



Community-Led Aligning Toolkit: Resources for Collaborative Work



Health collaboratives can take many forms: coalitions, partnerships, networks, and more. Their goals vary, from improving community well-being to reducing costs, coordinating services, or addressing shared policy or system challenges. Some collaborations operate within a single sector, such as health care; others bring together organizations across public health, social services, and community-based groups.

This collection focuses on cross-sector collaboratives — those that intentionally connect health care, public health, and community organizations to address the conditions that shape health and opportunity.

The tools and resources shared here are designed to help local leaders, community partners, and organizational teams strengthen collaboration and alignment in ways that amplify community voices and reflect local priorities. This project especially highlights how engaging and empowering community-based organizations can lead to more responsive and sustainable systems change.

We chose the metaphor of a roadmap to illustrate this work. Every collaborative's journey is different — the route, timing, and milestones depend on local context. We hope this roadmap offers practical guidance and inspiration as you navigate your own path toward stronger partnerships and healthier communities.


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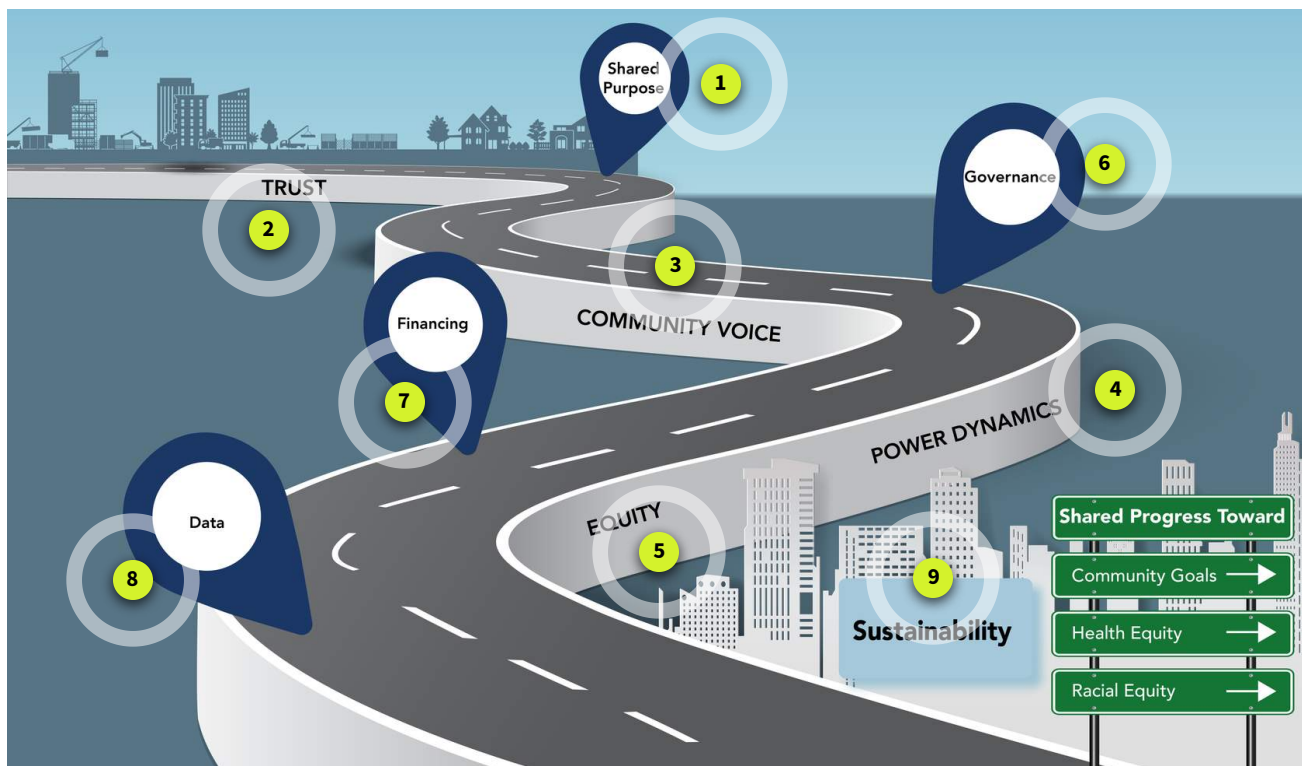
 The Aligning Systems for Health Initiative

Community-Led Aligning Toolkit

Building Blocks for Alignment

Improving health and well-being requires health care, public health, social services, and communities to work together in new ways that last. The [Framework for Aligning Sectors](#) describes two building blocks of this work: **core components** and **adaptive factors**. **Core components**, such as shared purpose, governance, financing, and data, provide the structure. They are the systems, agreements, and tools that help partners organize their work toward common goals. **Adaptive factors**, such as trust, equity, power, and community voice, are the dynamics. They shape how partners work together and keep collaborations grounded in the needs of the people they serve.

Click on each hotspot on the roadmap below to explore these elements and how they can guide your community-led efforts toward stronger, more equitable health collaborations. **Core components** are represented by map pins. **Adaptive factors** are represented as elements of the journey with others.



Shared Purpose

Collaborative partners foster an understanding and commitment to a mutual vision and priority outcomes for their partnership.

Trust

Both relational trust — earned through shared experiences and backgrounds — and transactional trust — earned continuously through mutual cooperation and accountability — are essential to collaborative efforts.

Community Voice

Active community leadership in collaborative efforts ensures that the knowledge and perspectives of affected communities are incorporated throughout the effort.

Power Dynamics

Power dynamics are the imbalances in degrees of influence over resources, opportunities, and decisions, which affect collaboration.

Equity

Equity means assuring that every person or group can access what they need in order to achieve their goals.

Governance

Collaboratives need effective infrastructure to achieve their goals, including decision-making processes, defined leadership, conflict resolution strategies, communication methods, and clear partner roles.

Financing

Collaborative efforts often benefit when partners can share resources, especially funding and income.

Data

Collaboratives can put systems and agreements in place to collectively and systematically gather, organize, and share data in order to plan activities and track community progress and impact.

Sustainability

Designing systems change to ensure solutions are built to last, rather than temporary due to funding constraints, lack of incentives, or structures that do not produce permanent connections.

Use the navigation menu on the left to explore each area and find tools and resources to help you lead, join, or begin a collaboration that promotes community health.



Learn how to use this toolkit next.

How to Use This Toolkit



The Framework in Action

This resource is organized as a toolkit, and it is packed with tools and resources. Rather than start at the top and read everything to the bottom, you'll likely find it a better use of your time to start by reviewing the Introduction sections for each element of the [Aligning Systems for Health Framework](#).

As you review, you will likely have a sense of where your collaborative would find the most value. Dig into those sections to discover the ideas and tools useful for your needs. There are no prescribed methods. Every community and each situation is unique. You will use and adapt these tools to meet the needs of you and your partners.

Questions can propel progress

One of the most valuable tools in building partnerships is a set of well-designed questions that generate meaningful reflection and dialogue. A carefully selected set of questions is

included in each Introduction section. Use these questions for self-reflection, for discussion sessions, or as part of facilitated workshops with collaborative partners.

The questions from all sections in the toolkit are compiled in this Word document for you to adapt and use.



Questions-template.docx
64.2 KB



File may be edited in MS Word, LibreOffice, or Google Drive.

Wisdom from the real world

Experience is often the best teacher, especially when you are uncertain how it might "look" to proceed. This toolkit contains curated case studies of communities and their experiences from which you can glean insights and perspectives.

No situation will be just like yours, but the case studies provide a space for you and your partners to discuss what might be valuable lessons from the experience of those groups highlighted in the case study.

Resources that inspire and empower

When you and your partners are ready to focus on a core component or adaptive factor, the Resources section provides additional stories, examples, tools, and references you may find useful to inform planning and action.

There are five resources you'll likely find valuable to understand the Framework as a whole and provide insights across all the core components and adaptive factors. They are referred

to as the "Fantastic Five" in this toolkit and introduced on the next page.



Learn about the Fantastic Five next.

The Fantastic Five

These resources work across all core components and adaptive factors. Together, these five resources will help you see the big picture, connect concepts across modules, and immediately start applying strategies in your own communities.

1

[GHPC Aligning Systems for Health Brochure](#)

Summary of the Aligning Systems for Health initiative.

BROCHURE | CORE ★

2

[Making Aligning Work: Adaptive Factors](#)

Defines Trust, Equity, Power, and Voice; foundation for all modules.

CONCEPTUAL FRAMEWORK | CORE ★

3

[Aligning in Crisis: A Framework for Opportunities](#)

3-phase model (Response, Recovery, Rebuilding); structures the course.

STRATEGIC FRAMEWORK | CORE ★

4

[Making Aligning Work: National Experts Reflect on Systemic Racism](#)

Centers racial equity and systemic power issues; essential framing piece.

FRAMING BRIEF | CORE ★

Aligning in Crisis: Implementing Four Principles for a Resilient, Equitable Recovery

Concise, actionable principles; bridges theory and practice.

PRACTICAL GUIDE | CORE ★



Learn about shared language next.

Introduction: Shared Language

Shared Language

Collaborative partners should iteratively discuss and develop a collective glossary of common terms, with particular attention to words that may have ambiguous meanings or differing uses.

Stewardship of an shared language library should be an ongoing process that exchanges information about meanings and perspectives among partners, fosters mutual understanding of key terms, and supports equitable access to creating and communicating shared goals.



Glossary

Use this sample glossary document as a starting place to build a shared language resource among partners in your collaborative.



Glossary-template.docx

64.7 KB



File may be edited in MS Word, LibreOffice, or Google Drive.



Learn about the **shared purpose** component next.

Introduction: Shared Purpose

The Shared Purpose Component



Collaborative partners foster an understanding and commitment to a mutual vision and priority outcomes for their partnership, even as their organizations and communities maintain their own distinct goals.



Questions to Consider

These questions are designed to help partners think about their collaborative work. They can be used to help organizations identify and set benchmarks and/or highlight successes or opportunities for improvement.

- To what degree do the partners involved in your aligning effort share a vision for success?
- To what extent are the institutional partners in the collaborative supporting community members' capacities to define the collaborative's mission?
- To what extent are the partners in the collaborative committed to doing their fair part to achieve the collaborative's goals?
- To what extent do the objectives of your own organization or tribe align with the collaborative's mission?
- Is (or was) there a formal event or written process for creating or updating the mission of the collaborative?



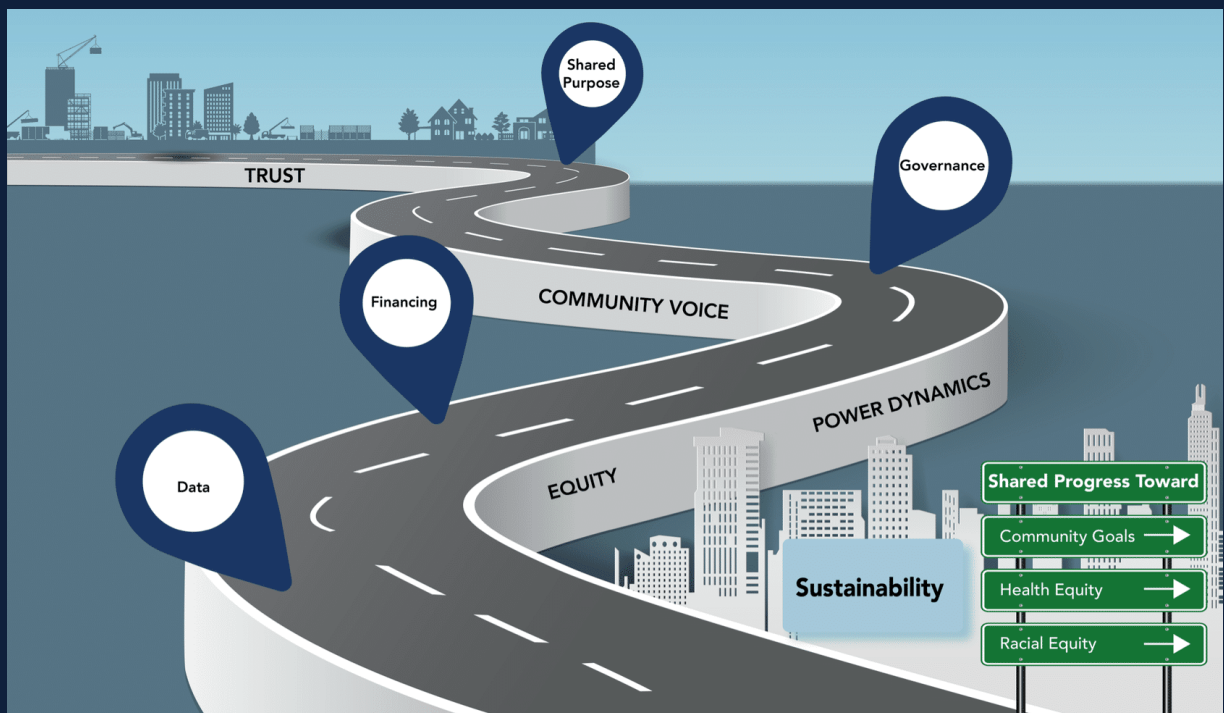
A **shared purpose** case study is next.

Case Study: Shared Purpose



The Shared Purpose Component

Collaborative partners foster an understanding and commitment to a mutual vision and priority outcomes for their partnership, even as their organizations and communities maintain their own distinct goals.



Healthier Together: Building Shared Purpose with Communities

Healthier Together is a place-based initiative in Northeast Florida launched by the local nonprofit, Blue Cross and Blue Shield of Florida Foundation. It began with a simple but powerful idea: **communities should define their own health priorities and work alongside partners to act on them.** By centering residents' voices, Healthier Together demonstrates how shared purpose can be co-created and sustained across neighborhoods, institutions, and partners.



Shared Purpose in Action —

Shared purpose is the anchor of Healthier Together. Instead of arriving with a pre-set agenda, the initiative worked with residents to co-create a vision for success. Each community defined what health and well-being meant locally, such as reducing diabetes, expanding access to healthy food, and or improving youth opportunities. Then, partners committed to supporting those goals. This process created a deeply rooted **shared purpose** that aligned both community members and external partners.

Adaptive factors were essential. **Community voice** shaped the mission from the beginning, giving residents real authority to set direction. **Trust** grew as partners consistently followed through on commitments, showing they were willing to do their fair part. **Equity** guided the selection of neighborhoods, which were chosen because they faced systemic barriers to health. Together, these factors ensured the shared vision was not symbolic but truly actionable.

Additional Core Components —

Shared governance supported shared purpose by creating local steering committees where residents and institutional partners worked side by side. **Shared financing** came from a mix of foundation and public funds braided together to support community-defined priorities. These structures provided the stability and resources to carry out the vision.

Results and Challenges —

Healthier Together has documented improvements such as greater access to healthy food, stronger partnerships with schools, and increased resident participation in health initiatives. More broadly, it has shifted how organizations engage with communities, making co-leadership and shared ownership the norm.

Challenges included building **trust** at the outset. Some residents were skeptical of outside involvement. It also took time to align institutional partners' goals with community priorities. Formal visioning events and written agreements helped institutionalize the shared mission, but sustaining it required continuous dialogue and flexibility.

Transferable Lessons —

Other regions can learn from Healthier Together's model of co-creating **shared purpose**. Success depends on inviting communities to define priorities, ensuring organizations align their goals with the collaborative's mission, and formalizing the vision through events or written agreements. **Trust** and **equity** are not add-ons; they are what make the **shared vision** durable and credible.

SEE THE FULL CASE STUDY

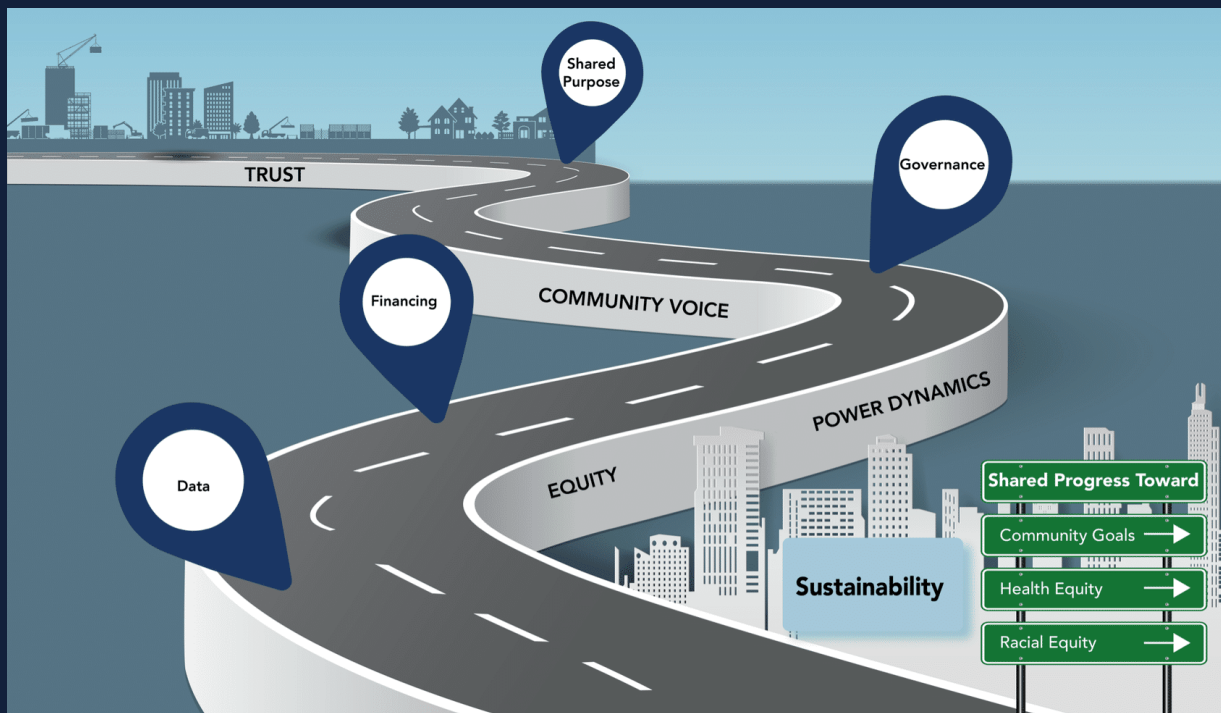


Shared purpose resources are next.

Resources: Shared Purpose

The Shared Purpose Component

Collaborative partners foster an understanding and commitment to a mutual vision and priority outcomes for their partnership, even as their organizations and communities maintain their own distinct goals.



Resources for Shared Purpose

The following resources provide deeper understanding of shared purpose. These may be useful for your own development and when working with other partners in your

collaborative. Core (★) resources are essential reading and highly practical. Optional (☆) resources are valuable for advanced learners, leaders, or facilitators.

- [Aligning in Crisis Case Study: Baltimore Health Corps and the Power of Shared Purpose](#)
Equity-driven example of shared purpose and workforce development.
CASE STUDY | CORE ★
- [Making Aligning Work: Reflections from 18 Months of Aligning](#)
Lessons from national alignment efforts; facilitator reference.
CONTEXT BRIEF | OPTIONAL ☆

From the Fantastic Five

This resource is particularly useful for shared purpose. See all of the Fantastic Five resources in the Overview section.

5

[Aligning in Crisis: Implementing Four Principles for a Resilient, Equitable Recovery](#)

Concise, actionable principles; bridges theory and practice.
PRACTICAL GUIDE | CORE ★



Learn about the **trust** adaptive factor next.

Introduction: Trust

The Trust Adaptive Factor



Both relational trust — earned through shared experiences and backgrounds — and transactional trust — earned continuously through mutual cooperation and accountability — are essential to collaborative efforts. Trust may be cultivated through agreements or existing relationships, and it may need to be rebuilt or regularly renewed.



Questions to Consider

These questions are designed to help partners think about their collaborative work. They can be used to help organizations identify and set benchmarks and/or highlight successes or opportunities for improvement.

- In your view, how often do most partners in the collaborative keep their commitments?
- How sufficient are the collaborative's efforts to connect with trusted leaders of the community most affected by the collaborative?
- Do collaborative activities that involve community partners take place in a location or on a medium that is accessible and welcoming?
- To what extent are the challenges faced by the collaborative caused by its own approach to creating change?
- How sufficient are the collaborative's efforts to be ethical when collecting data?



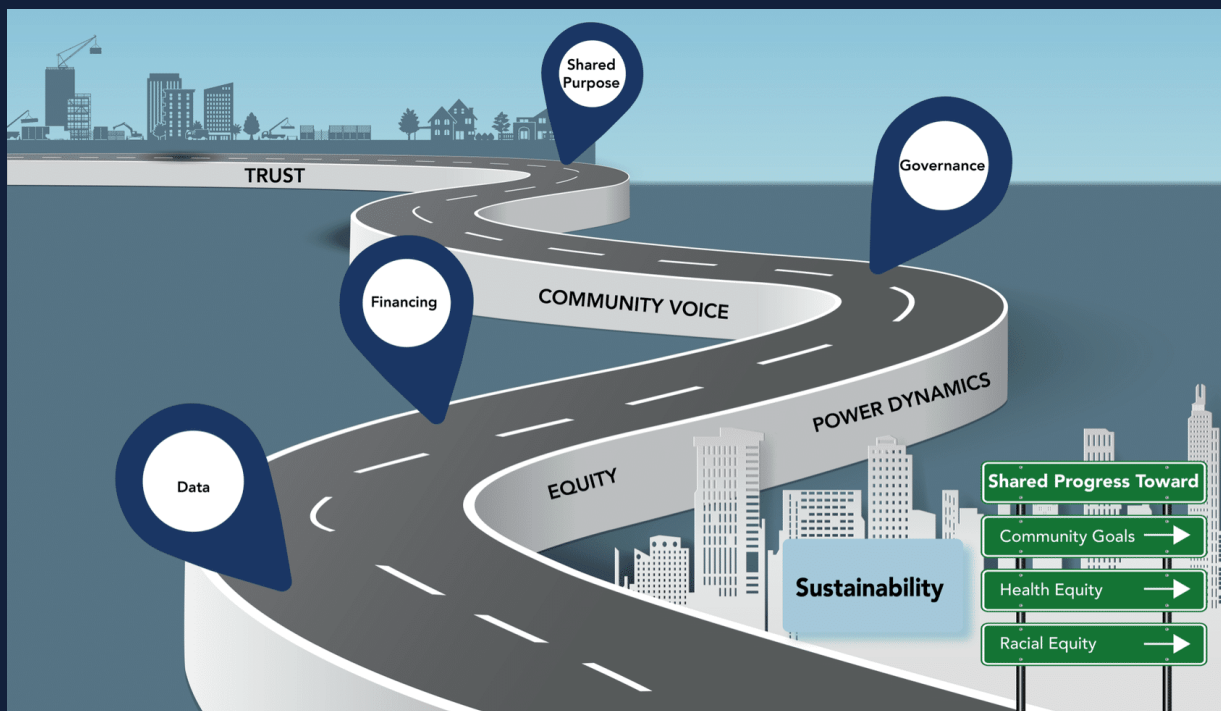
A **trust** case study is next.

Case Study: Trust



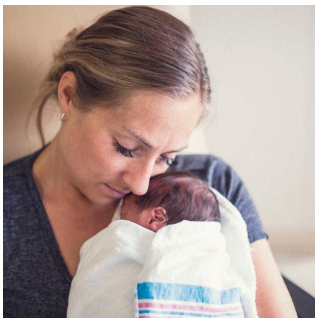
The Trust Adaptive Factor

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Community Caring Collaborative: Trust as the Foundation for Lasting Change

The Community Caring Collaborative (CCC) in Washington County, Maine, began in 2007 as a partnership of nonprofits, health care providers, educators, and social service agencies committed to improving the well-being of families in one of Maine's most rural and economically challenged regions. Over time, CCC has become a **trusted** backbone organization, showing how **trust** — carefully built and consistently nurtured — creates the conditions for effective collaboration across systems.



Trust in Action

At the Community Caring Collaborative (CCC), **trust** is both the foundation and the outcome of collaboration. The coalition intentionally built **relational trust** — **trust** grounded in shared experience, communication, and care — rather than **transactional trust** based on contracts or compliance.

In the early years, partners had a history of competition and siloed funding. CCC addressed this by bringing organizations together regularly in neutral spaces — monthly meetings, cross-agency work groups, and annual “Vision Day” gatherings where participants could speak freely and plan collaboratively. These open, recurring interactions allowed partners to see one another as allies, not competitors.

Trust was further reinforced through transparency and responsiveness. CCC consistently listened to partners and community members, incorporated their feedback into planning, and communicated clearly about funding and results. The organization's belief that “if we take care of our partners, they can better care for their communities” established a culture of mutual respect and reliability.

Over time, this **trust** became the foundation for deeper systems change.

Trust also shaped the core components:

- **Shared purpose** emerged because partners believed they could depend on one another to pursue a collective vision for improving health and opportunity.
- **Shared governance** functions smoothly because members **trust** the backbone staff to facilitate meetings, manage resources, and convene fairly across agencies.
- **Financing** and **resource sharing** work because partners are willing to pool limited funds and share credit because they **trust** that CCC will allocate resources equitably and transparently.
- **Data sharing** was possible only after **trust** had been built. Partners were willing to exchange sensitive information once they saw that CCC used it responsibly and for collective benefit.

At CCC, **trust** wasn't a by-product. It was actively cultivated, maintained, and leveraged to align systems that had never worked together before.

Other Adaptive Factors at Play —

Trust interacted closely with other adaptive factors:

- **Equity** guided CCC's focus on families facing poverty, trauma, and systemic barriers, ensuring that **trust** was inclusive and not confined to organizational leaders.
- **Community voice** was central. Programs such as *Early Childhood Consultation and Outreach* and the *Hope Fund* were shaped by input from the families they serve.
- **Power dynamics** were managed through shared leadership structures. CCC intentionally acted as a neutral convener rather than a controlling agency, allowing all partners, large and small, to contribute meaningfully.

Results and Challenges —

Over nearly two decades, CCC's model of authentic collaboration has yielded lasting results. The collaborative's initiatives have improved outcomes for children and families, strengthened local service systems, and created new, cross-sector programs responsive to community needs.

The deep **trust** among partners also allowed CCC to pivot quickly during crises. For example, coordinating responses to the opioid epidemic and later to COVID-19. Because partners trusted CCC's leadership and each other, they could share information, staff, and funds to address emerging needs.

Challenges include maintaining **trust** through leadership transitions, managing limited funding, and balancing each partner's autonomy with collective goals. CCC mitigates these challenges by continuing to invest in relationships, practice transparency, and reaffirm shared values.

Transferable Lessons —

The Community Caring Collaborative demonstrates that **trust** is not automatic. It is cultivated through consistent action, transparency, and care. Other collaboratives can learn from CCC to:

- Prioritize **relational trust** through regular communication and shared spaces for honest dialogue.
- Demonstrate reliability by acting on community input and following through on commitments.
- Create a culture of care that values both partners and staff.
- Use **trust** as a foundation for aligning **governance**, **financing**, and **shared purpose**.

SEE THE FULL CASE STUDY

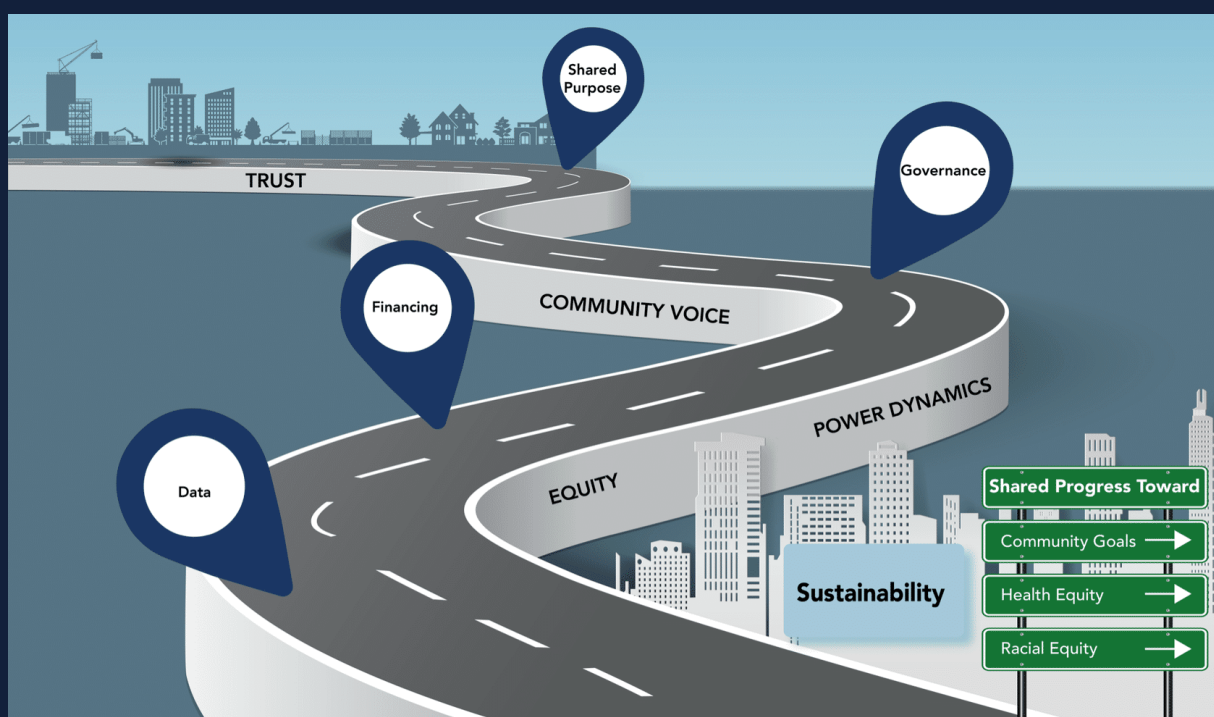


Trust resources are next.

Resources: Trust

The Trust Adaptive Factor

Both relational trust — earned through shared experiences and backgrounds — and transactional trust — earned continuously through mutual cooperation and accountability — are essential to collaborative efforts. Trust may be cultivated through agreements or existing relationships, and it may need to be rebuilt or regularly renewed.



Resources for Trust

The following resources provide deeper understanding of trust. These may be useful for your own development and when working with other partners in your collaborative. Core (★) resources are must-read and highly practical. Optional (☆) resources are valuable for advanced learners, leaders, or facilitators.

- [Mapping Aligning Processes and Outcomes: Trust Measurement Questions](#)

A list of questions on trust that can be used to understand the different dimensions of trust that may be affecting your collaborative efforts.

TOOL | CORE ★

- [Aligning in Action: Denver Area Agency on Aging](#)

An example of trust-building through a social service-led alignment model.

CASE STUDY | CORE ★

From the Fantastic Five

This resource is particularly useful for trust. See all of the Fantastic Five resources in the Overview section.

2

[Making Aligning Work: Adaptive Factors](#)

Defines Trust, Equity, Power, and Voice; foundation for all modules.

CONCEPTUAL FRAMEWORK | CORE ★



Learn about the **community voice** adaptive factor next.

Introduction: Community Voice

The Community Voice Adaptive Factor



Community voice means centering the leadership, knowledge, and perspectives of those most affected in every stage of collaborative work. Meaningful participation requires intentional practices, respectful relationships, and a commitment to equity, trust, and shifting power dynamics.



Questions to Consider

These questions are designed to help partners think about their collaborative work. They can be used to help organizations identify and set benchmarks and/or highlight successes or opportunities for improvement.

- Does the collaborative ever change plans as a result of requests from the community that is most affected by the collaboratives?
- In your view, how sufficient are the collaborative's efforts to communicate with the community served by the collaborative in culturally sensitive and linguistically appropriate ways?
- Do those with influence over your collaborative's activities embody the racial and ethnic diversity of the community served by the collaborative?
- Does the collaborative have formal or written policies or systems that help partners from the community that is most affected by the collaborative to hold decision-makers in the collaborative accountable if the collaboration effort doesn't work or creates harm?
- As far as you know, does the collaborative financially compensate participating members of the community served by the collaborative in a manner that reflects the professional compensation of other contributing partners?



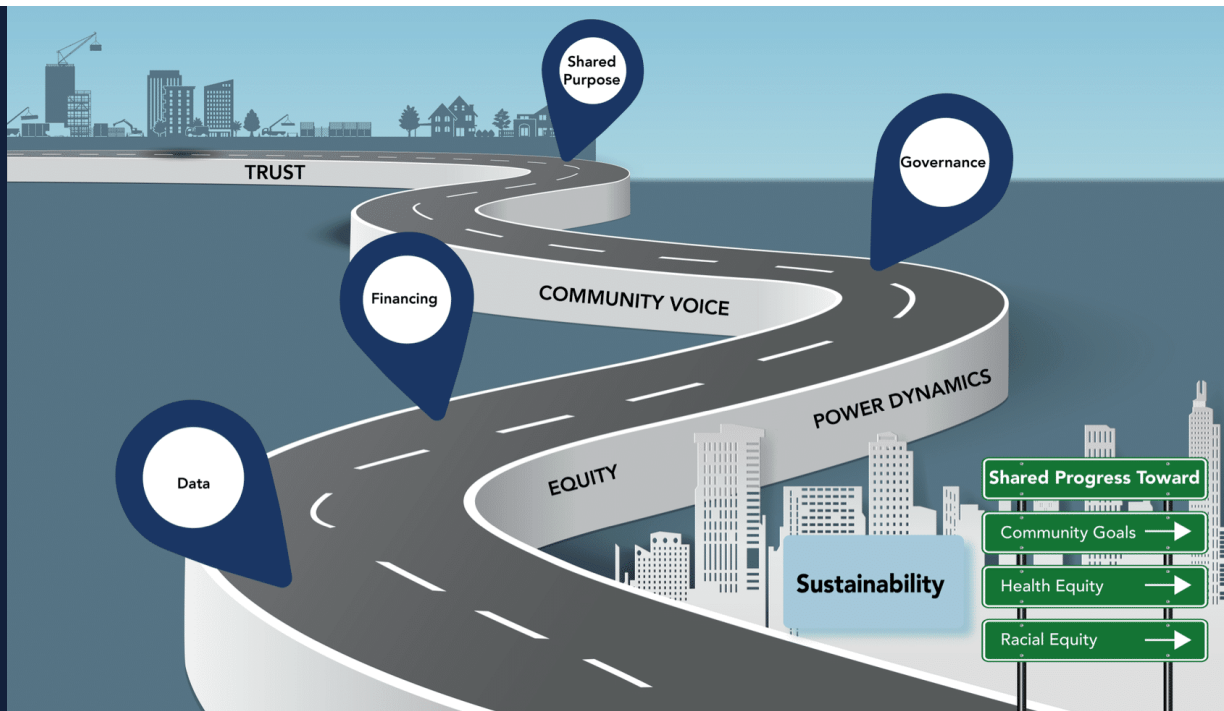
A **community voice** case study is next.

Case Study: Community Voice



The Community Voice Adaptive Factor

Community voice means centering the leadership, knowledge, and perspectives of those most affected in every stage of collaborative work. Meaningful participation requires intentional practices, respectful relationships, and a commitment to equity, trust, and shifting power dynamics.



Communities That Care Coalition: Elevating Community Voice

The Communities That Care Coalition (CTC) in Franklin County and the North Quabbin region of Massachusetts brings together schools, parents, youth, health providers, and community organizations. Its mission is to improve youth health and development by addressing risk factors such as substance use, poor nutrition, and lack of connectedness. From the beginning, CTC has placed **community voice** at the center of its work, not as an afterthought, but as a driver of decision-making, programs, and funding priorities.



Community Voice in Action —

CTC demonstrates how **community voice** can transform collaboration. Parents and youth are not just participants but leaders and decision-makers. For example, youth groups helped design prevention campaigns, and parents influenced school and policy changes that better reflected families' needs. Importantly, the coalition compensates community members for their time and expertise, showing that their contributions are valued equally with those of institutional partners.

Community voice also means plans change based on what residents say. CTC has adapted strategies when families or youth called for new approaches, reflecting true accountability. Efforts are made to communicate in culturally relevant and accessible ways, ensuring participation across the region's diverse population.

By embedding **community voice**, CTC strengthened its core components:

- **Shared purpose** became rooted in community-defined goals.
- **Governance** structures evolved to include resident leadership.

- **Data collection** prioritized measures that mattered to families.

Other Adaptive Factors at Play —

While community voice was the cornerstone, **trust** and **equity** also played major roles. **Trust** grew as youth and parents saw their input shape real policy changes and hold decision-makers accountable. **Equity** guided efforts to ensure leadership bodies reflected the diversity of the region and that resources reached marginalized groups. **Power dynamics** shifted as institutions learned to share authority and be held accountable by residents.

Results and Challenges —

The coalition has achieved measurable results, such as reduced youth substance use rates, healthier school policies, and stronger family-school partnerships. However, challenges remain, such as sustaining engagement over time, **balancing the power** of professionals with resident leaders, and maintaining sufficient resources (**financial** and non-financial) to support community participation.

Transferable Lessons —

CTC offers clear lessons for other regions:

- Compensate residents fairly for their time and expertise.
- Formalize accountability so resident leaders can hold the collaborative responsible if efforts fail or cause harm.
- Use youth and parent voices to shape **data**, policy, and program design.
- Expect **trust-building** to take time, but recognize it as the foundation for **shared purpose** and **governance**.

Learn More

The full case study is available on GHPC's website.

SEE THE CASE STUDY

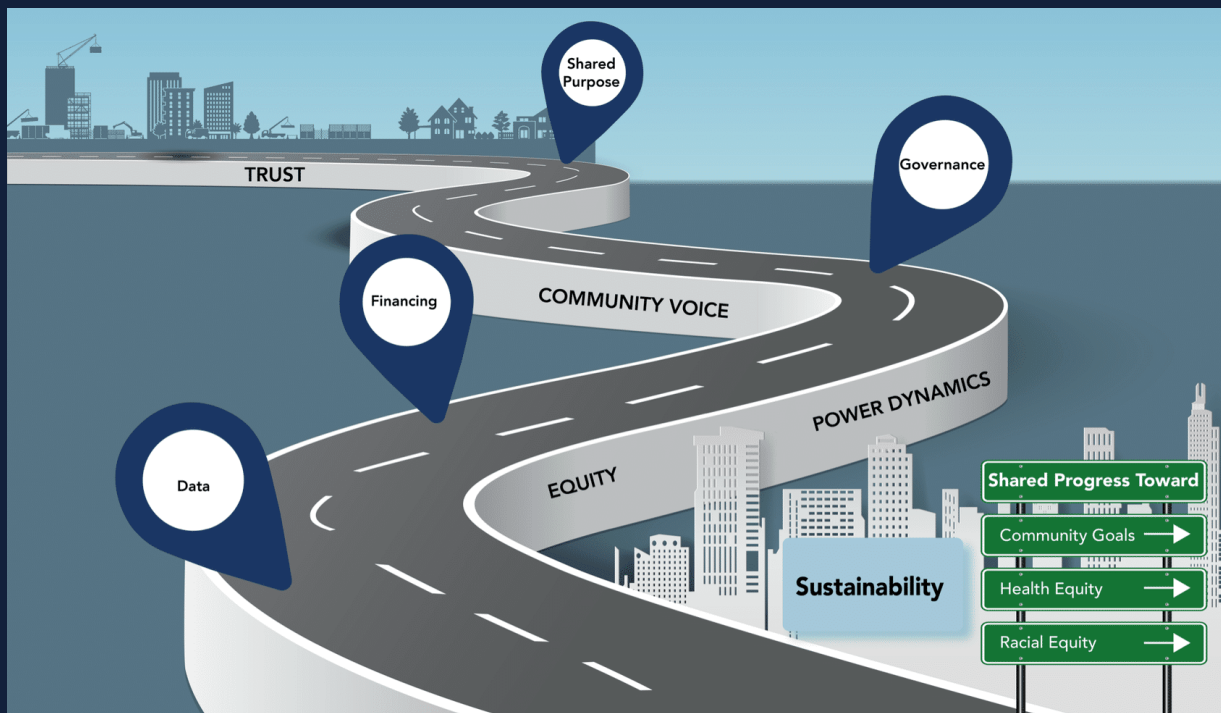


Community voice resources are next.

Resources: Community Voice

The Community Voice Adaptive Factor

Community voice means centering the leadership, knowledge, and perspectives of those most affected in every stage of collaborative work. Meaningful participation requires intentional practices, respectful relationships, and a commitment to equity, trust, and shifting power dynamics.



Resources for Community Voice

The following resources provide deeper understanding of community voice. These may be useful for your own development and when working with other partners in your

collaborative. Core (★) resources are must-read and highly practical. Optional (☆) resources are valuable for advanced learners, leaders, or facilitators.

- [Mapping Aligning Processes and Outcomes:
Community Voice Measurement Questions](#)
Questions to assess engagement depth and leadership.
TOOL | CORE ★
- [Aligning in Action: Communities That Care Coalition](#)
Rural coalition example with stipends and leadership roles.
CASE STUDY | CORE ★
- [The Process of Partnering with Community Members:
Preliminary Findings](#)
Tips on pay equity, emotional safety, and authentic engagement.
STORY BRIEF | CORE ★
- [Community Member Experiences with Collaboratives:
Preliminary Findings](#)
Direct voices and themes from community members.
STORY BRIEF | OPTIONAL ☆



Learn about the **power dynamics** adaptive factor next.

Introduction: Power Dynamics

The Power Dynamics Adaptive Factor



Power dynamics shape how decisions are made and who holds influence in a collaboration, often creating imbalances that affect outcomes. Understanding and addressing these disparities, particularly for marginalized groups, is critical for creating more equitable and effective partnerships.



Questions to Consider

These questions are designed to help partners think about their collaborative work. They can be used to help organizations identify and set benchmarks and/or highlight successes or opportunities for improvement.

- To what extent has your work with the collaborative increased your sense of power to make positive change?
- How would you describe the amount of effort the collaborative puts into redistributing power between partners?
- How often does the collaborative adopt the ideas of representatives of the community most affected by the collaborative?
- How would you describe the amount of effort the collaborative puts into promoting leadership skills and opportunities among partners from the community being served?
- How does the collaborative address conflict?



A **power dynamics** case study is next.

Case Study: Power Dynamics



The Power Dynamics Adaptive Factor

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Communities Joined in Action: Balancing Power Dynamics

Communities Joined in Action (CJA) is a national network of local collaboratives committed to achieving health **equity** by improving care for vulnerable populations. CJA highlights how **power dynamics** can strengthen or undermine collaborative work. By intentionally addressing imbalances between large institutions and community partners, CJA members have created more equitable, accountable systems that reflect community needs.



Power Dynamics in Action —

CJA illustrates how recognizing and addressing power imbalances is key to collaboration. Many of its member collaboratives began with hospitals or health systems dominating decision-making. Over time, CJA promoted structures that redistribute power toward communities, ensuring that residents, grassroots organizations, and leaders from marginalized groups influence **governance**, funding, and priorities.

Importantly, CJA focuses on capacity-building, offering training and leadership opportunities so community representatives can fully participate in decision-making. Local collaboratives often adopt community-generated ideas, showing that residents' perspectives are not only welcomed but acted

upon. This shift increases community members' sense of **power** to make meaningful change at the scale of their region.

Power dynamics shaped the core components:

- **Governance** became more inclusive, giving grassroots partners a formal role.
- **Data** expanded to reflect both institutional outcomes and measures of community well-being.
- **Financing** decisions began to fund smaller organizations alongside large systems.

Other Adaptive Factors at Play —

CJA's work on **power dynamics** was reinforced by other adaptive factors. **Equity** served as the guiding principle. Redistributing power was directly tied to addressing systemic racism and disparities. **Trust** deepened as larger institutions followed through on commitments to share authority. **Community voice** was elevated by formal structures that allowed residents to influence programs and hold partners accountable.

Results and Challenges —

CJA's network has spread practices that increase the influence of communities most affected by inequities, including more equitable distribution of resources and stronger leadership pipelines for residents. Local collaboratives report stronger alignment between services and community needs and greater confidence among community members that they can effect change.

Challenges included resistance from larger institutions that were hesitant to cede control or worried about resource allocation. Sustaining **power-sharing** required ongoing negotiation, capacity-building, and transparency.

Transferable Lessons —

CJA demonstrates that power can be intentionally redistributed within collaboratives. Lessons for other regions include:

- Invest in capacity-building so community partners can lead confidently.
- Adopt and implement community-driven ideas to demonstrate accountability.

- Build **governance** and **financing** structures that **rebalance power** between large systems and grassroots organizations.
- Recognize that **shifting power** takes persistence, but it strengthens **trust, equity**, and long-term impact.

PDF: Communities Joined in Action (CJA) case study.

SEE THE FULL CASE STUDY

Video: Rapid-Cycle Research Early Findings: Communities Joined in Action.

WATCH THE VIDEO

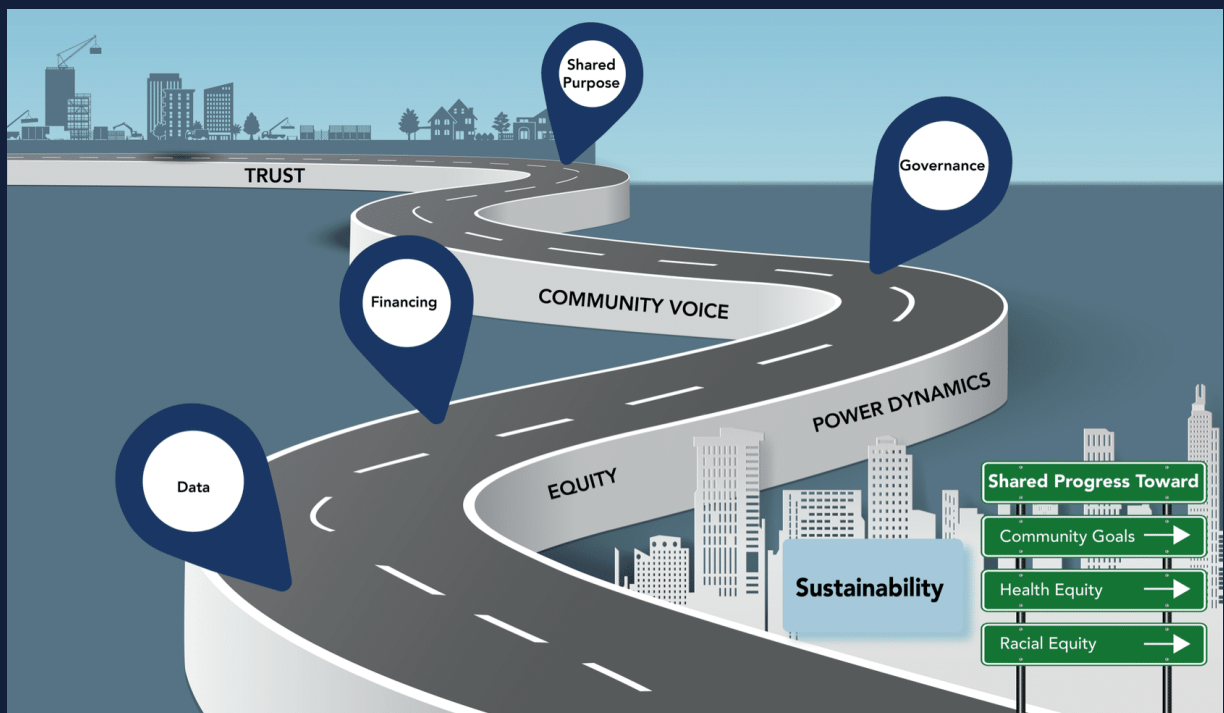


Power dynamics resources are next.

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Resources for Power Dynamics

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collaborative. Core (★) resources are must-read and highly practical. Optional (☆) resources are valuable for advanced learners, leaders, or facilitators.

- [Mapping Aligning Processes and Outcomes: Power Measurement Questions](#)

Concise guide for assessing and considering shifting power dynamics.

TOOL | CORE ★

- [Aligning in Action: ARCHI](#)

Large-scale power-sharing and systems-change example.

CASE STUDY | CORE ★

- [Health and Human Services Integration: Generating Sustained Health and Equity Improvement](#)

Evidence-rich; best as reference for leaders.

JOURNAL ARTICLE | OPTIONAL ☆

From the Fantastic Five

This resource is particularly useful for power dynamics. See all of the Fantastic Five resources in the Overview section.

4

- [Making Aligning Work: National Experts Reflect on Systemic Racism](#)

Centers racial equity and systemic power issues; essential framing piece.

FRAMING BRIEF | CORE ★



Learn about the **equity** adaptive factor next.

Introduction: Equity

The Equity Adaptive Factor

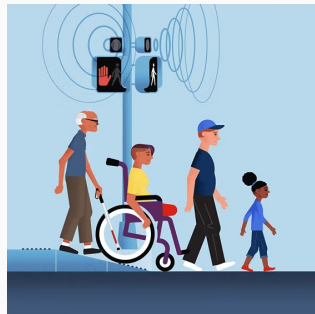


Equity ensures that every person and community has access to the specific resources and opportunities they need to thrive. In collaborative efforts, this means both removing barriers to participation and addressing the deeper systemic, historical, and structural causes that shape unequal access and outcomes.



EQUALITY

Everyone gets the same, regardless if it's needed or right for them.



EQUITY

Everyone gets what they need – understanding barriers,

circumstances, and
conditions.

Image credit: Copyright 2022 Robert Wood Johnson Foundation

Questions to Consider

These questions are designed to help partners think about their collaborative work. They can be used to help organizations identify and set benchmarks and/or highlight successes or opportunities for improvement.

- Would you say that the collaborative tends to value the lived experiences of members of the community it aims to serve, as it does professional experience?
- Have processes been streamlined to reduce the administrative burden on community members?
- Would you say the collaborative's leadership tends to promote racial and ethnic equity within the collaborative?
- Would you say the collaborative's leadership tends to promote equity in a wide range of dimensions within the collaborative?
- How sufficient are the collaborative's efforts to address the root causes of inequitable health outcomes in the community it aims to serve?



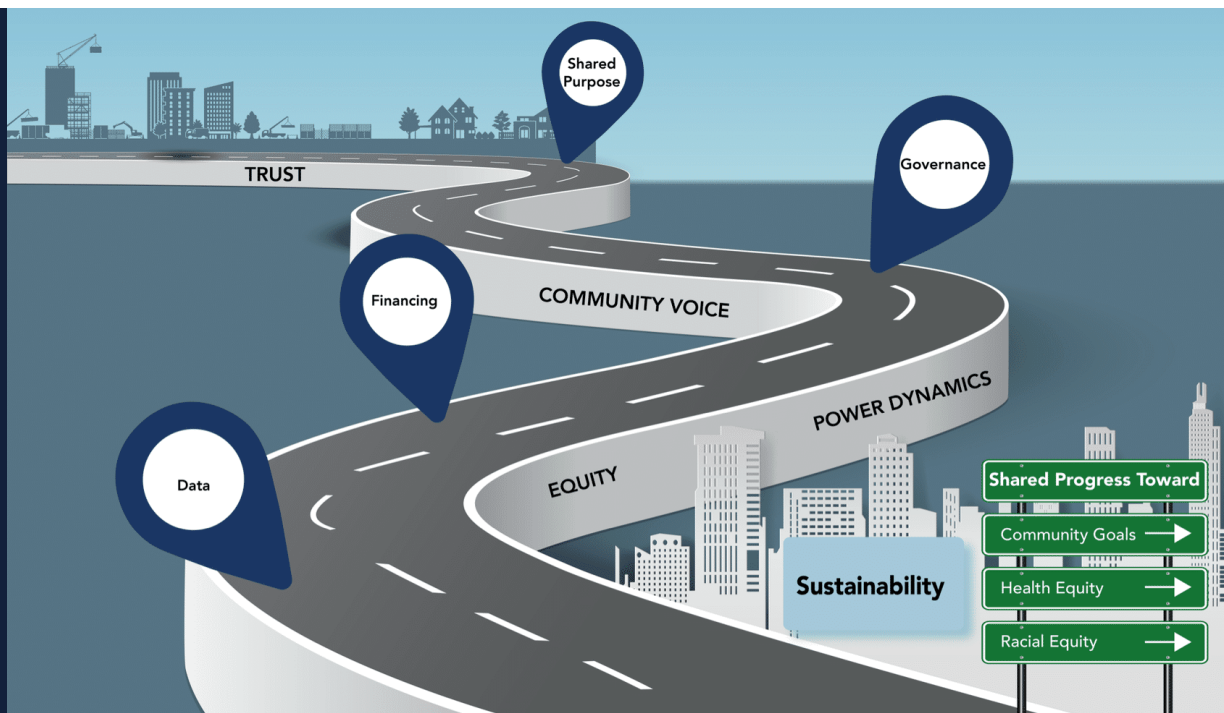
An **equity** case study is next.

Case Study: Equity



The Equity Adaptive Factor

Equity ensures that every person and community has access to the specific resources and opportunities they need to thrive. In collaborative efforts, this means both removing barriers to participation and addressing the deeper systemic, historical, and structural causes that shape unequal access and outcomes.



Communities of Opportunity: Advancing Equity Through Community Leadership

Communities of Opportunity (COO) is a partnership between King County, Washington, and a local philanthropy that began in 2014 to improve health, housing, and economic opportunity. COO demonstrates how **equity** can serve as both a guiding principle and a practical framework for aligning sectors. By centering racial **equity** and community leadership, the initiative has reshaped how resources are allocated and how decisions are made.

Equity in Action

Equity is the foundation of COO. From the start, the initiative committed to advancing **racial equity** and social justice by targeting investments in communities most affected by inequities. Funding priorities were identified by those communities, and decision-making structures ensured that residents and grassroots organizations had a central role.

Equity also shaped the core components:

1. **Shared purpose** was built around reducing racial and geographic disparities in King County.
2. **Governance** included community representatives as partners in decision-making alongside county officials and philanthropy.
3. **Financing** intentionally prioritized neighborhoods facing systemic inequities, not just those with the loudest voices or most resources.
4. **Data** was disaggregated by race, ethnicity, and geography to monitor disparities and track progress.

Other Adaptive Factors at Play —

Equity worked hand-in-hand with **community voice**, which ensured that strategies reflected lived experiences. **Trust** was built by honoring community leadership and following through on resource commitments. **Power** was redistributed as county agencies and philanthropy shifted from a top-down approach to sharing authority with community partners.

Results and Challenges —

COO has helped advance more equitable housing policies, expanded access to economic opportunities, and increased investment in community-based organizations. Partners credit the initiative with changing how King County does business, moving **equity** from rhetoric to practice.

Challenges included the complexity of balancing institutional requirements with community-driven priorities. Some agencies struggled to adapt to **power-sharing** models, and sustaining long-term **funding** for **equity**-focused initiatives remains a hurdle.

Transferable Lessons —

COO demonstrates that **equity** is not just an outcome but a process that must shape every component of collaboration. Other regions can learn to:

- Embed racial **equity** explicitly into vision, **governance**, and **financing decisions**.
- Use disaggregated **data** to identify disparities and track progress.

- Share authority with communities most affected by inequities, not just consult them.
- Recognize that advancing **equity** requires sustained investment and a willingness to change institutional practices.

Learn More

Read about the case study on the Communities of Opportunity website.

SEE THE CASE STUDY

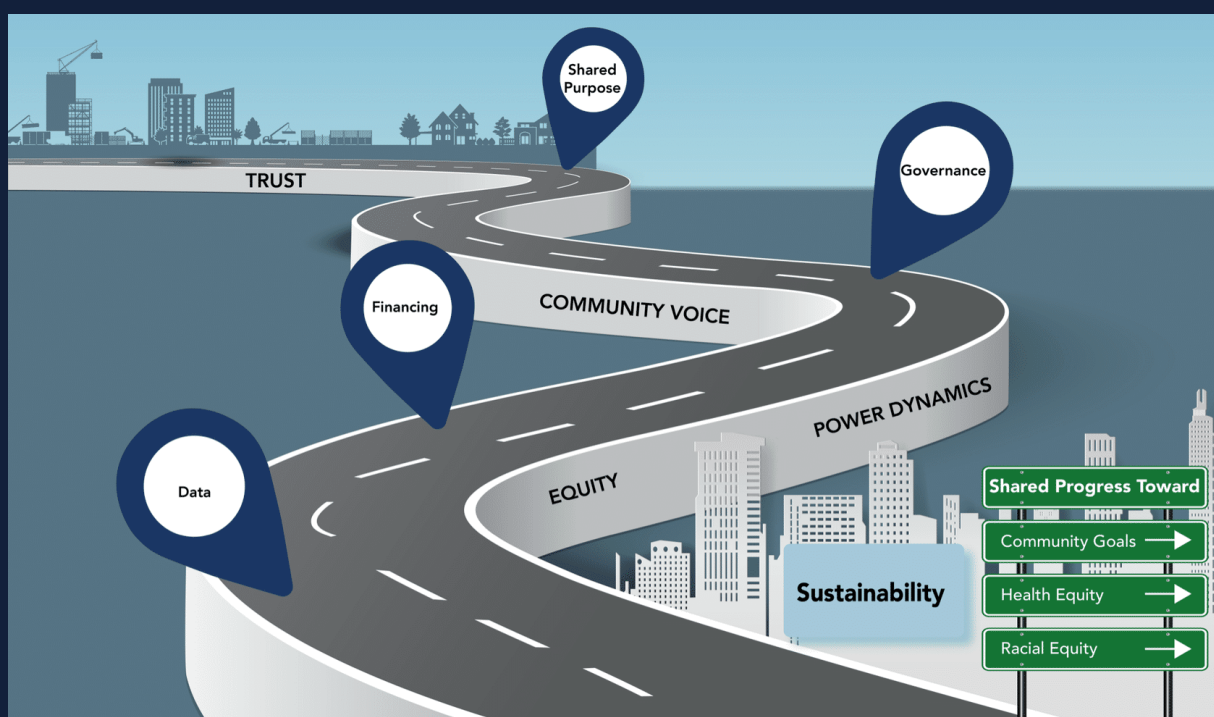


Equity resources are next.

Resources: Equity

The Equity Adaptive Factor

Equity ensures that every person and community has access to the specific resources and opportunities they need to thrive. In collaborative efforts, this means both removing barriers to participation and addressing the deeper systemic, historical, and structural causes that shape unequal access and outcomes.



Resources for Equity

The following resources provide deeper understanding of equity. These may be useful for your own development and when working with other partners in your collaborative. Core (★) resources are must-read and highly practical. Optional (☆) resources are valuable for advanced learners, leaders, or facilitators.

- [Equity, Health Equity, and Racial Equity in the Framework for Aligning Sectors](#)
Visual definitions for baseline shared understanding.
PRIMER | CORE ★
- [Equity from a Cross-Sector Alignment Perspective: Findings from a Literature Review](#)
Evidence-based strategies for equity work; advanced reading.
EVIDENCE BRIEF | OPTIONAL ☆
- [Mapping Aligning Processes and Outcomes: Measurement Questions for Equity as an Adaptive Factor](#)
Practical guide for measuring equity as input/output.
TOOL | CORE ★

From the Fantastic Five

This resource is particularly useful for equity. See all of the Fantastic Five resources in the Overview section.

4

[Making Aligning Work: National Experts Reflect on Systemic Racism](#)

Centers racial equity and systemic power issues; essential framing piece.

FRAMING BRIEF | CORE ★



Learn about the **governance** component next.

Introduction: Governance

The Governance Component



Shared governance is how collaborators make decisions, share leadership, and stay accountable to one another. It combines clear structures—like agreements and roles—with strong relationships built on trust and transparency. When governance is shared effectively, partners can act fairly, resolve conflict, and manage resources together.



Questions to Consider

These questions are designed to help partners think about their collaborative work. They can be used to help organizations identify and set benchmarks and/or highlight successes or opportunities for improvement.

- Is there a formal charter or founding document that outlines the main governance processes of the collaborative?
- Is there clear documentation that allows all to see who is in the collaborative, how funds are flowing between partners, and what roles each partner has?
- How much influence over collaborative decisions is held by different partners, including people from the community at the focus of the work?
- How well would your collaborative function if key partners were gone tomorrow?
- How sufficient are the collaborative's efforts to create a sense of accountability among partners?



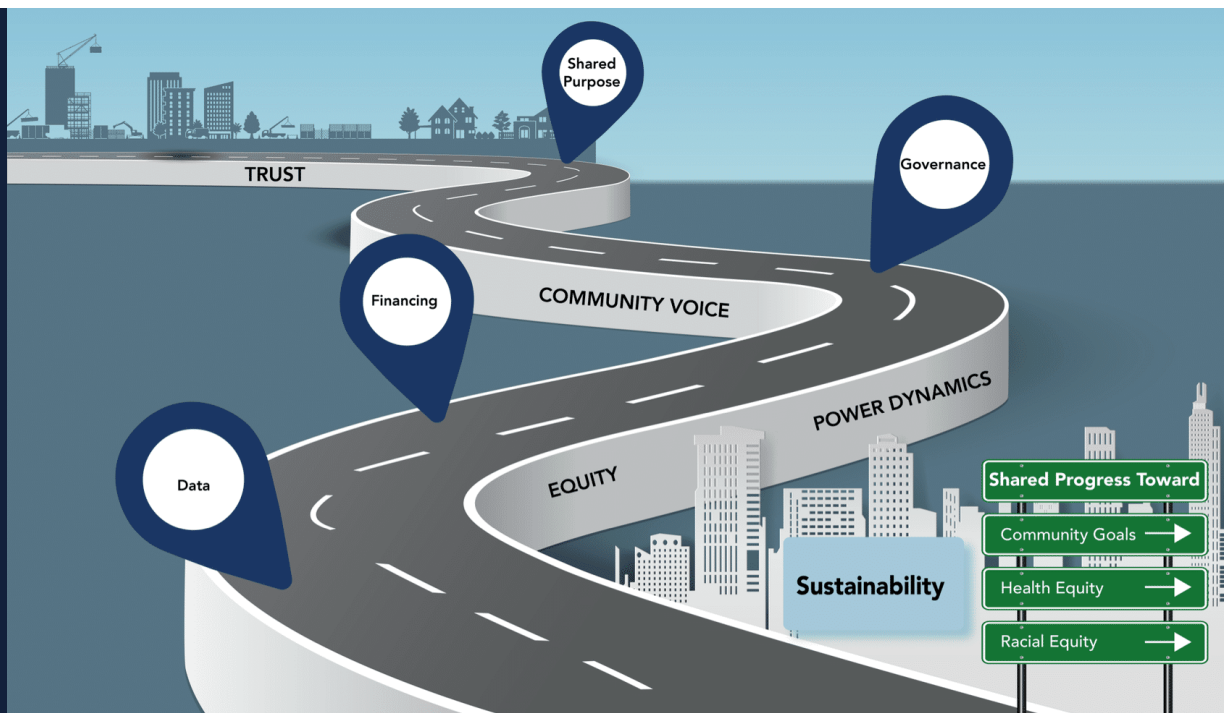
A **governance** case study is next.

Case Study: Governance



The Governance Component

Shared governance is how collaborators make decisions, share leadership, and stay accountable to one another. It combines clear structures—like agreements and roles—with strong relationships built on trust and transparency. When governance is shared effectively, partners can act fairly, resolve conflict, and manage resources together.



HealthierHere: Shared Governance for System-Level Alignment

HealthierHere is one of nine Accountable Communities of Health (ACHs) in Washington State, created to coordinate the state's Medicaid Transformation Project. Based in King County, it brings together hospitals, primary care providers, behavioral health agencies, social service organizations, and tribal health leaders to improve outcomes for Medicaid enrollees. HealthierHere shows how **shared governance** structures can align large and diverse organizations around common health **equity** goals.

Shared Governance in Action —

Shared governance is the core strength of HealthierHere. As the designated ACH for King County, it was given authority to direct Medicaid transformation funds, oversee program implementation, and hold partners accountable. Its **shared governance** model includes a formal board where health systems, community-based organizations, tribal representatives, and consumer leaders all have a voice in decisions.

Adaptive factors are woven into this structure. **Equity** is built into the mission, with decision-making explicitly tied to reducing disparities. **Trust** is fostered by ensuring that smaller community-based organizations can participate alongside large health systems. **Community voice** is not symbolic but institutionalized, giving residents and consumers meaningful influence over strategy. These factors make the **shared governance structure** credible and effective.

Additional Core Components —

Data supports **governance** by tracking Medicaid waiver performance measures and monitoring **equity** outcomes. **Shared purpose** is also essential. The convening power of HealthierHere depends on partners uniting around a vision of healthier, more equitable communities. Together, these components reinforce the **shared governance** framework.

Results and Challenges —

HealthierHere has directed millions of dollars in Medicaid transformation funds to initiatives like integrated behavioral health, care coordination, and culturally responsive care models. Its **shared governance** approach has allowed resources to flow to smaller, grassroots organizations, not just large institutions.

Challenges included balancing the **power dynamics** of such a large coalition. Hospitals and health systems had more resources and influence, so structures had to be designed to ensure community-based groups could contribute meaningfully. Continuous work was needed to prevent **governance** from tilting toward the loudest or most powerful voices.

Transferable Lessons —

Other collaboratives can learn from HealthierHere's model of formalized but inclusive **shared governance**. A clear board structure provides accountability, but **equity, trust, and community voice** are what make **shared governance** effective rather than performative. Success depends on actively balancing power and ensuring that **governance** reflects — not overrides — community needs.

[SEE THE FULL CASE STUDY](#)



Governance resources are next.

Resources: Governance

The Governance Component

Shared governance is how collaborators make decisions, share leadership, and stay accountable to one another. It combines clear structures—like agreements and roles—with strong relationships built on trust and transparency. When governance is shared effectively, partners can act fairly, resolve conflict, and manage resources together.



Resources for Governance

The following resources provide deeper understanding of governance. These may be useful for your own development and when working with other partners in your collaborative. Core (★) resources are must-read and highly practical. Optional (☆) resources are valuable for advanced learners, leaders, or facilitators.

- [Aligning in Action: Allegheny County Health Dept.](#)
Public health leadership, transparency, and dashboards.
CASE STUDY | CORE ★
- [Aligning Across Sectors: Key Considerations for Governance Measurement](#)
Detailed evaluation guide for governance structures.
TECHNICAL REFERENCE | OPTIONAL ☆
- [Aligning in Action: Denver Area Agency on Aging](#)
Shows governance evolution and strategies.
CASE STUDY | CORE ★
- [Making Aligning Work: National Experts Reflect on Purpose, Data, Financing, and Governance](#)
Deep dive into interconnected governance elements.
TECHNICAL REFERENCE | OPTIONAL ☆



Learn about the **financing** component next.

Introduction: Financing

The Financing Component



With shared financing, partners contribute and manage resources together to reach common goals. It ensures that funding, risks, and benefits are distributed fairly. In strong collaborations, shared financing also supports long-term sustainability and community impact.



Questions to Consider

These questions are designed to help partners think about their collaborative work. They can be used to help organizations identify and set benchmarks and/or highlight successes

or opportunities for improvement.

- Are the collaborative's own financial inflows and outflows (and any other flows between collaborative partners) reported publicly and to all partners at least on an annual basis?
- In your view, how sufficient are the collaborative's efforts to follow the guidance of the community it serves in terms of how the collaborative's funding is allocated?
- Does the collaborative require partners that are spending collaborative funds to share decision-making power with members of the community served by the collaborative?
- In your view, what percentage of the collaborative's partner organizations are contributing their fair share to the collaborative's pool of resources?
- As far as you know, has the collaborative identified the financial resources needed to sustain its work over time (at least three years)?



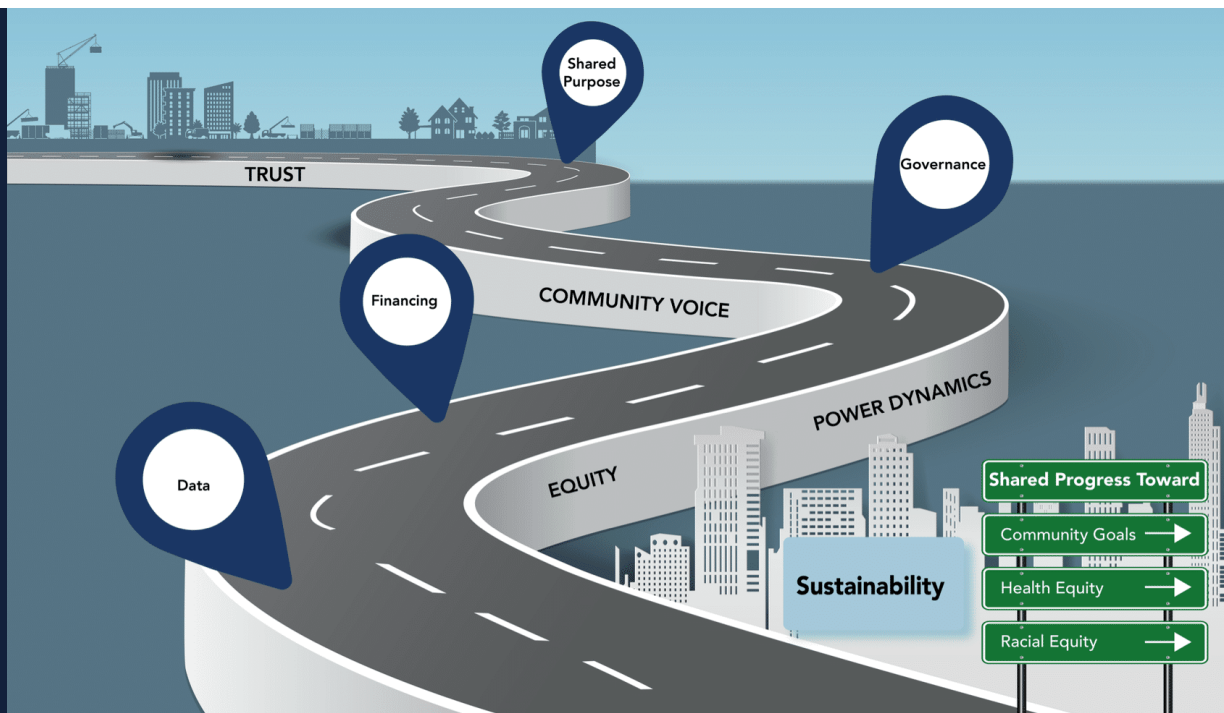
A **financing** case study is next.

Case Study: Financing



The Financing Component —

With shared financing, partners contribute and manage resources together to reach common goals. It ensures that funding, risks, and benefits are distributed fairly. In strong collaborations, shared financing also supports long-term sustainability and community impact.



ARCHI: Financing for Long-Term Health Equity

The Atlanta Regional Collaborative for Health Improvement (ARCHI) was launched in 2012 as a 28-year initiative to transform health and social systems in the Atlanta region. ARCHI brings together more than 100 partners, such as hospitals, government agencies, foundations, community-based organizations, and residents, to improve health equity and strengthen communities. ARCHI demonstrates how innovative **shared financing structures**, paired with **shared governance** and strong adaptive factors, can sustain long-term change.

Shared Financing in Action

Shared financing is the cornerstone of ARCHI's success. The collaborative brings together resources from hospital community benefit dollars, philanthropic foundations, and public agencies. These funds are braided and blended to support both pilot programs and long-term strategies.

- Braided funding means combining money from different sources but still tracking each source separately (for example, hospital funds, government grants, and foundation dollars working side by side).

- Blended funding goes a step further, pooling money so it functions as a single funding stream, making it easier to launch or sustain programs.

This approach ensures that no single funding source dominates and reduces the risk of mission drift. ARCHI leaders, including the United Way, the Atlanta Regional Commission, and GHPC, play a key role in identifying funding opportunities and convening partners to pool resources.

Transparency and accountability are emphasized. Partners and funders are kept informed about financial inflows and outflows, and ARCHI actively works to align funding decisions with community priorities, not just institutional agendas. To avoid exploitation of unpaid community labor, ARCHI also compensates residents who serve as advisers, ensuring **community voice** shapes investment decisions.

Adaptive factors are deeply intertwined with ARCHI's financing model. **Trust** is what makes braiding dollars possible — partners know that resources will be used fairly. **Equity** is the guiding principle for how funds are allocated, with intentional investments in underserved neighborhoods. **Power** is balanced by ARCHI's role as a neutral backbone organization that absorbs financial risk and helps partners collaborate across traditional divides.

Additional Core Components —

Shared financing is supported by other core components:

- **Shared governance:** A steering committee and executive leadership team provide oversight and decision-making power, ensuring funding strategies reflect the collective mission.
- **Shared data:** ARCHI tracks both financial flows and health outcomes, using **data** to demonstrate return on investment and guide future allocations.
- **Shared purpose:** The 28-year strategy provides a clear, long-term vision that keeps partners aligned despite changing leadership or funding climates.

Results and Challenges —

ARCHI's financing approach has sustained programs such as Community Resource Hubs, which connect residents with health and social services, and innovative care models that integrate medical and social supports. By braiding dollars, ARCHI has been able to scale pilot projects into permanent

programs and ensure that smaller community-based organizations receive funding alongside large institutions.

Challenges include the complexity of aligning funds with diverse requirements from multiple sources, as well as the constant work of sustaining partner commitment. Diversification reduces risk, but it requires ongoing effort to manage relationships and keep funding tied to the mission. Leaders have worked to prevent mission drift by continually reaffirming the 28-year vision and ensuring that investments remain **equity**-focused.

Transferable Lessons —

ARCHI demonstrates that sustainable **financing** is possible when partners commit to diversification, transparency, and **equity**. Other regions can learn from:

- Building a diverse funding portfolio (philanthropy, hospitals, public dollars).
- Following community guidance to shape allocations and avoid top-down decision-making.
- Embedding sustainability planning into every project from the beginning (“Where will this program live long term?”).
- Using **shared governance structures** and a **shared vision** to guard against mission drift.

ARCHI shows that **shared financing** is not just about money — it’s about **trust, equity, and shared commitment** to long-term change.



ARCHI Overview

Atlanta Regional Commission

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SEE THE FULL CASE STUDY

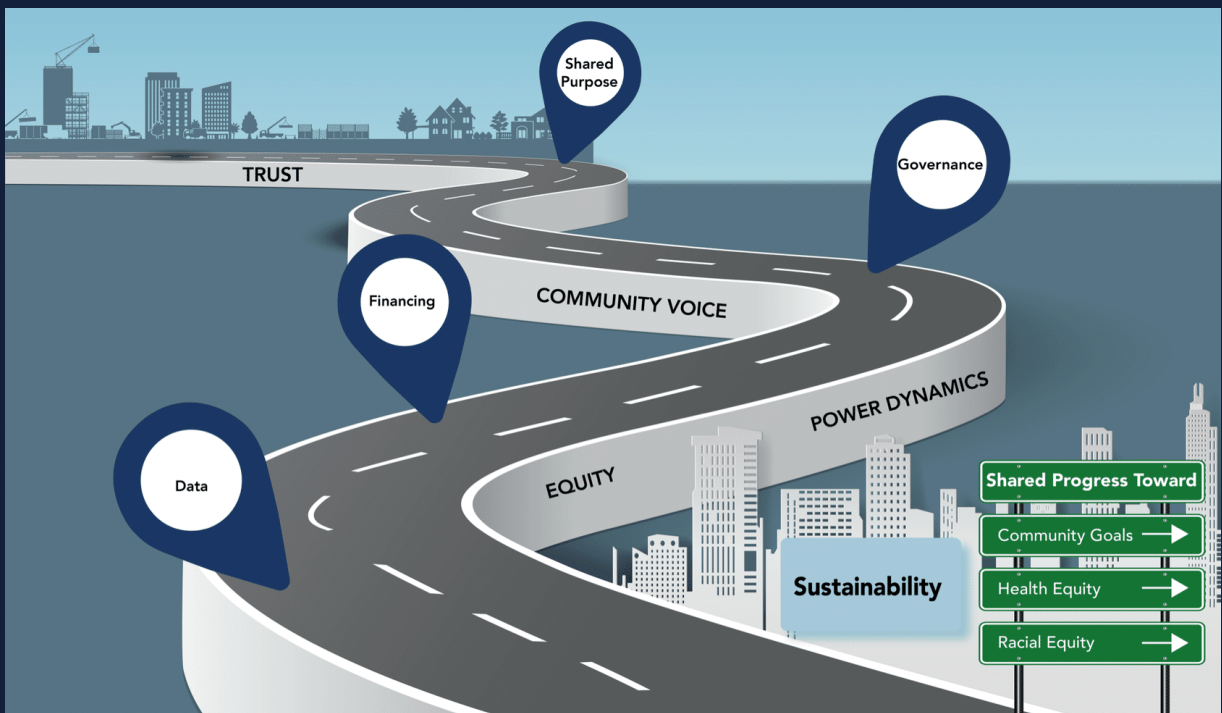


Financing resources are next.

Resources: Financing

The Financing Component

With shared financing, partners contribute and manage resources together to reach common goals. It ensures that funding, risks, and benefits are distributed fairly. In strong collaborations, shared financing also supports long-term sustainability and community impact.



Resources for Financing

The following resources provide deeper understanding of financing. These may be useful for your own development and when working with other partners in your collaborative. Core

(★) resources are must-read and highly practical. Optional (☆) resources are valuable for advanced learners, leaders, or facilitators.

- [Maximizing Federal COVID-19 Recovery Investments for Resilience and Equity: Examples From Across the Nation](#)

ARPA funding decisions and equity-driven financing models.

PRACTICAL BRIEF | CORE ★

- [Aligning in Action: Denver Area Agency on Aging](#)

Creative financing solutions in social services context.

CASE STUDY | CORE ★

- [Making Aligning Work: National Experts Reflect on Purpose, Data, Financing, and Governance](#)

Leadership-focused resource on funding challenges.

TECHNICAL REFERENCE | OPTIONAL ☆



Learn about the **data** component next.

Introduction: Data

The Data Component



Shared data helps partners understand community needs, measure progress, and make informed decisions together. Strong collaborations collect, organize, and share data in ways that are transparent and useful to both partners and the community.



Questions to Consider

These questions are designed to help partners think about their collaborative work. They can be used to help organizations identify and set benchmarks and/or highlight successes

or opportunities for improvement.

- How sufficient are the collaborative's efforts to create, document, and manage policies for collaborative data use, transfer, and sharing, given the context?
- How sufficient are your collaborative's efforts to ensure that all partners have the capacity (technical, human, financial, informational, etc.) to share data in a way that helps assess progress toward, and ultimately achieve, the goals of the collaborative?
- How sufficient are the collaborative's efforts to collect and share data in a way that helps all partners understand the amount of progress being made toward the collaborative's goals?
- How sufficient are the collaborative's efforts to address the differences in data-sharing benefits gained, and risks faced, by different partner organizations and people in different identity groups?
- How sufficient are the collaborative's efforts to address legal matters that are a barrier to sharing data between partners who want to share data?



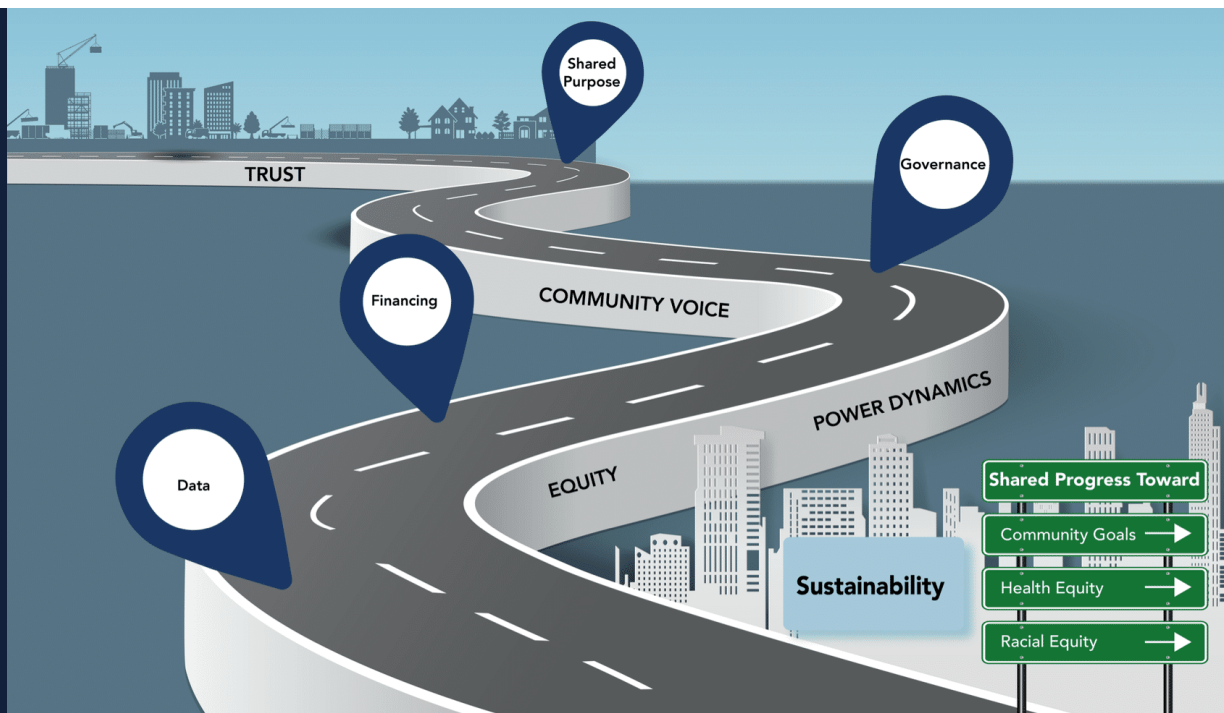
A **data** case study is next.

Case Study: Data



The Data Component

Shared data helps partners understand community needs, measure progress, and make informed decisions together. Strong collaborations collect, organize, and share data in ways that are transparent and useful to both partners and the community.



Live Well San Diego: Data as a Driver of Change

Launched in 2010, Live Well San Diego is a countywide initiative that unites public agencies, nonprofits, schools, businesses, and community groups to improve health, safety, and quality of life for more than 3 million residents. Led by the San Diego County Health and Human Services Agency, the initiative shows how a **shared data framework** can align diverse partners around measurable goals and ensure accountability over time.

Shared Data in Action

Shared data is the backbone of Live Well San Diego. The county developed a comprehensive framework of indicators covering health, safety, education, and community well-being. These metrics were shared openly through public dashboards and reports, making progress visible to both partners and residents. This transparency built **trust** among organizations and gave the community confidence that resources were being used responsibly.

Equity was embedded by disaggregating **data** by race, ethnicity, and neighborhood, which made disparities clear and guided targeted interventions. **Community voice** played a role in shaping

indicators and contextualizing reports, ensuring that **data** reflected local realities and not just countywide averages. By making its **data** public, providing technical support for partners, and ensuring accountability for proper **data** use, Live Well San Diego demonstrates how **data** and adaptive factors, such as **trust**, **equity**, and **community voice**, interact to drive equitable change.

Additional Core Components —

Live Well San Diego's use of **data** was strengthened by **shared purpose** and shared **governance**. A unifying vision of "healthy, safe, and thriving communities" gave partners a common language. **Governance** was county-led but inclusive, bringing together schools, businesses, and community organizations. This structure ensured that diverse partners could coordinate efforts while still addressing local needs.

Results and Challenges —

Live Well San Diego has documented progress across multiple domains, including improved access to preventive health services and higher graduation rates. More importantly, its indicator framework created a culture of accountability, allowing partners to see how their work contributed to countywide goals.

Challenges included building **data** capacity across such a large and diverse county. Not all partners had the resources or skills to use **data** effectively, and early efforts raised concerns about ensuring that indicators matched community priorities. Over time, these barriers were addressed by investing in technical support, refining indicators, and strengthening relationships.

Transferable Lessons —

Other communities can learn from Live Well San Diego's use of **data** as a unifying force. Success depends on creating a transparent framework, disaggregating **data** to keep **equity** at the center, and engaging communities to make the **data** meaningful. **Shared governance** structures and **shared purpose** are important, but it is the interaction of **data** with **trust**, **equity**, and **community voice** that makes alignment durable and credible.

[SEE THE FULL CASE STUDY](#)

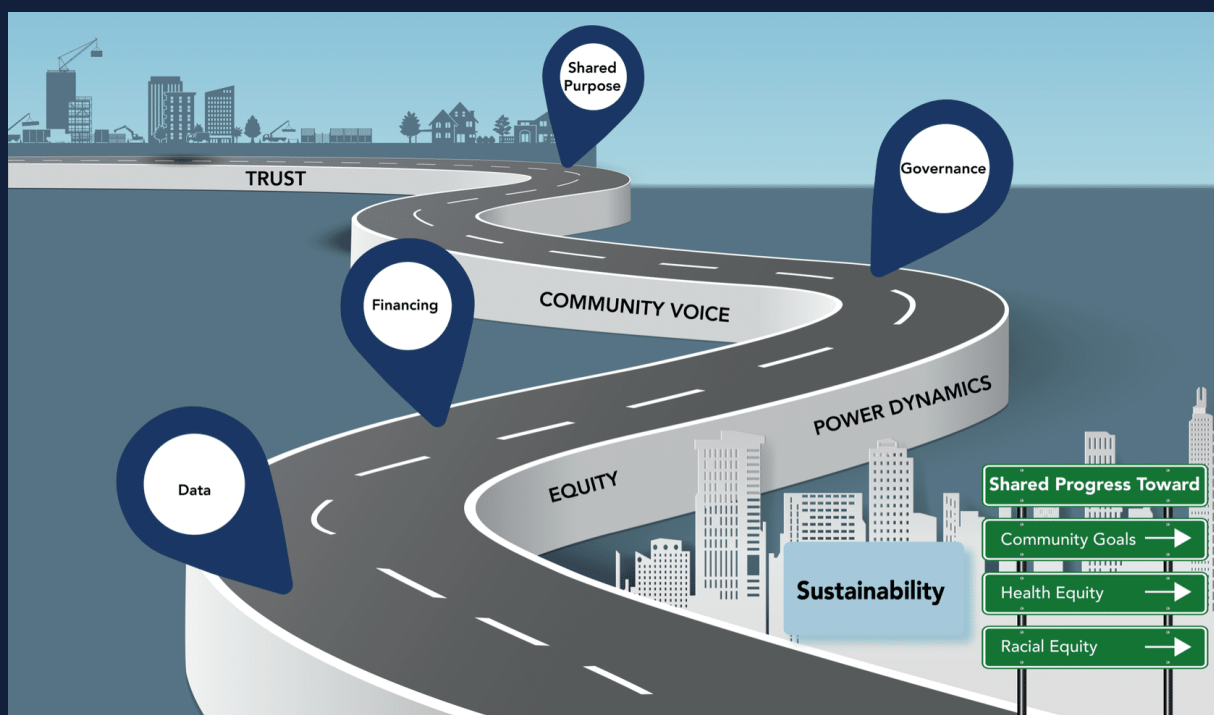


Data resources are next.

Resources: Data

The Data Component

Shared data helps partners understand community needs, measure progress, and make informed decisions together. Strong collaborations collect, organize, and share data in ways that are transparent and useful to both partners and the community.



Resources for Data

The following resources provide deeper understanding of data. These may be useful for your own development and when working with other partners in your collaborative. Core (★)

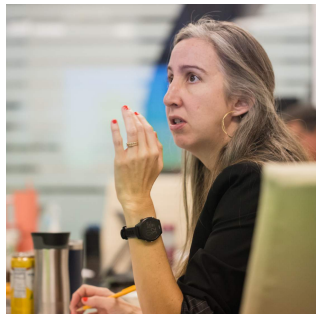
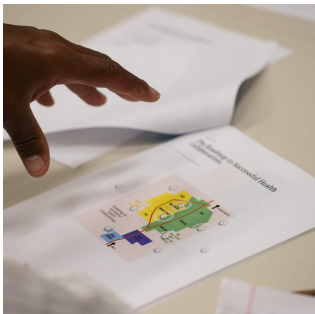
resources are must-read and highly practical. Optional (☆) resources are valuable for advanced learners, leaders, or facilitators.

- [Aligning in Crisis: Building Data-Sharing Capacity](#)
Practical story of dashboards and community engagement.
CASE STUDY | CORE ★
- [Existing Measures: Measuring Alignment](#)
Overview of measurement systems; evaluator resource.
TECHNICAL REFERENCE | OPTIONAL ☆
- [Aligning in Action: Allegheny County Health Dept.](#)
Demonstrates transparency via dashboards.
CASE STUDY | CORE ★
- [Aligning in Action: Allegheny County Health Dept.](#)
Demonstrates transparency via dashboards.
CASE STUDY | CORE ★



Learn about the Aligning Systems for Health initiative next.

The Aligning Systems for Health Initiative



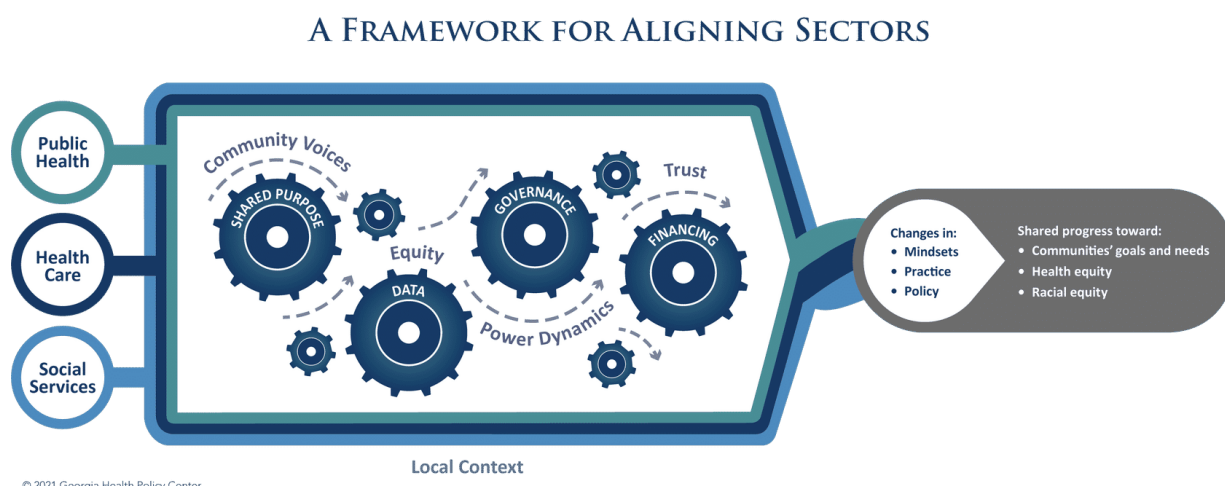
A Transformative Initiative by the Georgia Health Policy Center

The Aligning Systems for Health initiative, led by the Georgia Health Policy Center (GHPC) at Georgia State University, represents a pioneering effort to bridge the gaps between health care, public health, and social services. Supported by the Robert Wood Johnson Foundation (RWJF), this national initiative seeks to create sustainable, community-centered systems that better address and support the conditions where people can reach their fullest potential state of health and well-being.

At its core, Aligning Systems for Health is driven by the recognition that siloed approaches to health and well-being are insufficient. The initiative aims to identify, test, and disseminate strategies that foster meaningful collaboration across sectors. GHPC has served as the national coordinating center for this effort, synthesizing research, supporting original studies, and cultivating a vibrant community of practice.

The initiative was born out of RWJF’s long-standing commitment to building a “Culture of Health” in America — one where everyone has a fair and just opportunity to be as healthy as possible. Drawing on years of grantmaking and research, RWJF first partnered with GHPC in 2019 to fund community-based research that led to the development of the Framework for Aligning Sectors, a foundational tool that guides the initiative’s work.

This framework emphasizes four core components essential for alignment: shared purpose, data, governance, and financing. It also highlights adaptive factors such as community voice, equity, power, and trust — elements critical to long-term success.



Alternative text framework description

Process Diagram: A Framework for Aligning Sectors

Three sectors feed into a shared framework: Public Health, Health Care, and Social Services. Inside the framework box, large interconnected gears represent the core components of alignment: Shared Purpose, Data, Governance, and Financing. Smaller gears and dotted arrows emphasize the importance of Community Voices, Equity, Power Dynamics, and Trust.

The framework is rooted in Local Context.

The framework highlights that aligned work leads to changes in mindsets, practice, and policy, which support shared progress toward:

- Communities' goals and needs
- Health equity
- Racial equity

GHPC's approach to advancing this work has been both strategic and inclusive. The Center has awarded millions in research and rapid-cycle evaluation grants to organizations across the country, including academic institutions, health coalitions, and community-based groups. These grantees explored diverse models of cross-sector collaboration, particularly in response to pressing challenges like the COVID-19 pandemic, economic instability, and structural racism.

In the most recent initiative, GHPC sought to understand how the Framework for Aligning Sectors could meaningfully include community partners, so that efforts to address health outcomes would be led by those with lived experience and prioritize the needs and solutions of communities. By fostering collaboration, elevating community voices, and promoting sustainable change, GHPC and RWJF have developed a toolkit that equips community members and institutional partners to work together in reshaping cross-sector transformations in the United States.

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