organizations aligning and sectors aligning. Health care, public health, and social service organizations participating in a local alignment initiative may not fully represent the voice of the entire sector.
- While generally understood, alignment that is built to last takes time, trust, and patience.
 - An adaptive mindset and a pioneering attitude are necessary to navigate the complexities of a multi-systems-level orientation.
 - Strategic thought and problem-solving are necessary to move from conceptualization to action.

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