



## The role of relationships in collaborative partnership success: Lessons from the Alaska Fourth R project



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### ABSTRACT

Collaborative partnerships are critical to achieving health equity. As such, it is important to understand what contributes to the success of such partnerships. This paper describes the Alaska Fourth R collaborative, a multisectoral group of agencies (including education, health and human services, the violence against women sector, the governor's council on domestic violence, and an external evaluator) that successfully planned, implemented and evaluated a multi-focus health education program statewide. The purpose of this paper was to explore the ways in which seven pre-identified factors contributed to the successful achievement of the collaborative's goals. This project was grounded in community-based research principles, and collectively, the group chose to use Roussos and Fawcett's (2000) seven-factor model as the basis for the project. Using this model as a guide, semi-structured interviews were conducted with five leaders from the key organizations in the collaborative. In interviews, stakeholders described how each of the seven factors functioned in the Alaska collaborative to contribute to project success, with a particular focus on the critical role of relationships. Three specific relationship facets emerged as cross-cutting themes: flexibility, transparency, and prioritization. In sum, taking the time to build deep and authentic relationships, and then developing a shared vision and mission within the context of relationships that are flexible, transparent and prioritized, provided a strong foundation for future success in this collaborative.

### 1. Introduction

Over the last decade, collaborative multisectoral partnerships have become the norm rather than the exception in addressing public health problems (El Ansari & Weiss, 2006). Multisectoral approaches consist of “deliberate collaborations across a variety of stakeholder groups and sectors in an effort to achieve an agreed-outcome. Through engaging multiple stakeholders and sectors, partnerships can leverage resources and knowledge while working toward a mutual goal” (Bolton, Maume, Jone Halls, & Smith, 2017, p. 3). Theoretically, there are many advantages of multisectoral collaborations, including leveraging of collective resources, achieving collective outcomes, cultivating innovation

and creativity, fostering a unified approach, strengthening credibility, promoting broader reach and impact, and maximizing advocacy power (Davis & Tsao, 2014).

However, although multisectoral partnerships are popular and have great potential, in many cases they do not achieve desired outcomes (Kreuter, Lezin, & Young, 2000; Roussos & Fawcett, 2000). Research on multisectoral collaborations has identified several key factors that contribute to the lack of national success in reaching population health goals. Specifically, multiple sectors lack shared responsibility for public health outcomes, and no public or private entity has overall responsibility for improving population health (Fawcett, Schultz, Watson-Thompson, Fox, & Bremby, 2010). There is a clear need to move beyond

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silos to a coordinated approach; such an approach requires a collaborative partnership, defined as an “alliance among people and organizations from multiple sectors working together to achieve a common purpose” (Himmelman, 1992, pg 369). There is an emerging literature identifying factors that contribute to success of these collaborative partnerships and specific steps that can support their work (Center for Community Health and Development, 2017). Grounded in such an understanding, successful collaborative partnerships, such as the one described in this paper, can create shared public and private responsibility for population health improvement. This paper describes the Alaska Fourth R collaborative, a multisectoral group of agencies (including education, health and human services, the violence against women sector, the governor's council on domestic violence, and an external evaluator) that successfully planned, implemented and evaluated a multi-focus health education program statewide. The purpose of this paper was to explore the ways in which seven pre-identified factors contributed to the successful achievement of the collaborative's goals.

### 1.1. Alaska Fourth R

#### 1.1.1. Collaborative formation

In 2008, state government and non-profit organizations in Alaska organized to create a large statewide working group to respond to the disproportionate rates of domestic and sexual violence experienced by Alaskan women. At that time, Alaska had some of the highest rates of domestic violence and sexual assault in the nation (Black et al., 2011). This partnership, entitled *Pathways to Prevention*, was funded by the Centers for Disease Control and Prevention (CDC) as part of the Domestic Violence Prevention Enhancement and Leadership Through Alliances (DELTA) program (CDC, 2016). Through their work, the *Pathways* group identified seven goals, or pathways, to domestic and sexual violence prevention in Alaska. One of these pathways was the promotion of social-emotional learning and healthy relationships skills among adolescents, through the implementation of a healthy relationships curriculum in the state. A subset of the *Pathways* group was tasked with overseeing this implementation process.

Statewide requirements for uniform policies and practices related to the health education of Alaskan children are rare, as each community is seen as distinct from surrounding communities and in need of tailored health and social services. Given this, the *Pathways* group worked to bring multi-focus school health education to the state, in order to focus on the primary prevention of domestic violence by reducing adolescent dating violence through the promotion of healthy relationships (author, 2017; author, 2009). Prevention of adolescent dating violence, in particular, requires collaboration across multiple stakeholders, because youth needs cut across health, education, and social services (Bolton et al., 2017; Davis & Tsao, 2014). Even when program implementation is solely in schools, multisectoral partnerships are still important because macro-level factors (such as leadership and human capital) provide important influences on implementation success (Domitrovich et al., 2008). Additionally, states such as Alaska that do not require comprehensive health education nor have state adopted health education curriculum may benefit from coordinated system approaches to providing consistent health messaging across social and behavioral sectors.

#### 1.1.2. Work of the Alaska Fourth R collaborative

The collaborative involved with this project chose to implement the Fourth R program because it is an evidence-based approach to preventing adolescent dating violence (Crooks et al., 2015; Crooks, Scott, Ellis, & Wolfe, 2011; Wolfe, Crooks, Chiodo, Hughes, & Ellis, 2012; Wolfe et al., 2009), and the group working to implement the Fourth R became known as the Alaska Fourth R Collaborative. Initial partners in the Fourth R Collaborative included the State of Alaska Department of Health and Social Services (DHSS), the Alaska Network on Domestic

Violence and Sexual Assault (ANDVSA) and the State of Alaska Department of Education and Early Development (EED). In 2011, when funding became available through the Governor's Office to evaluate this multi-focus school health curriculum, the State of Alaska Council on Domestic Violence and Sexual Assault (CDVSA) also became formally involved with the partnership. Thus, the core steering committee included education, public health, and both government and NGO representation from the domestic violence/sexual assault sector. Although these sectors have slightly different foci and mandates, the violence prevention focus aligned with all of their individual goals. In addition, as the Fourth R is a multi-focus program (i.e., includes units on violence prevention, healthy sexuality and substance use prevention, and is grounded in a social-emotional learning framework), it also contributed to this alignment by speaking to the needs of these different sectors. For example, the State of Alaska DHSS had a primary interest in teen pregnancy prevention and youth engagement, while ANDVSA focused on both domestic violence and sexual assault prevention and the State of Alaska EED had primary interests in comprehensive health education and social and emotional learning. Thus, the broad nature of Fourth R programming was able to speak to the needs and mandates of diverse stakeholders.

As part of the collaborative, this group of stakeholders met bi-weekly during the three-year project, in order to plan implementation and evaluation of the Fourth R state-wide (meetings occurred both with the full group, and in separate working groups focused on implementation and evaluation, respectively). Between 2011 and 2014, the collaborative oversaw the implementation and evaluation of the Fourth R in schools in 12 communities across Alaska, with reach to over 500 youth (Strategic Prevention Solutions, 2014). Members of the collaborative played a number of roles in recruiting and supporting interested schools. For example, although EED had the primary responsibility for outreach to schools for recruitment, other partners supported implementation fidelity, technical assistance and evaluation. Specifically, by the end of the three year period, an arrangement had been made whereby teachers could enter into a voluntary agreement with DHSS for implementation fidelity monitoring. Additional TA was available upon request from the partnership. In addition, the collaborative engaged an external evaluator to design and oversee an internally-funded, quasi-experimental evaluation. The evaluation included 13 schools (six intervention and seven comparison) over a two-year period. Members of the collaborative participated in the evaluation in different ways. Some of the stakeholders were able to provide funding. Others provided personnel to conduct data collection at the different sites (e.g., local ANDVSA staff conducted data collection in local communities, reducing travel costs that would have been incurred by having a research team travel around the state). Over the course of the project, the external evaluator became involved in the implementation aspects as well, and came to be seen as a member of the broader collaborative. For both implementation and evaluation, members of the collaborative were not merely advisors; they provided strategic direction, and significant personal and organizational resources to carry out project objectives.

During the three-year project, it became clear to partners that the collaborative itself was essential for successful statewide program implementation and evaluation of the Fourth R: no one member of the group could have achieved the same outcomes on their own. Collaborative partners were highly successful in meeting their implementation and evaluation goals. Collectively, they were able to leverage additional funding and resources to evaluate the implementation of the Fourth R, which is the first known multi-focus health education curriculum in Alaska secondary schools. Furthermore, it also created a foundation for sustainability and continued dissemination; three years following the end of the research funding, the Fourth R continues to be disseminated and utilized in Alaska.

Given the noted challenges with creating successful collaborative partnerships that achieve systems change (Roussos & Fawcett, 2000),

project partners were interested in more deeply exploring and documenting how this particular partnership achieved success. To this end, they approached the two first authors of this paper (who were engaged in the external evaluation) to partner on this exploration through a community-based research approach. This paper presents an exploration of factors that provided the foundation for collaborative success, as well as documentation of how these factors functioned to promote systems change in the Alaska Fourth R collaborative. We conducted interviews because they are an appropriate methodology for illuminating the experiences of those directly involved with the multisectoral collaborative. Furthermore, these interviews served to explore how this multisectoral collaborative was able to achieve its goals. This work is an important addition to literature on multisectoral collaborative partnerships, because although a number of articles identify factors related to successful multisectoral collaboration, there is a much smaller body of work that more deeply explores *how* these factors relate to collaborative functioning and subsequent systems change.

## 2. Methods

For this paper, the leader from each of the collaborative partners ( $n = 5$ ) participated in a semi-structured individual phone interview (i.e., participants from two state departments, the external evaluator, a grassroots violence prevention organization, and the governor's council). As leaders of their respective units within their organizations, each participant was uniquely positioned to reflect on their own individual experience, in addition to the successes and challenges of the collaborative as it aligned or challenged the systems in which they work. We undertook this exploration from a community-based research approach, whereby the collaborative was the community of interest. This approach aims to address structural inequities by involving community members, organizational representatives, and researchers in all aspects of the research process (Israel et al., 2010). In addition, we set out to collectively negotiate perspectives to illuminate understandings, and also to negotiate meaning and learning (Janzen et al., 2017). To start this process, we met as a full team in Alaska in April 2014, and collectively participated in a group consensus-building activity to discuss how best to share the story of the collaborative. This activity included discussion of the seven factors, a graffiti walk where participants reflected on common challenges faced by collaborations, and a group discussion of problems of practice (i.e., issues that get in the way of individuals doing their job). As part of this activity, the group explored whether factors previously suggested by Roussos and Fawcett (2000) felt like a good fit for more deeply exploring their experiences: in a systematic review of literature on collaborative partnerships, Roussos and Fawcett (2000) describe seven factors that influence the capacity for collaborative partnerships to affect community and system change, specifically: a) having a clear vision and mission; b) action planning for community and systems change, c) developing and supporting leadership, d) documentation and ongoing feedback on progress, e) technical assistance and support, f) securing financial resources for the work, and g) making outcomes matter. Through the graffiti walk and subsequent discussion that occurred during the consensus building activity, the group collectively felt that these factors represented what had influenced success in this partnership, and came to consensus that these factors provided a useful organizational structure from which to further explore the collaboration's success. However, while they concurred with the seven factors, the group identified that social capital was missing as a major driver of success. Collectively, the group decided to add relationships to the framework being explored.

The group also decided collectively that individual interviews would be used to further explore and contextualize the factors within the larger work of implementing and evaluating the Fourth R in Alaska. Using the key discussion points from the consensus-building activity (including the role of relationships in facilitating the collaboration's success), the two first authors developed the interview guide, which

focused on *how* the seven factors emerged in the work of the Alaska Fourth R collaborative, and also how relationships among key stakeholders facilitated or hindered the seven factors identified by Roussos and Fawcett (2000). The interview guide was then reviewed by all members of the collaborative, and feedback incorporated. The interview guide is available from the first author. The interviews were conducted jointly by the first two authors of this paper, who are academic researchers that served as consultants to the larger evaluation project. Participants were sent the interview questions prior to the interview to give them the opportunity to reflect on the questions. They were also provided with definitions of the seven factors (see Roussos & Fawcett, 2000). Because the framework for this paper was co-created among authors, and members of the collaborative were both informants and authors, separate ethics approval was not obtained for the interviews; however, interviewees were reminded of their option to decline the interview, decline to answer specific questions, and/or withdraw their interview from the study. They were also notified that interviews were being audio-recorded and asked to provide verbal consent.

Interviews lasted approximately one hour and were audiotaped and transcribed verbatim. Qualitative description methodology was used to guide data analysis (Sandelowski, 2000). This methodology provides a "comprehensive summary of an event in everyday terms" (p. 336), and thus was seen by stakeholders as appropriate for this project. Data were coded and themed by the first and second authors using simultaneous and descriptive coding (Saldaña, 2012). Participants had two member checking opportunities. Prior to any coding, each individual was given the opportunity to review their transcript and make changes or deletions. Subsequently, everyone had the opportunity to critically review draft manuscripts and offer revisions, and all participants are authors on this paper. Collectively, the group decided to use pseudonyms for the interview quotes included in this paper.

## 3. Results

The consensus building activity that was employed to frame this project required participants to identify various successes and challenges across the seven factors identified by Roussos and Fawcett (2000). Participants were able to readily identify clear examples within each factor. During the consensus activity, participants also identified the critical role of relationships in fostering the success of the Alaska collaborative, and so the in the interviews, we chose to explore each of the factors identified by Roussos and Fawcett (2000) in the context of relationships. Through this process, relationships emerged as the key mechanism through which the seven factors influenced success within the collaborative; specifically, each of the seven factors was clearly founded on strong relationships, and relationships allowed the group to successfully work together to realize each of the factors within the collaborative. Individual interviews were conducted and analyzed for a deeper understanding of each factor, as well as to identify counter perspectives. Below we discuss each of the seven factors as the collaborative understood it to operate in the Fourth R Alaska project, as well as the underlying role of relationships.

### 3.1. Successes within the Roussos and Fawcett (2000) factors: relationships as catalyst

#### 3.1.1. Having a clear mission and vision

This factor refers to identifying the purpose of the work (including outcomes). By identifying the purpose, having a clear mission and vision may also help generate awareness of and support for the partnership, improve the efficiency of the group, and minimize competing agendas (Roussos & Fawcett, 2000, p. 384). In the Fourth R collaborative, stakeholders were clear that the relationships developed as part of a prior, larger state initiative (*Pathways to Prevention*) were key to establishing a shared vision. The other systemic backdrop was the Governor's Initiative, which set aside separate monies to improve the

statewide response to and prevention of domestic violence and sexual assault, and provided the resources necessary for partners to coalesce around an outcome (violence prevention) of shared interest. Together, these two influences helped partners identify a clear mission and vision upon which the Fourth R project could build, with stakeholders feeling equal ownership, regardless of their organizational mandates and roles.

*There's this layer of a step back from [the Fourth R collaborative], that one of my roles being funded through the...DELTA project that [CDC] fund[s], [and] part of our, I guess, mandate or the obligation within that grant was to work to develop a statewide collaborative and with that collaborative to kind of develop a road map for prevention within Alaska for domestic violence and sexual assault prevention...within that there were a lot of different focus areas and one of the areas within those seven pathways was focused on either social and emotional learning or healthy relationship curriculum in K through 12. So that was one of the pieces. (Becky)*

This shared vision, developed through relationships, also created a sense of working collaboratively towards something larger than the individuals involved, and larger than their organizations. Thus, when the smaller working group began the Fourth R project, there was already a clear vision as well as an appreciation of working across sectors.

*We've done such an extensive job of developing a statewide plan... I'm kind of hoping to set a new standard that what drives state work doesn't necessarily have to be state led, and it can be coalition driven with many different participants, not just state employees. (Lana)*

### 3.1.2. Action planning for community and systems change

Action planning helps collaborative partnerships determine who will do what and when, and is thus key to successfully achieving goals and objectives (Roussos & Fawcett, 2000, p. 384). The Fourth R collaborative benefited from a combination of formal and informal approaches to action planning.

On one hand, the strong relationships created a flexibility and efficiency to respond to challenges.

*It is a group that has maintained relationships for common outcomes over the past, almost ten years now, while at the same time, [we] push and pull one another and give and get from one another in order to make a particular project happen. (Susan)*

Part of the efficiency of the group came from a deep knowing of what others were capable of both individually and within their organizational roles. Furthermore, when challenges were encountered within the group, there was a trust that each member was doing their best to move towards the common vision, within the confines of their job.

*I think we're all skilled at professional relationships and interpersonal relationships so that we can talk through difficult things. You know, we have different political perspectives and requirements from our [leadership], and so we've been able to navigate that just by working together. (Jenna)*

The strong relationships among members of the collaborative were an important foundation for this solution-focused stance.

*Well I know it sounds simple but I really believe that being able to connect with people authentically is helpful and that being able to do that - to get to know each other over time - has been helpful to our process, to be more patient with each other...so we have this better - we can do [what we need to do] without getting really upset or too frustrated about it and just think, "okay, well how do we deal with this?" I think the experience of saying "hey, we can figure out how to navigate these things that are tricky, we've done it before" is helpful, too. (Becky)*

On the other hand, the collaborative did not use their strong relationships as an excuse to take shortcuts. They implemented strong

program management practices and clear structures (i.e., there were regular meetings with agendas and action items, as well as Memorandums of Understanding between participating organizations).

*[We had] an annual workplan. And at the federal level we were required to do semi-annual progress reports. And on an annual basis we would redo the contract with [collaboration partner] and we would outline a workplan and new budget. And so there was always that discussion. (Jenna)*

*We took meeting notes, we documented things, and then also we left space at every meeting for anyone to speak up if they thought something needed to be changed or shifted, and sometimes that just happened and we addressed it as a group. (Susan)*

### 3.1.3. Developing and supporting leadership

Leadership was identified by Roussos and Fawcett (2000) as one of the most important internal factors in predicting collaboration success, and involves individual(s) guiding the group to achieve objectives. During interviews, several members of the Fourth R collaborative identified one individual as the de facto leader of the project, but the group also consistently described a distributed leadership style whereby leadership emerged in the interactions among the team and was context dependent (Spillane, 2006). Consistent with distributed leadership, there was also an awareness of socially distributed cognition (Hutchins, 1995), in that the knowledge required to successfully complete any one component of the project was seen not as residing in an individual, but as housed within the larger group.

*I think even though Becky's leadership has been one of group ownership, I think there's a reality that – and each of us own, not own - own is a poor choice of word - but perhaps share leadership responsibilities for subgroup work. (Lana)*

*I think everybody was doing a piece in networking to kind of make it go, and Michelle did a fair bit of negotiating with key folks at the school. And Michelle facilitated the meetings, and definitely Becky, and I'm sure [other partner] and then myself...all sort of pushed to make that communication as effective as possible. (Jenna)*

Furthermore, the group spoke to being very strategic about which member would lead different project pieces, based on an awareness of each other's organizational and social capital.

*There's a systems piece that we need to navigate, and I think that really helps... And I think understanding systems and how systems work to your benefit. (Lana)*

*But everyone put forward ideas and I think everyone had to say, "hey, my department can do this; my department can't do that; can [your department] help with this because [my department can't] do this thing?" So there were all those kinds of aspects. (Becky)*

### 3.1.4. Documentation and ongoing feedback on progress

Documentation, as conceptualized in the Roussos and Fawcett (2000) model, refers to creating feedback systems for evaluating outcomes throughout the project, in order to conduct continuous quality improvement, to address barriers and to celebrate success (p. 386). In our interviews, stakeholders' comments reinforced the connections between good documentation practices and clear accountability.

*... the minutes from the implementation meeting, she's been doing a beautiful job with those. And I do think those facilitate action items... so having action items at the end of each meeting, and then being accountable to reporting on what did you do two weeks later has helped us make those meetings pretty effective. (Jenna)*

Although solid interpersonal relationships facilitated these processes, members of the collaborative did not rely on these relationships

in lieu of formalized process. For example, roles were formally articulated and documented.

*Well, I think a strength is the individual personal relationships developed, but I think that then we formalized our roles and responsibilities, and they are - they were - job roles. (Michelle)*

This formalization of job roles was also seen to facilitate stability when members of the collaborative transitioned within a particular organization, so that new relationships could be built.

*So [for the formation of the collaborative], it's like a lot of factors coming together but I think it's about formalizing the processes within agencies that the staffing that were leaving were committed enough to it to have that kind of transfer in that there was some funding or some kind of mandate to be partnering and working on this in some way... (Becky)*

### 3.1.5. Technical assistance and support

Technical assistance pertains to “the training and support needed to implement and sustain a collaborative partnership” (Roussos & Fawcett, 2000, p. 387). In the Fourth R collaborative, technical assistance occurred both within the group and with the assistance of external resources. Within the group, the respect for socially distributed cognition meant that members of the group valued opportunities to learn from each other.

*But really if I could just say it's been really one of the best experiences of my professional life. I really just enjoy each person and it just makes my work, it enriches my work. Their relationships and the knowledge I have has really enriched my work. And the thought of going back to a siloed approach, I couldn't do it, I wouldn't do it. It just changed me that much. (Lana)*

*We just all had different things and we were able to learn about what one another's areas of expertise were and also to be able to tap into them as needed for different things. I think that's kind of a neat thing that happens a lot in our state. But from my perspective it's like it's really easy to go to like a conference and then just kind of be inspired and then not really do anything with it. But I think that a lot of us took those opportunities to use it as like a next step to working together. (Becky)*

External technical assistance also tended to be accessed through existing relationships of the collaborative.

*You're colleagues in this plan for the work at a state level and you rely on each other when you need feedback... or needing technical assistance for various program. You have this great group of people now that are committed to these changes, and all the resources that they know that you don't know. (Lana)*

### 3.1.6. Securing financial resources for the work

Securing financial and human resources is foundational for the work of collaborative partnerships (Roussos & Fawcett, 2000). During the interviews, all Fourth R collaborative participants identified the importance of receiving funding from a number of different sources and mandates for the feasibility of the project. The Governor's Initiative money in particular gave the collaborative formalization and legitimacy at their agencies, and the space to build relationships with colleagues from different sectors.

*Well I think that the Governor's Initiative helped a few ways... one, because it was bringing higher level folks together to say, "Hey, how do we all work on this issue that's impacting health and corrections and education and everything?" (Becky)*

The securing financial resources theme was closely related to having a clear mission, because this clearly identified and agreed upon mission allowed members of the collaborative to respond nimbly to funding-related requests or opportunities based on confidence that it was

helping the group move towards their vision. That is, if someone presented an opportunity to apply for funding related to dating violence prevention, then the group knew they would move forward immediately, rather than having to spend time discussing whether to proceed.

*I think there's a culture of just asking and offering... within the collaborative I have money for this if you have money for that, or how do we make this work? (Michelle)*

#### 3.1.7. Making outcomes matter

To sustain success, it is important for outcomes to be relevant to individuals beyond the partnership: specifically, “the more the outcome promoted by the partnership matters to community members, grant makers, and influential leaders within and beyond the community, the more likely there will be human and financial support for progress towards outcomes” (Roussos & Fawcett, 2000, p. 387). In relation to this, Fourth R collaborative stakeholders talked about the importance of relationships in making outcomes matter at multiple levels. At the political level, the collaborative created a strength in numbers in that the relationships each member held with additional stakeholders contributed to the credibility of the whole.

*Well I think that it's helpful when [Michelle] can go and talk to her boss or her boss's boss or whatever and say, "Hey, there's this whole group and I'm part of it and this group is really trying to move this forward." (Becky)*

Relationship-based approaches also became necessary to engage the education system when trying to implement the curriculum statewide.

*I think that's still a challenge, ongoing challenge, but I think it's building relationships with schools too. It's not just the relationship of our collaborative where – we're all building relationships with teachers, schools, and districts. (Michelle)*

## 3.2. Challenges

While overall the project was successful in achieving systems change, interviewees also identified a range of challenges that occurred at different levels and at different points in the project. Challenges include logistical challenges (e.g., travel and geography, time demands), evaluation challenges (e.g., challenges balancing rigor and real world evaluation), and challenges promoting implementation (e.g., encouraging implementation fidelity among educators).

#### 3.2.1. Logistics

Logistical challenges occur in any multisectoral partnership, but in the case of Alaska, the geography involved adds another layer of complexity. The state of Alaska is diverse both in terms of population and geography, with nearly 740,000 people spread over 663,300 square miles. While diversity of people and geography make for a rich and unique culture, it introduces difficulties in the planning and delivery of social and health services. Vast geographical distances separate villages and towns, making travel and technical assistance expensive and rare. As a result, time requirements for the project were heavy, both in terms of the weekly meetings, but also the extra work involved for each of the partners.

*Yeah, I mean it took a lot of time and we all are working. Again, this is just one thing we're all working on. We all have many, many, many other pieces of the web that we're working on weaving I guess. So this is just one piece of that web. (Becky)*

#### 3.2.2. Evaluation challenges

Across interviews, evaluation emerged as an area where there was sometimes a collision of organizational goals and mandates. This

collision emerged in part as a result of receiving state funding for the evaluation, which sped up the timeframe within which results were expected (Crooks, Exner-Cortens, Siebold, Rosier, & Baker, 2017). This challenge is also described by Roussos and Fawcett (2000) in terms of action planning, as “time limitation(s) for planning, based on funding agency or locally set requirements, may force decisions...” (p. 385). For the evaluator, there was at times frustration that implementation was still evolving as the evaluation was underway.

*Things are demanded at a high rate and intensity in Alaska because there's such a need for it. And with this group, people get excited and they say “Oh, I have this money, let's fund it, go, go go.” And that's good in a lot of senses and also can be hard when you're rolling out a controlled evaluation study. (Susan)*

At the same time, practitioner members of the collaborative felt that the formal evaluation at times eclipsed an equally important focus on developing meaningful ongoing feedback loops.

*And I think, in my mind, again, the evaluation, the formal evaluation, took so much time that we weren't planning and developing the process evaluation... we didn't get the implementation and the process evaluation ironed out until practically we had done all our work with the formal evaluation, the outcome evaluation. (Michelle)*

In discussing the evaluation challenges, the group reached consensus that a major challenge was the intense political pressure to produce outcomes in a very short timeframe. This pressure meant that the outcome evaluation had to begin even before the implementation challenges were worked out.

### 3.2.3. Challenges promoting implementation fidelity

The final challenge identified by numerous stakeholders in the interviews was tension around promoting implementation fidelity. Many challenges to having educators implement evidence-based programs with fidelity have been identified in the literature (e.g., time and resource constraints; Forman, Olin, Hoagwood, Crowe, & Saka, 2008). As a result, implementation fidelity is often poor; for example, one national study found that only 25–50% of school-based programs were implemented at dosage levels (defined as number of sessions) comparable to those in research-based programs (Gottfredson & Gottfredson, 2002). An additional challenge that emerged in the Alaska context was a mismatch in philosophies between education and public health. Namely, educators are trained to value differentiated instruction, which posits that there is no one effective way to approach a student (Levy, 2008), whereas public health initiatives are often focused on the implementation of evidence-based programs with high fidelity. As such, the differentiated instruction approach may be viewed as misaligning with expectations of evidence-based programming, where there is more emphasis on delivering a program as provided. In sum, educators may find aspects of a program valuable, but still may not be able to implement with high fidelity for a number of reasons.

*So I think that having the implementation of the Fourth R be desired and easy for schools and teachers is one thing that schools ...would be looking for, where [other department] would be looking for - ...teaching with fidelity. (Michelle)*

## 3.3. Cross-cutting themes underlying collaborative success

The final step of our analyses involved identifying cross-cutting themes that emerged across the individual factors and challenges. Three cross-cutting themes emerged.

### 3.3.1. Flexibility

Flexibility across multiple levels was evident in all interviews. Stakeholders spoke of individual flexibility, organizational flexibility, systems flexibility and flexibility with the collaborative action plan to

modify strategies that were not working. The flexibility was grounded in the powerful relationships and overriding sense of shared mission.

*I think [flexibility] is one of the key elements of the collaborative aspect of this group in particular... [We] very quickly come to consensus and ownership around who has power at the table, who has the political and organizational leverage within state systems, and even non-profits just within the infrastructure of the state of Alaska. [We] know and [we] discuss and [we] figure out pretty quickly who can provide what and take very much a team approach. (Susan)*

### 3.3.2. Transparency

Stakeholders talked about being transparent with each other in a number of ways. Firstly, they were transparent individually about both personal and organizational strengths and weaknesses. An obvious example of this type of transparency was the willingness to contribute financial resources and openly share individual budgets with each other. This free and willing pooling of resources transpired within the context of a clear, shared mission. Secondly, transparency extended to accountability and a willingness to take personal responsibility when action items were not achieved. Finally, there was transparency in interactions; even when side conversations occurred, they were always brought back to the larger group.

*There really does feel like – you know I meant not to say that we don't ever disagree with each other even at a personal level, but I think there is that, I think there is now a really deep respect of all our colleagues. And we share information and we trust that we will share information. (Lana)*

### 3.3.3. Prioritization of relationships

Throughout the interviews, the concept of distributed success overrode any need for personal accolades or recognition. The group was inclusive and generous in support for its members, while understanding the challenges each faced within their own organizational context.

*I really do think our relationships are valued more than our job roles, because I know if we change jobs in Alaska, which does happen, we might be meeting each other over and over again, working on different things. So in my mind, I value our working relationships more than the particular project. (Michelle)*

## 4. Discussion

### 4.1. Main findings of this study

The purpose of this study was to illuminate the success of the Alaska Fourth R collaborative in undertaking the statewide implementation and evaluation of a dating violence program. To frame this work, we used Roussos and Fawcett's (2000) model of interconnecting factors influencing the rate of collaborative partnership success in achieving community and systems change. During the consensus building activity, we found that the factors identified by these researchers were also salient for the multisectoral collaborative partnership described in this paper. During the subsequent interviews, we found that relationships were the foundation for how these factors presented in the Alaska collaborative. Furthermore, these factors were highly interrelated, as previously described by Roussos and Fawcett (2000). A deeper analysis of the dynamics within the collaborative provided insight into how relationships allowed this diverse group of stakeholders to plan, implement and evaluate the Fourth R so successfully.

Overall, our findings align well with past work looking at collaboration success, where “the common factors identified for successful community collaborations...include attention to trust and relationships building, sharing the credit for the group's accomplishments, the need for leadership, commitment of time for the collaborative process, the equal sharing of decision making, adequate resources, and home

organizations dedicated to the act of community collaboration" (Perrault, McClelland, Austin, & Sieppert, 2011, p. 284). Essentially, our participants spoke to this important combination of relationships and strategy, coupled with a strong commitment to the project:

*Well I think over time you kind of learn what people's strengths are and maybe what they're not. Not just on a personal level because there's definitely that but also for your organization...so I guess we would just like figure it out - we really figured out what one another's strengths were and we tried to build on that. If someone could help navigate something internal to the state's system then Michelle and Lana and Jenna could work together to do that and get that approved up the chain...If it made sense for us to be reaching out or asking something or contract - we would figure out how to do that here at [my organization]. So basically we all just figured out what we could do and what we needed each other to do and just did it. I know it sounds simple but that's kind of how it went. (Becky)*

Findings also support past work highlighting the critical role of capacity at the organizational, program and social levels to collaboration functioning (Foster-Fishman, Berkowitz, Lounsbury, Jacobsen, & Allen, 2001). However, information provided by stakeholders in this project also consistently demonstrated the importance of flexibility, transparency and the prioritization of relationships. Together, these three cross-cutting themes suggest a collectivist culture within this collaborative, where the goals of the group were placed ahead of the goals of individual people and organizations (Robert & Wasti, 2002). In turn, this collectivist culture supported the success of the collaborative.

The emergence and success of distributive leadership was noteworthy given the very different leadership structures of the different partnership organizations. Members of the collaborative represented very hierarchical organizations (e.g., state departments) where there is a clear chain of command and approval process for decisions, as well as more feminist-oriented violence prevention organizations that tend to have a flatter structure. Yet despite these differences in leadership within the partners' respective organizations, the collaborative was able to develop a very effective model of distributive leadership. This leadership model is an important area for future research; indeed, leadership is the most frequently studied contributor to successful collaboration, but there has been little consensus in how to conceptualize or measure it (Stolp et al., 2017).

#### 4.2. Lessons learned

In terms of exploring the factors previously identified by Roussos and Fawcett (2000), we identified the critical role of relationships in facilitating collaboration success, and how relationships provided the foundation for each of the factors. Given this, we feel there are three take-away lessons for practitioners engaging in collaborative work.

First, it is critical to take time to build consensus around the group mission, in order to align all partners with a common goal. In the case of the Alaska collaborative, this mission-building provided a core vision that allowed intersectoral engagement and challenged the traditional silos that can build up around violence prevention work (e.g., advocacy work vs. health vs. education). In addition, the vision in this case had already been jointly determined by the larger *Pathways* umbrella, which meant that this project began with considerable momentum. In effect, selecting, implementing and evaluating the Fourth R was seen as an effective way to operationalize the *Pathways* vision.

Second, each member of the collaborative needs to understand the organizational context of the other members, in order to understand what their colleagues are (and are not) capable of within the confines of their job, and to work in a strategic way to overcome organizational barriers by drawing on the collaborative's collective capacity. This perspective prevented members of the collaborative from becoming frustrated or personalizing issues when another member of the collaborative was having difficulty delivering on action items. Rather, there

was an understanding that others were doing the best they could within the constraints of their professional roles.

Finally, as opposed to an individualistic model where everyone wants the praise but nobody wants to do the work, the success of the Alaska collaborative was grounded in a model where the glory was shared, but accountability was personal; tasks were done on time, the burden of work was fairly distributed and members were willing to take responsibility when things did not go as planned. Together, these all contributed to the collaborative's success.

#### 4.3. Limitations

Our sample consisted of all women, and given the relational nature of female development (Gilligan, 1982), it is possible the role of relationships would not have emerged as strongly if men had been included. However, this selection bias reflects the real-world nature of the work: only women were interviewed because the key leaders and stakeholders at these agencies were all women. Two previous studies that empirically investigated predictors of collaboration success have found that women are both more likely to collaborate (Pinto, 2013) and report higher levels of collaborations than males (Brown, Hawkins, Arthur, Abbott, & Van Horn, 2008). All participants were also located in Alaska, which is likely a unique context because of its location and history. Thus, these findings need to be replicated with samples of both men and women in other geographic locations.

#### 4.4. Conclusion

In sum, this paper documents how a multisectoral collaborative in Alaska was able to successfully plan, implement, and evaluate a multi-focus school health program. Interviews with members of the multisectoral collaborative identified the ways in which different factors played a role in facilitating the success of the statewide implementation and evaluation of the Fourth R, and the ways in which strong relationships provided an underlying foundation. These are no small accomplishments in a state that does not mandate health education. Although the seven factors identified by Roussos and Fawcett (2000) were all evident in the functioning of this collaborative, the overarching theme of relationships superseded individual factors.

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#### References

- Black, M. C., Basile, K. C., Breiding, M. J., Smith, S. G., Walters, M. L., Merrick, M. T., ... Stevens, M. R. (2010). *The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 summary report*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.
- Bolton, K. W., Maume, M. O., Jones Halls, J., & Smith, S. D. (2017). Multisectoral approaches to addressing youth violence. *Journal of Human Behavior in the Social Environment*, 27(7), 1–8. <http://dx.doi.org/10.1080/10911359.2017.1282913>.
- Brown, E. C., Hawkins, J. D., Arthur, M. W., Abbott, R. D., & Van Horn, M. L. (2008). Multilevel analysis of a measure of community prevention collaboration. *American Journal of Community Psychology*, 41(1–2), 115.
- Centers for Disease Control (CDC) (2016). *Domestic Violence Prevention Enhancement and Leadership Through Alliances (DELTA)*. Retrieved from <https://www.cdc.gov/violenceprevention/delta/>.
- Center for Community Health and Development. (2017). Retrieved September 15, 2017, from the Community Tool Box: <http://ctb.ku.edu/en>.
- Crooks, C. V., Scott, K., Ellis, W., & Wolfe, D. (2011). Impact of a universal school-based violence prevention program on violent delinquency: Distinctive benefits for youth with maltreatment histories. *Child Abuse and Neglect*, 35, 393–400.
- Crooks, C. V., Scott, K. L., Broll, R., Zwarych, S., Hughes, R., & Wolfe, D. A. (2015). Does an evidence-based healthy relationships program for 9th graders show similar effects for 7th and 8th graders? Results from 57 schools randomized to intervention. *Health Education Research*. <http://dx.doi.org/10.1093/her/cvq014>.
- Crooks, C. V., Exner-Cortens, D., Siebold, W., Rosier, M., & Baker, J. (2017). Building capacity to implement teen dating violence prevention: Lessons learned from the

- Alaska Fourth R initiative. In D. Wolfe, & J. Temple (Eds.). *Dating violence: Theory, research, and prevention* New York: Academic Press/Elsevier. <http://dx.doi.org/10.1016/B978-0-12-811797-2.00020-7> Chapter 20.
- Davis, R. A., & Tsao, B. (2014). *Multi-sector partnerships for preventing violence: A guide for using collaboration multiplier to improve safety outcomes for young people, communities and cities*. Oakland, CA: Prevention Institute.
- Domitrovich, C. E., Bradshaw, C. P., Poduska, J. M., Hoagwood, K., Buckley, J. A., Olin, S., ... Ialongo, N. S. (2008). Maximizing the implementation quality of evidence-based preventive interventions in schools: A conceptual framework. *Advances in School Mental Health Promotion*, 1(3), 6–28.
- El Ansari, W., & Weiss, E. S. (2006). Quality of research on community partnerships: Developing the evidence base. *Health Education Research*, 21(2), 175–180.
- Fawcett, S., Schultz, J., Watson-Thompson, J., Fox, M., & Bremby, R. (2010). Peer reviewed: Building multisectoral partnerships for population health and health equity. *Preventing Chronic Disease*, 7(6), 1–7.
- Forman, S. G., Olin, S. S., Hoagwood, K. E., Crowe, M., & Saka, N. (2008). Evidence-based interventions in schools: Developers' views of implementation barriers and facilitators. *School Mental Health*, 1, 26–36.
- Foster-Fishman, P. G., Berkowitz, S. L., Lounsbury, D. W., Jacobsen, S., & Allen, N. A. (2001). Building collaborative capacity in community coalitions: A review and integrative framework. *American Journal of Community Psychology*, 29, 241–261.
- Gilligan, C. (1982). *In a different voice: Psychological theory and women's development*. Cambridge, MA: Harvard University Press.
- Gottfredson, D. C., & Gottfredson, G. D. (2002). Quality of school-based prevention programs: Results from a national survey. *Journal of Research in Crime and Delinquency*, 39(1), 3–35.
- Himmelman, A. T. (1992). *Communities working collaboratively for a change*. Minneapolis, MN: Humphrey Institute Public Affairs, University of Minnesota.
- Hutchins, E. (1995). *Cognition in the wild*. Cambridge, MA: MIT Press.
- Israel, B. A., Coombe, C. M., Cheezum, R. R., Schulz, A. J., McGranaghan, R. J., Lichtenstein, R., & Burris, A. (2010). Community-based participatory research: A capacity-building approach for policy advocacy aimed at eliminating health disparities. *American Journal of Public Health*, 100(11), 2094–2102. <http://dx.doi.org/10.2105/AJPH.2009.170506>.
- Janzen, R., Ochocka, J., Turner, L., Cook, T., Franklin, M., & Deichert, D. (2017). Building a community-based culture of evaluation. *Evaluation and Program Planning*, 65, 163–170.
- Kreuter, M. W., Lezin, N. A., & Young, L. A. (2000). Evaluating community-based collaborative mechanisms: Implications for practitioners. *Health Promotion Practice*, 1(1), 49–63.
- Levy, H. M. (2008). Meeting the needs of all students through differentiated instruction: Helping every child reach and exceed standards. *The Clearing House: A Journal of Educational Strategies, Issues and Ideas*, 81, 161–164.
- Perrault, E., McClelland, R., Austin, C., & Sieppert, J. (2011). Working together in collaborations: Successful process factors for community collaboration. *Administration in Social Work*, 35, 282–298.
- Pinto, R. M. (2013). What makes or breaks provider-researcher collaborations in HIV research? A mixed method analysis of providers' willingness to partner. *Health Education & Behavior*, 40(2), 223–230.
- Robert, C., & Wasti, S. A. (2002). Organizational individualism and collectivism: Theoretical development and an empirical test of a measure. *Journal of Management*, 28, 544–566.
- Roussos, S. T., & Fawcett, S. B. (2000). A review of collaborative partnerships as a strategy for improving community health. *Annual Review of Public Health*, 21, 369–402.
- Saldaña, J. (2012). *The coding manual for qualitative researchers*. Thousand Oaks, CA: Sage.
- Sandelowski, M. (2000). Whatever happened to qualitative description? *Research in Nursing & Health*, 23, 334–340.
- Spillane, J. P. (2006). *Distributed leadership*. San Francisco, CA: Jossey-Bass.
- Stolp, S., Bottorff, J. L., Seaton, C. L., Jones-Bricker, M., Oliffe, J. L., Johnson, S. T., ... Lamont, S. (2017). Measurement and evaluation practices of factors that contribute to effective health promotion collaboration functioning: A scoping review. *Evaluation and Program Planning*, 61, 38–44.
- Strategic Prevention Solutions (2014). *Alaska Fourth R curriculum evaluation: Findings reports 2011–2014*. Retrieved from <http://www.dps.state.ak.us/CDVSA/docs/reports/FourthR-Rpt2014.pdf>.
- Wolfe, D. A., Crooks, C. V., Jaffe, P. G., Chiodo, D., Hughes, R., Ellis, W., Stitt, L., & Donner, A. (2009). A universal school-based program to prevent adolescent dating violence: A cluster randomized trial. *Archives of Pediatric and Adolescent Medicine*, 163, 693–699.
- Wolfe, D. A., Crooks, C. V., Chiodo, D., Hughes, R., & Ellis, W. (2012). Observations of adolescent peer resistance skills following a classroom-based health relationship program: A Post-intervention comparison. *Prevention Science*, 13, 196–205. <http://dx.doi.org/10.1007/s11121-011-0256-z>.
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