Engaging Emergent Strategies in Facilitating Multi-Stakeholder Health Equity Collaboration

AUTHORS

Vicki Quintana, Center for Health Care Strategies
Kim Singletary, University of Chicago

///AHE Advancing Health Equity

/ Leading care, payment, and systems transformation

Introduction

Across the U.S. health care system, groups of people representing varying perspectives are coming together to advance health equity by improving unjust health outcomes and addressing the structures that perpetuate them. This complex work requires collaboration in teams that include multiple types of stakeholders in public health, health care, social services, and community-based organizations.

Cross-organizational teams made up of people with differing perspectives, skills, and backgrounds frequently experience challenges with hierarchical power dynamics, bias toward the status quo, and lack of trust. If left unattended, these challenges can impair team functioning and progress toward health equity goals. Cross-organizational teams can look outside the fields of medicine, public health and organizational psychology toward the work of social activists and scholars such as **adrienne maree brown**[*]. adrienne grows healing ideas in public through her multi-genre writing, her music and her podcasts. Informed by 25 years of movement facilitation, somatics, Octavia E. Butler scholarship and her work as a doula, adrienne has nurtured Emergent Strategy, Pleasure Activism, Radical Imagination, and Transformative Justice as ideas and practices for transformation. She is the author/editor of several published texts, co-generator of a tarot deck and a developing musical ritual. In this document, the authors apply her ideas to their own cross-organizational team structure.

* adrienne maree brown does not capitalize her name.

Emergent Strategy in Advancing Health Equity

In *Emergent Strategy: Shaping Change, Changing Worlds*, brown describes a set of practices that groups of people with differing perspectives and expertise can employ to reshape existing systems toward their vision for more justice and equity. A shared vision provides a goal for the team to work toward while setting the conditions for flexibility in tactics. The **core principles** of Emergent Strategy include:

/ **The large replicates the small**
/ **Change is constant**
/ **Move at the speed of trust**
/ **Create more possibilities**
/ **What you pay attention to grows**

Emergent Strategy can help multi-stakeholder teams foster relationships and creative spaces that support engagement in reducing health inequities. This document details the **Advancing Health Equity (AHE)** team's use of two Emergent Strategy practices to facilitate collaboration, inclusion, and creativity within our team: proposal-based decision-making and non-linear agendas.

Advancing Health Equity (AHE) is a national program that supports teams of cross-sector health organizations as they transform health care delivery and payment strategies to implement equitable health outcomes. AHE is comprised of individuals with varying educational, experiential, and social backgrounds representing four different organizations:

- **The University of Chicago**
- **Center for Health Care Strategies**
- **Institute for Medicaid Innovation**
- **The Justice Collective**

Proposal-Based Decision-Making

The AHE team meets quarterly with a **National Advisory Committee (NAC)** with expertise in health policy, public health, health care, and community partnership. The NAC provides AHE with strategic and practical guidance to ensure a comprehensive, interdisciplinary approach. During the recruitment cycle for NAC committee members, AHE had the task of coming to a consensus on which potential advisors to invite. Although we were aligned in our purpose of recruiting advisors with a wide range of expertise, our method of deliberation hindered our decision-making ability. We decided to employ the Emergent Strategy tool of proposal-based decision-making.

Per Emergent Strategy, there are three steps to proposal-based decision-making:

1 **The full team engages in brainstorming to explore each member's ideas.** The goal in this phase is to listen to group members and avoid the urge to jump to decisions. After all are heard, the team can delegate the work of synthesizing and concretizing potential actions.

2 **Team members decide who will write proposals.** Proposal writers are chosen by the team as the designees who will create statements with the following structure: "Course of action, reason for the action and/or how it aligns with the group's mission or values." The number of and specific personnel to write proposals can vary based on the scope of conversation, however, teams should delegate proposal writing to their members with recognized skill in synthesizing multiple ideas.

3 **The group comes together to review proposals and make decisions.**
Decision-making could involve voting or adding amendments or counterproposals depending on the group's needs.

The AHE team determined that each partner organization would propose a certain number of NAC advisors based on the group discussion and would have veto power if they had strong objections to any proposed advisor. Once the team reviewed proposals, we were able to move forward quickly, recruiting a slate of advisors with strong commitment to the AHE mission and varying expertise to help us meet our goals. Additionally, none of the partner organizations utilized their veto power because we were able to understand and support the proposer's rationale for how the action would promote AHE's goals. Emergent Strategy provided an efficient, structured process for consensus decision-making through participation, active listening, and the use of rationale with clear alignment to the group's mission.

Non-Linear Agendas

AHE's work involves bringing together teams of people located across the country who are working in different facets of health care delivery to align their efforts toward health equity. It can be difficult to balance the power hierarchies that arise when teams from different departments and organizations begin working together. Decisions such as where a meeting is held, who facilitates, as well as who creates the agenda can all create power imbalances, even if the spirit of the meeting is egalitarian in nature. In addition, due to our geographic dispersion, we rely on virtual meeting and messaging tools that can also hinder our ability to communicate effectively.

A tool for mitigating power imbalances and participation challenges in multi-stakeholder meetings is the use of an agenda-building process that is shaped by participants, rather than handed down by a facilitator. Emergent Strategy describes circular and living agendas as non-linear processes for co-creation and collaboration in agenda setting. Circular agendas are visual and communicate how the concept of the work is connected, continuous, and expansive. Living agendas can take any shape and are created and re-created by the participants present. Both types of non-linear agendas are underpinned by the philosophy that the meeting's purpose is collaboration and relationship-building, which are best supported by a non-linear, co-created agenda.

In Spring 2022, the AHE team needed to regroup and align on next steps after personnel changes and a period of collaborating primarily in small workgroups. We recognized that using a non-linear agenda could provide an opportunity to strengthen communication and relationships with one another.

Combining the concepts of a living and circular agenda, we used the following process:

1 Out of nine people, two facilitators led the meeting, establishing the initial goals of creating space for the conversations we needed to have and uncovering needs for information or collaboration among team members.

2 Team members were given the following prompt: "What is on your mind for our work at this time? What discussion would you like to have with this group today?" We used a virtual whiteboard to enable each team member to post anonymous responses and encouraged team members to read each other's responses and add a "+1" if the topic was also on their mind.

3 Next, a facilitator organized the posted notes in a circle, grouping like items together and choosing a starting place in collaboration with participants.

4 The group discussed the posted topics, with the facilitator encouraging team members to seek clarity from each other when needed.

> Co-created agendas can alleviate a team's power imbalances.

At the end of the meeting, the team engaged in a debrief session. Participants reported that it was informative to see what was on other people's minds and that the format enabled them to engage deeply on topics of importance to group members, even if they were not associated with a specific deliverable or decision point. Facilitators reflected that they would not have been able to predict the broad range of agenda items the group generated. As a result, we created a new process for a performance gap that the group discovered during the discussion. Emergent Strategy provided a method of organizing meeting time to identify team member needs and enhance collaboration.

Recommendations for Multi-Stakeholder Teams Advancing Health Equity

Multi-stakeholder teams working to advance health equity are working across organizational hierarchies and power dynamics on complex, multifaceted approaches to health and health care equity. To facilitate their collaboration and create new possibilities for action, they can:

- **Democratize processes to achieve consensus via proposal-based decision-making.** Create space to listen to and value the input of all team members and reveal and clarify team values and goals.

- **Engage in co-creating agendas via non-linear processes for multi-stakeholder convenings.** Empower team members at all expertise levels and areas to participate in discussions and contribute their strengths. Support creativity and collaboration by emphasizing collaboration and discussion.

- **Learn more about Emergent Strategy tools** to create the relationships and team dynamics that will support creative solutions to the challenges of reducing health inequities.

Learning about and incorporating tools such as those outlined in Emergent Strategy can help multi-stakeholder teams embody the equitable practices they would like to see in health care as they increase the possibilities for their collaborations to advance health equity.

//AHE Advancing Health Equity

/ Leading care, payment, and systems transformation