

RAPID-CYCLE RESEARCH

Findings from Care Share Health Alliance and Healthier Highland

CONTEXT

This summative evaluation explored the process and outcomes of Healthier Highland's community engagement and its impact on cross-sector collaboration for improving community health. Healthier Highland uses a Community-Centered Health model to improve community health by designing and implementing strategies based on community-identified priorities and engagement.

RESEARCH QUESTIONS

- What was most important for centering and sustaining community engagement?
- What were the best strategies and structures for forming and building cross-sector collaboration?
- What is needed to sustain this collaborative work?

KEY FINDINGS

Relationship-building is foundational to fostering trust and collaboration.



A lack of investment in the community, a lack of continuity with health care providers, and lack of voice in local decision-making may lead to mistrust in institutions and leaders by giving the perception of their being disconnected from the needs of community members. Trust can increase as community members see key partners consistently participating the collaborative, learning about their history, listening to their needs, and engaging in difficult conversations.

Community-centered practices, structures, and strategies can support authentic engagement.



The formation of community-based leadership and structures can aid successful engagement and trust-building. Community-determined goals can serve as the centerpiece for collaborative working groups and serve to encourage deeper participation and opportunities for leadership. By centering around community, the traditional balance of power shifts, with governing and advisory bodies becoming more inclusive in composition and practice.

An eye toward sustainability



There must be balance between how immediate needs are addressed and looking at the long-term conditions to envision what comes next. One pressing sustainability issue is to continually expand the collaborative table to include those who are not yet engaged (e.g., youth). Tailored communications are needed for effective outreach. A health-equity orientation must be matched with accessible and culturally relevant practices and opportunities.

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