

Queensland Mental Health Commission Evaluation – Final Literature Review

Applying Collaborative Capacity and Collective Impact theories to evaluate the Queensland Mental Health Commission.

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1. Introduction

The Queensland Mental Health Commission (QMHC) was established as an independent statutory body under the Queensland Mental Health Commission Act 2013 (the Act) on 1 July 2013 to drive on-going reform towards a more integrated, evidence-based, recovery-orientated mental health and substance misuse system.

The Vision of the QMHC is *“A healthy and inclusive community, where people living with mental health difficulties or substance use problems have a life with purpose and access to quality care and support focused on wellness and recovery in an understanding, empathic and compassionate society”*.

In contributing to this vision, the Commission will drive ongoing reform towards a more integrated, evidence-based, recovery-oriented mental health, drug and alcohol system within Queensland through:

- optimising sectoral consensus on, and making progress towards, achieving system wide outcomes, and
- maximising the collective impact of the available lived experience and professional expertise across the mental health alcohol and other drugs sector.

As the functions above indicate, the QMHC does not deliver direct mental health services but instead operates at a “meta-level”, supporting multiple lines of work with multiple stakeholders that are directed at the common goal of realising improved mental health and wellbeing. As such, its role in co-ordinating service delivery agencies and providers to achieve joint goals, facilitating the establishment of sustained relationships, and fostering productive collaborations will be key to its success.

To inform the development of a robust evaluation framework for assessing the success of the QMHC, this paper seeks to identify in the contemporary literature relevant content areas including:

- methods to facilitate the formation of collaborative capacity
- attributes of successful collaborative networks
- characteristics and emergent properties of collective impact
- methods best suited to evaluate these constructs and the relative contribution of multiple, overlapping initiatives on key outcomes.

The intent of this paper is not to undertake an exhaustive review of all previous discussions on these topics, as several exist already (e.g. Foster-Fishman, Berkowitz, Lounsbury, et al., 2001; Lai, 2012). Rather, we seek to identify relevant, practical constructs, methods and indicators that can be applied to the evaluation of the QMHC.

2. Methodology

The purpose of the current literature review is to sufficiently ground the QMHC evaluation in relevant content and theory for the constructs identified above and to guide an appropriate approach to evaluation. While the literature search and review are not exhaustive, a systematic methodology was employed. The primary database used was Scopus. Scopus (through Elsevier Publishing) is the most comprehensive database of peer-reviewed research including 50 million records, 21,000 titles, 5,000 publishers in the fields of science, technology, medicine, social sciences and arts & humanities (<http://www.info.scopus.com>). The process of the literature search is shown in Figure 1.



Figure 1: Overview of search methodology

The literature search, based on key terms outlined in the Invitation to Offer, contributed 45 relevant peer-reviewed articles. However, additional articles and resources were also included by the authors from their current areas of focus (e.g. evaluation, implementation science).

3. Findings

3.1. Approaching Complexity

A review of the literature uncovers a common thread among the constructs identified in Section 1 – the thread being complexity. Collaboration, collaborative capacity, collaborative networks, collective impact and methods for assessing, teasing out and understanding the emergent properties of these constructs - all are directed at describing or conceptualising the issue of complexity within social activities and interventions. The fundamental basis for all these concepts however, sits with collaboration.

3.1.1. Collaboration

Several variations of the definition of collaboration exist. Generally they include the concept of multiple stakeholders engaged in sharing tasks, information and/or resources, for a common purpose or overarching goal (Freidman, Reynolds, Quan et al., 2007; Schall, 2014). Himmelman (2001) considers collaboration in the context of coalitions (i.e. *“an organisation of organisations working together for a common purpose”*, p. 277) as the end point along a continuum of strategies in which coalitions might engage. These strategies vary in the degree to which they demand the investment of time, trust, and *“turf”* of partners. They may also be employed as mechanisms to achieve defined collective goals at a particular point in time or for a specific initiative. The strategies, from lowest to highest levels of investment, are networking, co-ordinating, co-operating, and collaborating (See Table 1 for further definition).

Collaboration is the most intensive strategy in terms of investment. It involves not only exchanging information, but changes to usual practices and a *“willingness to enhance the capacity of another for mutual benefit”* (p. 278). Collaboration leads to the sharing of risks and rewards, which can produce the greatest gains and may be used as an actual indicator of the effectiveness of a coalition.

Table 1: Strategies for building coalitions

Strategy	Defined as	Attributes	Used for
Networking	“exchanging information for mutual benefit”	Does not require much time or trust nor the sharing of turf.	Networking is a useful strategy for organisations that are in the initial stages of working relationships
Co-ordinating	“exchanging information for mutual benefit and altering activities for a common purpose”	Requires more time and trust but does not include the sharing of turf.	Co-ordinating is often used to create more user-friendly access to programs, services, and systems
Co-operating	“exchanging information, altering activities, and sharing resources for mutual benefit and a common purpose”	Requires significant amounts of time, high levels of trust, and a significant sharing of turf. May also require more complex organisational processes and agreements.	Co-operating may be used to achieve the expanded benefits of mutual action.
Collaborating	“exchanging information, altering activities, sharing resources,	Requires the highest levels of trust, considerable amounts of time, and an extensive	Collaboration is often required where individuals (or individual entities)

Strategy	Defined as	Attributes	Used for
	and a willingness to enhance the capacity of another for mutual benefit and a common purpose”	sharing of turf. Also involves sharing risks, resources, and rewards.	cannot achieve a goal independently (e.g. solving ‘wicked’ problems). When fully achieved, can produce the greatest benefits of mutual action.

(adapted from Himmelman, 2001)

Head (2008) expands on Himmelman’s definition and specifies two types of functional roles or activities – internal and external - that contribute to the effectiveness or impact of collaboration. Internally, collaborations serve to provide *information exchange* among members. However, it is *capacity-building* focused on *skill development* and *education* for members that constitutes a collaborative frame, according to Head (2008). Externally, roles for collaborations include *advice* around policy and programs, planning for social initiatives, and service delivery and improvement.

Collaborations, while holding promise for effectiveness, require significant investment and emerge for some particular reason or set of reasons. Hocevar (2010) identifies some “whys” of collaboration in what she refers to as “forces that drive collaboration”. She groups them into five organisational domains of purpose, structure, lateral mechanisms incentives, and people practices, as seen in Table 2. Several of the “why’s” of collaboration outlined by Hocevar may also serve as indicators of the effectiveness or impact of collaborations or collaborative efforts.

Table 2. Driving Forces for Collaboration

Organisational Domain	Driving Force
Purpose	<ul style="list-style-type: none"> • Felt “need” to collaborate • Common goal • Willingness to address other agency’s interests or cross-agency goals
Structure	<ul style="list-style-type: none"> • Formalised structure for co-ordination (e.g. liaison roles) • Formalised processes (e.g. meetings, deadlines, agendas) • Sufficient authority of participants • Role clarity • Dedicated assets
Lateral Mechanisms	<ul style="list-style-type: none"> • Social capital • Effective communication and information exchange • Technical interoperability • Combined training
Incentives	<ul style="list-style-type: none"> • Collaboration as a funding pre-requisite
People Practices	<ul style="list-style-type: none"> • Respect for other parties (e.g. interests, expertise) • Perseverance and Commitment

(adapted from Hocevar, 2010)

While the rationale and effectiveness of collaborative endeavours speak to their value, sustained capacity for collaboration is typically required to effect long-lasting cultural change and to achieve complex and sector-wide goals. As such, evidence of an ability to engage in collaboration on an ongoing basis also serves as an indicator of collective effectiveness and has been termed ‘collaborative capacity’.

3.1.2. Collaborative Capacity

Collaborative capacity has been described as “the ability of organisations to enter into, develop, and sustain inter-organisational systems in pursuit of collective outcomes” (Hocevar, 2010 from Hocevar, Thomas & Jansen, 2006). To that point, Bardach (1998) highlights “potential to engage in collaborative activities”, rather than simple activities in and of themselves, as a distinctive characteristic of collaborative capacity. Together, it appears that collaborative capacity is not just an ability, but almost an emergent property of organisations to engage in and sustain inter-organisational collaborative activities.

An overview of various sources (Alexander, Weiner, Metzger et al., 2003; Foster-Fishman, Berkowitz, Lounsbury et al., 2001; Head, Brown, Connors, 2008; Himmelmen, 2001; Head, Brown, Connors, 2008) surfaces key features that appear to be requirements for, or emerge as the result of, collaborative capacity. These include:

- Skills, capacity, trust
- Persistence and hard work
- Strong political support
- Shared ‘turf’
- Consensus on long-term goals (shared Vision) and objectives while managing diversity of network participants
- Political leadership
- Local capacity building
- Learning orientation
- Clear governance model
- Skills in ‘translation’ across stakeholder groups
- Leadership within group (bridging and mobilising skills)

These features might best be characterised as process attributes and structural attributes. This is highlighted by Gazley (2010) who identifies structure and relation as predictive of collaborative performance and as key to building collaborative capacity. From a structural perspective, collaborations are not dependent on contractual or formal agreements but driven instead by the problem at hand. Control is not necessarily a function of a contract but dependent upon other factors such as funding and leadership. Size of the partnership network is also a factor. Larger partnerships often bring political or financial power, but they can be difficult to manage whereas smaller partnerships may be more nimble. Relational characteristics also are critical to partnerships according to Gazley. The degree of trust, group pressures, previous experience, length of relationships, and professional background factors, influence the performance of the collaboration (Gazley, 2010).

Foster-Fishman, Berkowitz, Lounsbury et al., (2001) expand on and organise the critical elements of collaborative capacity into member, relational, organisational and programmatic capacities (Table 3).

Table 3. Critical Elements in Collaborative Capacity

Grouping	Capacity
Member	<ul style="list-style-type: none"> • Core Skills and Abilities <ul style="list-style-type: none"> ○ Ability to work collaboratively with others ○ Ability to create and build effective programs ○ Ability to build an effective coalition infrastructure

Grouping	Capacity
	<ul style="list-style-type: none"> • Core Attitudes Motivation <ul style="list-style-type: none"> ○ Holds positive attitudes about collaboration ○ Committed to collaboration as an idea ○ Holds positive attitudes about other stakeholders ○ Holds positive attitudes about self • Access to Member Capacity <ul style="list-style-type: none"> ○ Coalition supports member involvement ○ Builds member capacity
Relational	<ul style="list-style-type: none"> • Develops a positive working climate • Develops a shared vision • Promotes power sharing • Develops positive external relationships
Organisational	<ul style="list-style-type: none"> • Effective leadership • Formalised procedures • Effective communication • Sufficient resources • Continuous improvement orientation
Programmatic	<ul style="list-style-type: none"> • Clear, focused programmatic objectives • Realistic goals (including intermediate goals) • Unique and innovative • Ecologically valid program

(adapted from Foster-Fishman, Berkowitz, Lounsbury et al., 2001)

In addition to the elements that go into creating collaborative capacity, Alexander, Weiner, Metzger et al., (2003) flag five approaches or operational frames that include: 1) outcomes-based advocacy, 2) vision-focus balance; 3) systems orientation; 4) infrastructure development; and 5) community linkages. Outcomes-based advocacy involves highlighting the achievements of the collective while simultaneously recognising the unique contributions and achievements of partner members. This most likely fosters ongoing engagement of partners through a sense of value from other members and external stakeholders. A vision-focus balance generates both a long-term vision for the partnership, balanced against immediate operational steps to move towards the vision. Systems orientation, according to Alexander et al. (2003) occurs when a collaborative is able to frame issues from a cross-sector lens, involving many different stakeholders both inside and outside of a particular community. Infrastructure development refers to the development of internal systems that support effective participation of members (e.g. systems that reduce burden on participants such as streamlined reporting). The last frame 'community linkages' refers to the development of strong relationships to encourage community ranging from the provision of input or feedback to improve the functioning of the collaboration to ensure external political support and/or ongoing funding. The ultimate value and sustainability of collaboration (i.e. collaborative capacity) however, is moderated by four key contextual dimensions (i.e. historical/cultural, physical, political and economic) according to Alexander et al. (2003).

3.1.3. Collaborative Networks

In the discussion of collaboration and collaborative capacity, a distinction is drawn by, Gazley (2010) between *collaborative partnerships* and *networks*. While broadly consistent with Himmelman (2001), Gazley seems to suggest that collaboration is the facilitation and operation of "multi-organisational arrangements to solve problems requiring a joint effort" and may emerge from a strategic response to increase resources (e.g. financial, material, or human) or improve efficiency whereas networks serve as the infrastructure to support collaborative

partnerships. Networks that foster collaboration include interdependence, trust, shared norms, balance of power and shared resources and a degree of centralisation within the network. These constructs of trust, power balance, facilitation, co-ordination and interdependence are echoed by Alter and Hage (1993), Larson (1992), Liebeskind et al. (1996). These characteristics are not dissimilar to those ascribed to successful collective impact initiatives by Kania and Kramer (2013) discussed below.

Lai (2012) also makes the distinction by assuming a network approach to collaborative capacity describing it not as an ability or characteristic but rather as a process whereby *“multi-organisational arrangements are entered into to solve problems that are difficult to solve”* by an individual organisation (Agranoff & McGuire, 2003). Lai identifies five key attributes from network theory that can assist in understanding collaborative capacity. These include interdependence, membership, combined resources, information and learning. Organisations within a collaborative network are highly interdependent with relations that are open-ended and implicit reflecting Gazley’s (2010) reference to lack of control or contractual obligation. There is an inclusive and exclusive nature to networks where membership is determined in relation to common goals versus a specific attribute or attributes of organisations themselves. Further, each organisation is not “weighted” equally in ability to collaborate, with each collaborating to its own degree. This may be similar to what Lu (2011) referred to as participation patterns. Another attribute of networks that may apply to collaborative capacity is that of combined resources. Collaborative advantage is maximised when both hard (e.g. funding, space, technology) and soft resources (e.g. staff) are shared. This also applies to information. Formal and informal communication pathways and mechanisms that facilitate storage, retrieval, exchange and dissemination of information foster collaborative capacity. Finally, Lai identifies learning as an important network attribute of collaborative capacity whereby organisations collectively identify and embed practices to improve or achieve outcomes.

At the practical level, Head (2008) believes that the quality and coherence of network processes are largely measurable through the perceptions of participants (and may change over time) (Head 2008) and that *“Evaluation of performance for collaborative networks will require multi-layered approaches, including systematic information on stakeholder perceptions about the extent of progress, impediments to achieving objectives and actual progress in achieving desired outcomes”*.

While collaborative capacity and networks emphasise the role of interdependency, sharing, and power balance, leadership and centralisation are identified as potential influencing factors (Foster-Fishman et al., 2001; Gazley, 2010; Head 2008). However, the literature is sparse on this issue. Gazley (2010) noted no significant correlations between central co-ordination and collaborative outcomes but also identifies the characteristics of the manager as important with respect to relational aspects of collaborations, if not outcome. Weber and Kahandemain (2008) also note the role of a “Collaborative Capacity Builder”. This individual is one that has been *“accorded a lead role in a network’s problem-solving, due their authority, value or expertise”* (p. 340). Provan and Kenis (2008) highlight the role of a lead organisation that serves as a convenor or secretariat as a critical element in collaborative capacity. Hocevar (2010) also refers to the role of a formalised, co-ordinating structure. In essence, these features seem to constitute what Kania and Kramer (2013, 2011), discussed below, refer to as “backbone support”, one of five critical elements in Collective Impact.

With respect to measuring the success of “backbone support”, (Turner, Errecart et al. 2013) describe the following:

- **Leveraged funding** – Ability to catalyse, pool or redirect funding in support of the initiative’s common agenda. But can be difficult to quantify and calculate.

- **Indicators of initiative progress** – Initiative level early indicators (could be more output/process measures – e.g. number of orgs engaged, knowledge exchange sessions facilitated)
- **Evidence of systems change** – Change in stakeholder attitudes/stories/decisions/behaviours.
- **Stakeholder perceptions of backbone value** – e.g. what would be the impact if the backbone was lost? I.e. Which specific contributions are perceived to have the greatest value?:
 - Cultivating a culture of collaboration
 - Building momentum and accountability
 - Promoting a data-driven approach
 - Facilitating creation of a collective voice to affect policy and funding.

Such measures of success may be directly applicable to the QMHC, albeit to differing degrees depending on the initiative in question and the role played by the QMHC.

3.1.4. Collective Impact

Collective Impact has been defined as multi-sectoral partners working towards solving a particular social problem (Boyce, 2013). It is a balance between the unique contributions of each partner, the co-ordination of activities that create a synergy of mutual reinforcement while maintaining a differentiation that allows for an innovative approach to the issue at hand. (Head 2008) articulates that *“multi-sectoral collaborations are generally seen as useful because they may bring together a wide range of expertise, knowledge and resources that enables new thinking about complex issues”* (p. 734). Kania and Kramer (2011) expand the definition of collective impact by adding a dimension of activation. They define collective impact as the *“commitment of a group of important actors from different sectors to a common agenda for solving a specific social problem”* (p. 36). It is this identification of activation as a key ingredient that generates an entirely new process with results that are emergent. Collaboration and collaborative capacity and networks lead to collaborative impact.

The major challenge with collective impact, according to Kania and Kramer (2013), is one of expectation. Individuals and groups engaging in a process of collective impact face the typical challenges of collaboration (e.g. lack of trust, competitiveness, and political agendas). However, the primary challenge is a focus on solutions that are typically found in more isolated efforts or programs. Kania and Kramer suggest that this view is effective when technical expertise is required and the outcomes are known. In other words, predetermined solutions are appropriate when the dimensions of the problem, requirements and outcomes are known (e.g. exposure is an effective method for reducing levels of anxiety). This has been the typical approach in the non-profit world - the search for effective, isolated interventions that can be replicated or expanded (Kania & Kramer, 2011). There is insufficient evidence that this is an effective approach to social issues. In fact the evidence, suggests quite the opposite.

Collective impact, on the other hand, is an entirely different proposition. Kania and Kramer (2012) point out that social issues are in fact complex and predetermined solutions are unlikely to succeed. Rather, multiple partners, examining a problem from a united frame with unique perspectives, searching for resources and innovative approaches, using continuous feedback, leads to emergent solutions. Emergent opportunities of collective impact include: 1) previously unnoticed evidence is identified and applied; 2) individuals and organisations begin to work in new and innovative ways, and 3) existing activities or strategies that are effective are applied more widely. This is the premise behind Wikinomics (Tapscott & Williams, 2008). Innovation,

value creation and new products and services emerge “when masses of people and firms collaborate openly to drive innovation and growth in their industries” (Tapscott & Williams, 2008 p. 11). Traditional collaborations may yield limited results. Types of traditional collaborations include: 1) funder collaboratives; 2) public-private partnerships; 3) multi-stakeholder initiative; and 4) social sector networks. For the most part, these forms of collaborations tend to be more discrete in their focus and lack a common measurement approach (Kania & Kramer, 2011). Also, they may tend to ignore or be impacted differentially by participation patterns; a construct that differs from individual participation by highlighting the collective and interactive nature of participation (Lu, 2011). According to Lu (2011), effective participation patterns that include stakeholders at various systems levels (e.g. citizens, professionals, government), with shared responsibilities and specific purposes, may be more effective. Unlike traditional collaborations, impact initiatives tend to have five common characteristics:

- **Common agenda:** common understanding of the problem, shared vision for change, joint approach
- **Shared measurement:** consistent measurement and data collection to ensure fidelity and ensure accountability
- **Mutually reinforcing activities:** synergistic but differentiated activities working in a co-ordinated manner
- **Continuous communication:** ongoing, open communication between partners that fosters trust, ensures fidelity to the vision and approach and fosters motivation
- **Backbone support:** specialised support staff with specific skills to facilitate and co-ordinate the initiative

(Kania & Kramer, 2011, 2013; Turner, Errecart, & Bhatt, 2013).

What is apparent from all five aspects of collective impact initiatives is that collaboration is a fundamental driver for each aspect and may explain the synergistic and emergent nature of collect impact. Collaboration is woven into every level of the process. Understanding collaboration, collaborative capacity and collaborative networks then is important for understanding the essence of collective impact.

3.1.5. Collaboration + Collaborative Capacity + Collaborative Networks = Collective Impact

The collective story of collaboration, collaborative capacity, collaborative networks and collective impact appears to be one of accumulation or contribution. *Collaboration* emphasises the sharing of risks, resources and rewards towards a common purpose (sharing). *Collaborative capacity* adds to this by identifying the importance of collaborative activities, structures, relationships, and sustainability (structure and action) to achieve common outcomes. Finally, *collaborative networks* emphasise interdependence, sharing of norms, power balance, and facilitation and co-ordination. Together, sharing, structure, action and relationships lead to *collective impact*, and innovation for complex problems.

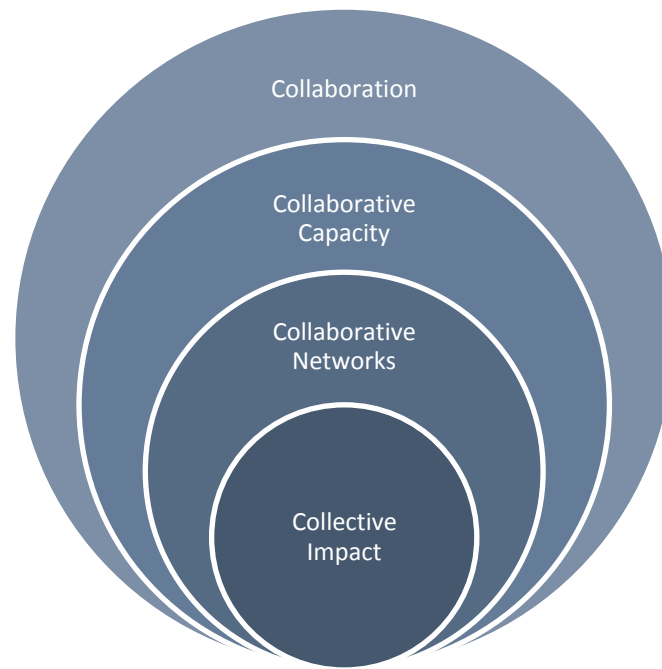


Figure 2. Integrating collaboration, collaborative capacity, collaborative networks and collective impact.

3.2. Evaluating Complexity

As noted in the Invitation to Offer, special purpose policy units such as QMHC have been put in place over the last two decades as a “structural response to interrelated and complex issues”. Because these units are approaching complex and multi-layered issues, evaluating the effect of these types of interventions must assume an approach that accounts for the interrelatedness, complexity and collective effort at play. While there are various competing and complementary rationales for conducting evaluations, there is, at the heart of all evaluations, an underlying assumption that a particular set of intervention activities (i.e. practices, program, policies) and associated inputs will lead to particular outcomes. The challenge of evaluating the effects of endeavours such as the QMHC is that there are, in essence, intersecting interventions occurring at multiple levels - a “network of interventions” with “synergies across multiple activities” (Sridharan & Nakaima, 2012 p., 383).

As such, traditional evaluation approaches that focus on linear linkages between inputs, activities, outputs and outcomes will not answer the question posed – *What is the contribution of the QMHC to the combined effort to making a difference to the mental health and wellbeing of Queenslanders?* Indeed, an *Attribution* approach (i.e. attempting to determine the causal linkage and the degree to which the outcome is the result of the intervention) is not only not possible, it is neither practical nor appropriate and would, most likely, lead to inaccurate information and resulting conclusions.

According to Mayne (2012, 2001), the goal in evaluating these types of interventions ultimately is to increase knowledge and understanding and to “*reduce our uncertainty about the contribution of the program*” (p. 6). A *Contribution* approach does not ask about the causality and amount of impact but rather asks about the degree of influence that an intervention has had on a result and the manner of the influence (Mayne, 2012; Mayne, 2001; Quinn Patton, 2012; Sridharan & Nakaima, 2012). As Lemire (2010) suggests it is the understanding of the “relative” rather than “specific” contribution of a program. This type of approach is of value and needed in understanding complexity of an intervention that acts at many levels with many related initiatives and is the strength of *Contribution Analysis* (CA). In addition to the

methodology of CA, it will be important also to consider magnitude of contribution, contribution to different levels of the system and associated stakeholders, stages at which contribution emerge, and specific mechanisms and indicators.

3.2.1. Contribution Analysis

Quinn Patton (2012) describes CA as an approach that is “context-sensitive” and suited for conditions of complexity, where programs/interventions may not only be operating simultaneously but overlapping and working in collaboration. Specifically, Quinn Patton suggests that CA is particularly well suited to situations where “multiple projects and partners working towards the same outcomes” and where impacts may be seen over a long period of time as the results of “cumulative outputs and outcomes” (p. 367). Here outcomes refer to “observed outcomes” – those that are intended as well as those that are unintended – and the activities that most likely have contributed to both sets of outcomes.

According to Mayne (2001, 2004), at an overarching level, a CA that indicates that an intervention had indeed had an impact would include the following components:

- description of the program and the context in which the program was placed
- provision of “plausible program theory” - the rationale and evidence for the intervention
- description of the activities and outputs of the intervention
- articulation of the association between the activities and outputs and observed outcomes, and
- elimination or reduction of the influence of alternative explanations.

As seen from this high-level description, CA is a form of a theory-based approach to evaluation. Mayne refers to this, as well as other theory-based approaches to evaluation as a “*logic of enquiry for explaining interventions*” (p. 270). The theory of change (ToC) should be developed by initial policy intentions, various stakeholder groups and various sources of evidence, according to Mayne. However, unlike other theory-based approaches, CA outlines a systematic methodology thereby offering a stronger contribution story. Essential to CA is the importance of rigorous thinking versus rigorous methodology (Quinn Patton, 2012). This is by no means to suggest that strong methodology is not important but what is required in CA, as outlined above, is the importance of primary intended users, key stakeholders, multiple data sources, critical analysis of data, mixed-methods, and triangulation of evidence.

The steps outlined in CA (Mayne, 2004, 2012) include: 1) Setting out the cause and effect issue; 2) Developing a plausible ToC; 3) Gathering evidence; 4) Assembling and assessing the contribution story; 5) Seeking additional evidence; and 6) Revising the contribution story (Mayne, 2012). Sridharan and Nakaima (2012) provide including developing a timeline and trajectory of impact, clarifying and prioritising linkages, including unintended outcomes and clarifying sub-theories contributing to overall ToC.

Various tools have been developed to capture data related to CA. Delahais and Toulemonde (2012), recommend an Evidence Analysis database to assist in building a ToC and contribution story (stages 2 through 6). Each proposed outcome is described or rated using a series of attributes including:

- specific data point (e.g. # MH staff taking part in specific training for an evidence-based practice within a particular region)
- source or origin of data point (e.g. training database)
- type of source (i.e. primary or secondary) (e.g. number of attendees)

- causal link (e.g. # of trainees pass competency tests)
- support for logic model (i.e. confirm or refute) (e.g. confirm)
- type of mechanism (e.g. intended contribution)
- strength of evidence (e.g. very strong)

Lemire, Nielsen, and Dybdal (2012) suggest a similar approach that they refer to as the Relevant Explanation Finder for assessing or accounting for alternative explanations or influencing factors. This would be useful at stages 3 to 5 of CA. These include:

- mechanism (i.e. connector between program activities and program outcomes)
- type of explanation (i.e. primary, rival, co-mingled rival, implementation rival)
- contextual levels (i.e. individual, interpersonal, institutional, structural)
- degree of influence (i.e. high, moderate, low, none)
 - certainty (i.e. degree of match between prediction and outcome)
 - robustness (i.e. identification across a range of data sources)
 - range (i.e. range of outcomes to which the mechanism contributes)
 - prevalence (i.e. range of sites or types of interventions to which the mechanism applies)
 - theoretical grounding (i.e. is there a theory underlying mechanism)

What Lemire et al. (2012) raise in their discussion regarding the degree of influence for alternative explanations, can equally apply to the degree to which mechanisms or initiatives themselves contribute to particular outcomes or impacts.

3.2.2. Degree of Contribution

The impact of policy decisions and activities has been investigated extensively with respect to the impact of human activities on the environment. Environmental Impact Assessments (EIA) analyse and evaluate the impact of human activity on the environment and serve in the planning and managing of the environment (Toro et al., 2013). While often applied to environmental issues, the methodology utilised within EIA might be usefully applied within a frame of contribution analysis. Toro et al., (2013) recommend the use of Total Impact Importance (TII) along with a methodology for quantifying TII. This expands the concept of collective impact to include an assessment of magnitude.

According to Toro et al., (2013) TII is equivalent to the Importance of a Project (ImpPro), the Importance of the Activities (ImpAct) and the Importance of the Vulnerability (ImpVul). Using a qualitative methodology, ImpPro is the aggregate of factors such as intensity, time between start of action and impact, accumulation of impact, extension of impact, permanence of impact and synergy of multiple impacts.

ImpAct is the potential positive or negative impacts generated by human action that affects the physical or socioeconomic environment. Finally, vulnerability (ImpVul) is the degree to which the environment can respond to the impact. For purposes of this activity, this could be considered "Readiness" of the environment to respond to a policy. These may be useful concepts to apply to a ToC when weighting various contributing factors or considering the impact of the Commission including importance of the Commission, the impacts generated by the Commission and the degree to which the system can respond to the impacts.

3.2.3. Influencing Factors

Lemire et al., (2012) and Wimbush, Montague and Mulherin (2012) highlight the importance of a specific contributing factor to CA, that of implementation. In addition to a ToC, Wimbush et al., (2012) argue for the need for Implementation Theory (IT). IT is described as how the intervention is expected to “activate” the ToC. According to the National Implementation Research Network (NIRN, 2014) implementation is a “*specified set of activities designed to put into practice an activity or program of known dimensions*”. Implementation processes are “purposeful” and described in detail such that an independent observer can “*detect the presence and strength of specific activities related to implementation*” (NIRN, 2014).

Fixsen, Naoom, Blase, Friedman, and Wallace (2005) identify “Implementation Drivers” as the “engine” behind implementation. Drivers are the key ingredients that permit the consistent use of interventions and reliable outcomes, according to Fixsen et al., (2005) (Figure 3).

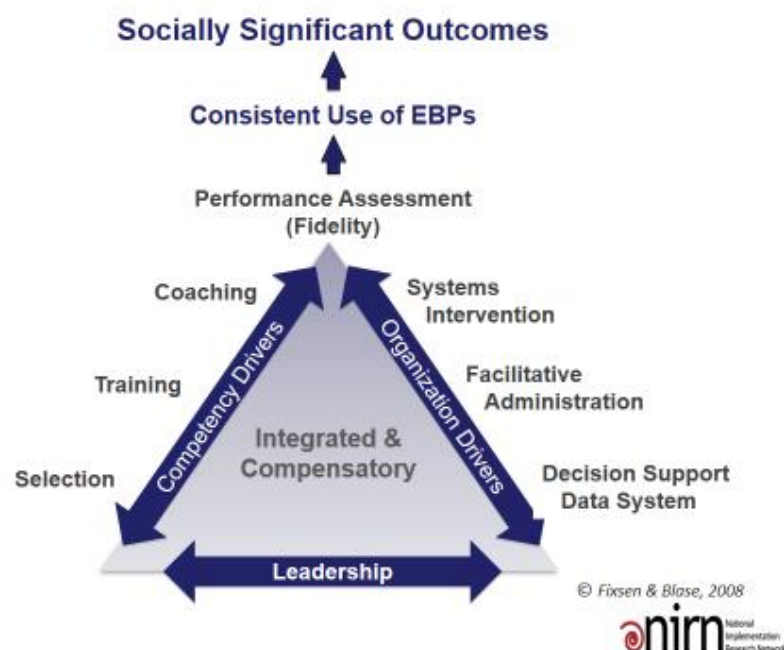


Figure 3. Implementation Drivers (NIRN, 2014)

Implementation drivers are grouped into three main constellations: competency, organisation, leadership. Competency drivers are the “people factor”. These drivers include staff selection, training and coaching to ensure the requisite skills and support are in place to ensure interventions are practiced with fidelity. Organisation drivers, systems interventions, facilitative administration, and decision support data system, are the “structural factor”. They address the local and larger political environments, procedural, funding and cultural issues and data systems. The final group of drivers relates to leadership and are the “directional factor”. According to NIRN (2014), good leadership involves both good management of issues (technical) and guidance through complexity and change (adaptive). Many of the factors that have been identified as being critical to collaboration, collaborative capacity and networks and collective impact can be categorised into the NIRN drivers.

It also is important to note that interventions are chosen and implemented over a period of time and have a developmental cycle. There are specific, non-linear stages identified in implementation. The first stage is Exploration. This is the stage when useful, empirically-

supported interventions are explored, goodness-of-fit with current context is assessed, and an intervention is adopted. The next stage is termed the Installation stage. While the previously described drivers are important at all stages, it is here where planning for the implementation of the new intervention involves care examination and consideration of the drivers. Initial Implementation follows. This stage involves the execution of the implementation plan developed during Installation. This is when the intervention “hits the ground” and modifications and plans for sustainability are developed. Full Implementation is reached when the intervention is being delivered to fidelity and being maintained and monitored (Fixsen et al., 2008; NIRN, 2014). It is important to note that the process of implementation can take 2 to 4 years. Leach, Pelkey and Sabatier (2002) and Alexander et al., (2003) suggest that it may take 3 to 5 years to produce direct benefits “for citizens”. Implementation drivers and stages will be critical in the development of the ToC, including the timeline of impacts, and contribution analysis of the impacts of the Commission.

3.2.4. Levels of Contribution

Consideration of implementation elements (i.e. stages and drivers) will be an important addition to CA when examining the various factors and mechanisms and alternative influence in the ToC and story. Equally important when examining the impact of an initiative is the consideration of level of contribution. Provan and Milward (2002) suggest that network effectiveness can be evaluated at the level of the community, network and organisational participants. They also identify three types of constituents that should be considered in evaluation: 1) Principals: those who monitor or fund the network and its activities; 2) Agents: those who work as administrators/service providers; and 3) Clients: those who receive services from the network.

Cunning, Muir, Golden, and Rounthwaite (2012) report on the use of an evaluation framework tool that is influenced by Bronfenbrenner’s (2005) ecological model of human development. The framework is designed to assist in conceptualising, planning, implementing and monitoring evaluations by articulating programme objectives at the levels of the client/family, staff, intervention and community and linking those objectives to theory, evidence and specific process and outcome factors. In terms of networks, examples of process factors may include network growth or service co-ordination whereas outcomes might include cost effectiveness or improved client function (Head, Brown, & Connors, 2008).

3.2.5. Measures of Contribution: Mechanisms and Metrics

The review of the research on collaboration, collaborative capacity and networks and collective impact highlight two key areas that must be considered in developing a ToC and an effective evaluation framework. One important consideration is key mechanisms that will serve as facilitating or alternative influences in a CA approach. Level of contribution includes individual organisations (or partner members), the collaborative itself, the larger community, and state or territory. These mechanisms include:

Organisation:

- Desire to collaborate
- Common goals
- Desire to support other organisations
- Perseverance and commitment
- Positive attitudes about partners
- Positive attitudes about self

- Ability to contribute

Collaborative:

- Formalised co-ordinating structure
- Interdependence
- Formalised processes
- Authority of participants
- Technical interoperability
- Shared training and resources
- Sufficient recourse
- Shared power
- Leadership
- Shared norms including orientation to continuous improvement
- Shared data collection and measurement
- Ecological validity

Community:

- Historical factors
- Economic factors
- Political factors
- Geographical factors

State:

- Funding pre-requisite

Alexander et al., (2003), Foster-Fishman et al., (2001), Gazley, (2010), Hocevar (2010), Kania & Kramer (2011, 2013), Lai (2012, Larson (1992), Turner et al., (2013)

In the same line, a second aspect to be considered is the process and outcome factors that have been articulated in the literature that will serve as potential indicators in an evaluation. Process factors are those that describe what and how well something is done, whereas outcomes factors describe impact or change. A synthesis of the factors that surfaced in the literature review includes:

Client/Public:

- Increased awareness
- Increased support
- Increased satisfaction with services
- Improved mental health and wellbeing

Professionals:

- Increased skills/expertise/knowledge
- Improved attitudes

Organisation:

- Improved effectiveness of programs
- Improved quality of programs
- Enhanced service delivery
- Increased funding

Collaborative:

- Role clarity
- Ability to work collaboratively
- Respect for partners
- Development of shared vision
- Positive working climate
- Reduced competition
- Effective communication

Community:

- Positive working relationships
- Enhanced service co-ordination
- Effective infrastructure
- Cost effective use of resources
- Increased funding

State:

- Enhanced service system
- Increased social capital
- Cost effective use of resources

Alexander et al., (2003), Foster-Fishman et al., (2001), Gazley, (2010), Head (2008), Hocevar (2010), Kania & Kramer (2011, 2013), Lai (2012), Larson (1992), Turner et al., (2013)

All of these mechanisms and process/outcome factors will need to be explored and weighed when building a theory of change, evaluation framework, and ultimately the contribution story of the QMHC.

4. Discussion/Conclusion

The mental health needs and wellbeing of Queenslanders cannot be met by individual organisations or streams of service. This issue is not simple, nor is the required response. Multi-organisational, multi-pronged (i.e. the key functions of the QMHC) and multi-level (e.g. government, private, public, service sectors) collaborations are required to arrive at the collective impact of improved mental health and wellbeing. The whole is not only greater than the sum of the parts, but is in fact an emergent property of the parts and process.

The literature suggests that to achieve such collective impact requires collaboration (sharing resources and benefits for a common purpose), collaborative capacity (structure and action)

and networks (interdependence and co-ordination). These will be the mechanisms that will support the QMHC in achieving its mandate.

Because of the complex and emergent nature of collaborations, collaborative capacity, and collective impact, an evaluation approach that can account for this complexity is therefore required.

The literature review uncovered a number of specific indicators that may be useful in assessing particular aspects of the QMHC's performance and success. Furthermore, at a 'whole of evaluation' level, contribution analysis appears to be an appropriate overarching framework to apply to improve our understanding of the contribution of the QMHC to facilitating collaboration, collaborative capacity, and collective impact as key mechanisms to achieve the common goal of improved mental health and wellbeing of Queenslanders.

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