Social determinants of health (SDOH) are the "non-medical factors that influence health outcomes. They are the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping conditions in daily life." The Centers for Disease Control and Prevention and the World Health Organization recognize the importance of SDOH in addressing health inequities.

An increasingly common method for addressing SDOH is collaboration between health care and non-health care entities. The Robert Wood Johnson Foundation (RWJF) recently partnered with the Georgia Health Policy Center (GHPC) and many other practitioners and researchers in health policy and practice to find ways of improving and growing collaborations between health care, public health, and social service sectors. At the core of these efforts is the Framework for Aligning Sectors. The framework suggests that by creating collective change within four core areas — shared purpose, data, governance, and financing — organizations and individuals aligning across sectors will improve their efforts to increase health equity, increase racial equity, and improve the health and well-being of communities. These efforts are expected to be especially effective when equity, power dynamics, trust, and community voice are directly addressed.*

The role of community voice in particular has been explored extensively in research on health collaboratives. Yet while this research identifies many ways that communities can be incorporated into aligning efforts, little has been written or discussed about measuring community voice in health-oriented cross-sector collaboration. This gap in information makes it difficult for cross-sector collaborations to accurately measure if and how well they are incorporating community voice in their initiatives.

In this brief, we present results from a review of research including community voice measurement. We also present results from a review of community voice research specifically in the context of health-oriented cross-sector collaboration. The two reviews allow us to identify important community voice measurement fundamentals as well as key areas where community voice measurement is applied, or could be applied, in practice and research involving health collaboration specifically. This approach provides a resource to help organizations and individuals assess if they are successfully engaging community members, improving their aligning efforts, and ultimately increasing community well-being and equity.

*To learn more about the framework, visit the Georgia Health Policy Center website: https://ghpc.gsu.edu/project/aligning-systems-for-health/#1612381091927-132a8b46-6ead
BACKGROUND

Sources of Community Voice Data

Approaches to community voice measurement can be understood in terms of whether they are based on quantitative data, qualitative data, or both. Quantitative data sources can be easier to develop for relatively large populations or samples, and they offer the potential for broadly representative data and generalizable findings. Qualitative data sources are typically less helpful for these purposes but in turn tend to allow for analyses of greater detail and depth.¹

Standard and Situationally Specific Measures

Reviews of existing aligning metrics measurement have also found that two types of metrics are likely to be important when measuring aligning and components of aligning: standardized and situationally specific.⁶ Standardized metrics are especially useful for comparing community voice efforts, for example over time or across organizations. Situationally specific metrics are useful for evaluating community voice within specific contexts in the terms preferred in those contexts.⁶

Equity and Community Voice Measurement

Other organizations have noted the importance of including community voice as a central part of advancing equity in measurement. American Institutes for Research (AIR) recently developed guiding principles for collaboratives to use in incorporating equity into shared measurement systems.⁷ These measurement principles center community voice and include communities through up-front investments, cocreation, accountability, holistic and comprehensive views, and shared values.⁷ Community voice participation is especially relevant to the measurement of community voice itself.

Active and Passive Community Voice Strategies

Health partnerships can include community voice in their work in many ways. Frequently noted strategies include community-based participatory research, participatory budgeting, consumer advisory boards, hiring community members, and so on.⁴⁻⁵ Overall, these activities can take the form of active or passive community voice strategies.⁴ Passive community voice strategies involve collecting data from community members; they are strategies that usually do not offer power or decision-making and are short-term.⁴ Active community voice strategies are more varied; for example strategies may include community member involvement in priority-setting or employment in an aligning initiative.⁴ In contrast to passive strategies, active strategies afford community members more power and decision-making.⁴

Organizations implementing community voice strategies have recognized the importance of community voice, though many times without clear approaches to measurement or metrics for what constitutes effective community voice.⁴ Distinguishing active and passive community voice is a helpful way to categorize existing community voice measurements and, ultimately, assess community partnerships.

Building an Analysis

The approaches to measurement listed above are organized into a framework for presenting the results below. We first discuss prominent approaches to community voice measurement, including approaches based on the data source, standardized versus situationally specific approaches, and equity approaches. We also identify existing community voice metrics as well as concepts that have not been measured but may be important and could be measured in the future. These measures and concepts are discussed in terms of their relevance to active and passive community voice strategies.

¹ There is a broad array of literature that explores measuring community voice in community-based participatory research (CBPR). There is an overlap in how community voice in research settings and in practice settings is measured. Similar metrics in both settings are used to quantify and qualify community voice.⁷,⁸ Similar issues also arise in trying to capture the complexity inherent in community partnerships and capturing community voice through measurement.⁸
METHODS

We conducted a review of the literature with two phases of document collection. The first phase of document collection was a systematic scan for research involving community engagement measurement. We used Academic Search Complete and Google Scholar to search for articles. The following search terms were used: ((community engagement OR community involvement OR community participation) AND measure*). We reviewed the abstracts from the first 100 articles from each database. Articles were included in this study if they met the following criteria:

- Addressed community engagement
- Addressed measuring community engagement
- Full-text available
- English-text available

Articles collected in the second phase were identified from a previous scoping review of research on health-oriented cross-oriented collaboration. We pulled from that study’s database of 573 articles by running text queries in NVivo for “community,” “participation,” “engagement,” and “voice.” Those articles that discussed community voice were included in the second phase.

In total, we identified 54 articles from our two phases of document collection that met our inclusion criteria. The articles were coded using the following codes: “how is community voice being defined,” “who is community voice,” “how is community voice being measured,” and “community voice metrics.” The findings below reflect the themes and subthemes that emerged from this coding process. The findings split into two overarching sections. The first addresses approaches to community voice measurement, and the second addresses existing and potential metrics themselves.

FINDINGS

Approaches to Community Voice Measurement

Community Voice Research Using Quantitative Data Sources
Surveys and questionnaires were the most widely used data source for quantitatively measuring community voice. They fit into three categories based on the type of survey or questionnaire used: instruments assessing a specific coalition or initiative, instruments adapted for use from another source, and instruments specifically designed for assessing community voice.

The first category includes surveys and questionnaires developed for assessing a specific coalition or initiative. These surveys and questionnaires include items or questions relating to community voice. Specific survey tools identified in our review include the Block Booster Survey, the California Tobacco Control Coalition Member Survey, the Community Team Member Survey, the Rhode Island Community AOD Task Force Survey, the Fighting Back Committee Member Survey, the North Carolina Project ASSIST Coalition Effectiveness Survey, the South Carolina Adolescent Pregnancy Prevention Key Leaders’ Survey, the Smokeless States Coalition Self-Assessment Survey, and the King County Community Engagement Continuum.

The second type of survey or questionnaire is adapted from other instruments not specifically measuring community voice. While these tools are not designed specifically for the purpose of measuring community voice, they include questions or metrics applicable to measuring community voice. Specific tools identified in our review include the European Social Survey, the National Longitudinal Survey of Public Health Systems, the National Surveys on Area Agencies on Aging, and the National Association of County and City Health Officials Survey.
The third type of survey or questionnaires is designed specifically for measuring community voice. Specific tools identified in our review include the Questionnaire for Partnership Members, the Meeting Effectiveness Inventory, the Survey of Participation and Receptivity in Communities, Rifkin's Spidergram Framework, Davidson and Cotter's Sense of Community Scale, the Brief Community Engagement Questionnaire, and the Assessment for Advancing Community Transformation (AACT) tool (forthcoming).

Community Voice Research Using Qualitative Data Sources
Interviews and focus groups are the most widely used data sources for qualitatively measuring community voice. Interview subjects vary depending on what aspect of community voice researchers want to assess. The following groups were the most commonly represented participants: organizational leaders and staff, community members participating in coalitions or other collaborative initiatives, community groups and stakeholders, community activists, community members receiving services, and governmental officials and staff. Several documents did not specifically identify their interview subjects.

Specific interviews and focus group tools identified in our review include the Rhode Island Community AOD Task Force Leader Interview, the Minnesota Statewide Association for Family Planning Interview, the East Side Village Health Worker Interview, the Project ASSIST Interview, the AAPI Member Interview, and the RWJF Allies Against Asthma Interview.

Mixed-Methods Community Voice Research
The mixed methods research we review here used a combination of quantitative and qualitative data sources to measure community voice. A combination of interviews, focus groups, and surveys was most common. Methods included a review of event logs, document reviews and content analyses, analyses of observational data or publicly available data, scoping reviews, and systematic literature reviews. While most of the methods did not allow for strong causal claims, one study did use a randomized-control trial to assess the impact of peer navigators on a specific population.

Situationally Specific Measures and Standard Measures for Comparisons
One evaluation of public participation found that measurement systems must heed the context and characteristics of settings where public participation is taking place. This study found that situationally specific measures are a requirement for measuring community voice. However, the authors also argue that at least one concept of community voice should be used as a general measure, or comparison measure: deliberative process. Deliberative process measures capture deliberative interaction with the public.

Community Voice Measurement and Equity
Community voice by most reports plays an important role in developing equity in measurement. Codesigning measures with community members is one often-repeated suggestion for developing equity in measurement. Zimmerman et al. also suggest including example measures that capture benefits to the public sector (e.g., strong project support, project plan efficiencies, or diversity and engagement of community leaders). Other measurement suggestions include informational feedback loops between institutional partners in a collaborative and the community.

Existing Measures and Key Concepts for Potential Measures
Passive and Active Community Voice Strategies
The data sources we reviewed included many factors that, when measured, may help practitioners and researchers understand the breadth and depth of community voice in an aligning effort. Building on an earlier study on community voice in cross-sector collaboratives, we categorized these according to whether they capture passive or active community voice strategies. Passive strategies are generally limited to collecting feedback from community members, while active strategies are those that place decision-making power in the hands of the community.
There is an important difference between what factor is being assessed and how that factor is being assessed. Below, we focus on what is being assessed. However, how the factors are assessed will greatly affect measurement effectiveness. For example, data on community voice collected only from surveys from organizational leaders is likely to look different from data that comes from nonsurvey objective sources (e.g., document review) or that comes directly from community members. In the latter case, note that solely getting feedback directly from community members qualifies as a passive community voice strategy rather than an active community voice strategy when it comes to determining the direction of collaborative efforts, but regardless of how it is classified for operations, direct community feedback may be important for effective assessment of collaboration activities. In short, some of the measures below may be most effective if measured objectively and by getting feedback directly from community members, though we do not address the subject of how the data will be collected further here.

Also, some factors could be assessed to determine how community members are being prepared for participation in either passive or active strategies.\textsuperscript{29}

- Organizational support, trainings, and a culture that supports client self-efficacy and self-management\textsuperscript{18}
- Providing plain-language materials that are accessible to the community\textsuperscript{54}
- Providing technical assistance to community members so they can gain content knowledge needed to participate in cross-sector collaborations\textsuperscript{55}
- Making long-term commitments to providing technical assistance to communities\textsuperscript{52}
- Providing communities with resources to assist with analysis, decision-making, and action\textsuperscript{52}
- Sending community leaders to trainings on leading community change\textsuperscript{56}
- Providing organizational support, trainings, and a culture that supports client self-efficacy and self-management\textsuperscript{17}

\textbf{Passive Community Voice}

The following factors capture passive community voice because they involve community feedback but not community decision-making or leadership in the production of, or decision-making around, collaboration or aligning activities.

\textbf{Consumer engagement in services as feedback}

Measures for consumer engagement in services assess the extent to which individuals receiving services are participating or engaging with those services. This can be considered an indirect form of community feedback regarding the services. Examples include:

- Number of individuals completing follow-up on treatment services\textsuperscript{33}
- Patient retention status measured by the number of clinic visits attended per year\textsuperscript{13}
- Number of individuals receiving an intervention\textsuperscript{23, 57}

\textbf{Enabling communication}

Measures of efforts to enable communication can help assess the potential for communication between community members and institutional partners. Examples include:

- Are community partners informed about meeting locations?\textsuperscript{48}
- Is there open communication between communities and partners?\textsuperscript{48}
- Are organizational partners open to different points of view?\textsuperscript{48}
- Are community partners kept informed of partnership progress when they are unable to attend meetings?\textsuperscript{48}
Community participation in collaboratives as feedback
Measures for community participation assess the extent to which community members are participating in collaborative initiatives. Participation can be considered an indirect form of community feedback regarding collaborative activities. Examples include:

- Hours spent in and outside of coalition meetings
- Amount of time as a member of the partnership
- Amount of time spent devoted to coalition goals
- Number and types of events attended
- Involvement in coalition activities
- Level of participation
- Commitment to participating in future activities
- Participation in civic, community, and social activities along with group participation and collective action
- Resident and leader commitment to the collaborative

Use of community feedback
Basic feedback from communities is the classic form of passive community voice. This feedback could be collected in many ways including, but not limited to, surveys, house calls, discussions with community representatives, town hall meetings, or other meetings hosted by the collaborative.

- Is the collaborative collecting and using community feedback on challenges, successes, and experiences with participation in an intervention?

Active Community Voice
The following items may be used to assess active community voice. When these items are measured well, they will help assess community decision-making in, or direction of, collaboration or aligning efforts.

Representation
Measures for representation assess the representativeness of collaborative leadership. Examples include:

- Number of seats on a governing or advisory board allocated to those with lived experience
- Community member representation in the leadership group
- Do decisions made by leadership represent the needs of the community?
- Diversity of community participants and leaders
- Is the coalition recruiting new members and identifying sectors that are not well-represented in the coalition?
- How many partners left and joined the partnership since its formation?
- Is leadership supportive and facilitative, and does it support citizens taking ownership of interventions?
- Do leaders address power imbalances?

Decision-making
Measures for decision-making assess the level of shared decision-making that occurs in the partnership and community partners’ perception of decision-making in the partnership. Examples include:

‡ These metrics use a Likert scale for measurement.
• Is there strong organizational commitment to and support of training of staff and in shared decision-making among providers, clients, and caregivers?\textsuperscript{17}

• Who has more influence in making decisions — staff, leaders, or other members?\textsuperscript{11}

• Is decision-making clear to community members, and does it follow standard procedure?\textsuperscript{11}

• Is decision-making timely and fair in the eyes of the community?\textsuperscript{11}

• How much influence does the community have in making decisions on goals and objectives, selecting coalition activities, setting the budget, and deciding general policies and actions?\textsuperscript{11}

• What is the level of control different members have at a given meeting?\textsuperscript{11}

• What do community members list as the three organizations that have the most power in making decisions?\textsuperscript{11}

• Does the community define its health issues and shape the solutions?\textsuperscript{56}

• Does the community identify its own goals?\textsuperscript{12}

• Do communities have decision-making power, authority, and formal and informal influence?\textsuperscript{56}

• Does the community define the metrics and approaches to measurement?\textsuperscript{54}

• Do community organizations have consensus on health priorities?\textsuperscript{56}

**Community Member Satisfaction**

While it is important to know what passive or active strategies are being employed by a collaborative, collaboratives might also be interested in directly assessing community member satisfaction. Satisfaction measures could address general satisfaction or satisfaction with collaborative activities, including community voice strategies. In this section, we highlight measures for assessing community members’ perceptions of their community voice experiences.

**Role Satisfaction**

Measures for membership role satisfaction assess community members’ perceptions of their roles within partnerships. Examples include:

• Asking community members whether they knew their role and what was expected of them \textsuperscript{11}

• Asking community members whether they had a choice in the activities with which they were involved\textsuperscript{11}

• Asking community members to what extent their roles reflected their own interests or skills\textsuperscript{11}

• Asking community members to what extent they were asked to take on roles that were better suited for someone else\textsuperscript{11}

• Asking community members to what extent their involvement affected the partnerships’ goals and activities\textsuperscript{11}

**Activity Satisfaction**

Measures for activity satisfaction assess the extent to which community members were satisfied with the work they were doing. Examples include:

• Asking community members if they are satisfied with the way people and organizations work together\textsuperscript{11}

• Asking community members if they are satisfied with the coalition’s plan\textsuperscript{11}

\textsuperscript{1}These metrics use a Likert scale for measurement.
• Asking community members if they are satisfied with way the partnership implements strategies
• Asking community members to identify benefits and barriers for community members participating in multidisciplinary group meetings or coalitions

**Trust**
Measures for trust assess the community members’ trust in their organizational partners. Examples include:

• Asking community partners if they feel safe sharing their thoughts with other partners
• Asking community partners if other partners reflect their thoughts, feelings, and opinions
• Asking community partners to assess efforts at building and establishing trust.

Specific ideas for building and establishing trust that were identified in the literature include —

- Partners assume good intent between partners
- Point-people in the organization who have commonalities are brought together
- Space is provided for community members to feel safe speaking up and saying “I don’t know”
- Community members can voice their opinions
- Work is with formal and informal community leadership
- Community members are involved in decision-making

• Asking community partners for their perceptions of relational trust versus transactional trust — both are required to engage the community. Relational trust refers to trust earned through shared experiences and backgrounds, and transactional trust refers to trust earned through interactions and give-and-take.

**DISCUSSION**

There are several approaches to community voice measurement. Sustainable community voice strategies may rely on the approach collaboratives use when implementing a measurement system. There is a need to consider what community voice metrics are useful in which contexts, whether quantitative or qualitative. Standardized metrics can be used across different settings to compare outcomes, whereas situationally specific metrics may be needed when the unique aspects of a given collaboration or aligning effort must be assessed. Many of the concepts we identified here could be standardized across settings or customized for specific contexts.

There is the growing recognition of the importance of community voice to equity in measurement. The measurement equity principles described by AIR underscore the need for community voice, suggesting the measurement of community voice is doubly important. Especially important are measures that assess community member decision-making, communication, and trust. These concepts are repeatedly highlighted in the literature as important for building improving community voice and increasing equity. Aligning initiatives can use this review as an aid to finding, or creating, the most appropriate community voice measures for their purpose.

**KEY TAKEAWAYS**

1. There are a wide variety of approaches, measures, and measurable concepts for community voice already in the literature. Care should be taken to define the purpose of a measurement activity and the resources available when deciding on a measurement strategy.

2. There are a number of perspectives through which practitioners and researchers can view community voice measurement. We have included several such perspectives here, including by data source, by the need for generalization versus situational specifics, through an equity lens, in relation to passive and active community voice activities, and in terms of community member satisfaction.
3. The importance of community voice as an instrument of improving equity in measurement means that community voice measures are doubly important.

References


ALIGNING SYSTEMS FOR HEALTH
Health Care + Public Health + Social Services

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ghpc.gsu.edu/project/aligning