

COLLABORATION BUILDERS

Non-Expert English

Equality-Based Collegial Interaction

Joining

Shared Expertise

Multiple Stakeholders

Shared/Mutual Goals

Role Sharing/Flexibility

Boundary-Spanning Perspective

Accommodation/Compromise

Win-Win Outcome

COLLABORATION DIVIDERS

Jargon

Author/Rank Interaction

One-Up-(Wo)Manship

Professional, Specialized Expertise

My Case/My Client

My/My Agency's Goals

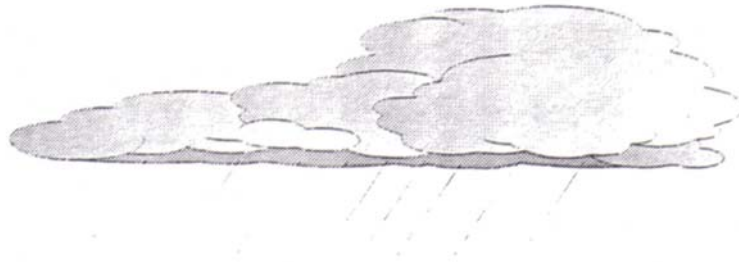
Prescribed/"Right" Roles

Turf/Protection Issues

Competition

Win-Lose Outcome

Interdisciplinary Collaboration Challenges



Jargon

**Discipline-Centric Approaches
to Training and Service
Provision**

**Structural and
Institutional Barriers**

**Ethnographic
Approach**

**Differing
Philosophies**

Differing Values

STRATEGIES TO IMPROVE INTER-DISCIPLINARY COLLABORATION

- Community fellowship program with non-traditional placements and community project.
- Cross-fertilize agency field instructors.
- Cross-fertilize university faculty.
- University faculty, agency staff, and community residents work together to develop competencies and training modules.
- New course on inter-disciplinary collaboration offered to students in ALL university departments.

Inter-Agency Collaboration Challenges



**Shared Mission
and Scope of Vision**

**Decision
Making**

**Control and
Turf Issues**

Time Issues

**Risk and
Resource Sharing**

**Personality
Conflicts**

**Confidentiality
Issues**

Unfunded Mandates

Roles/Responsibilities

STRATEGIES TO IMPROVE INTER-AGENCY COLLABORATION

- Outside facilitator.
- Meet regularly, record, and distribute minutes.
- Newsletter sent to all stakeholders: agency, community, and university.
- Establish respect for collaboration-forming process.
- Foster responsibility for change.
- Foster multi-level approach to collaboration.
- Needs assessment and training must be integrated with service delivery.
- Develop case conference structure for consultation and referrals across agencies and components.
- Training on case management skills using an empowerment and strengths perspective.

Community Collaboration Challenges



**Recognizing Residents'
Skills and Expertise**

Recruitment

Time Issues

**Cultural Tensions
and Prejudices**

**Agencies
Have Failed**

**Fear of
Retribution**

**Reluctance to
Participate**

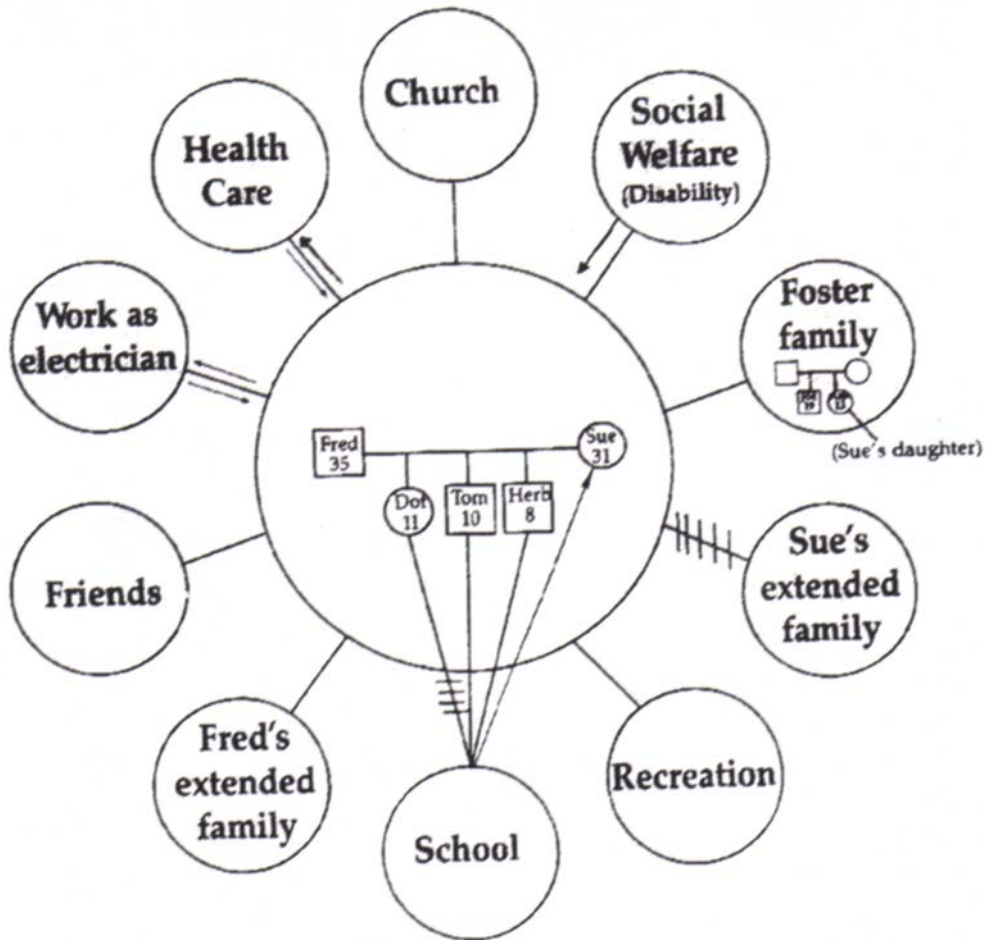
Language Barriers

Child Care

STRATEGIES TO IMPROVE COMMUNITY COLLABORATION

- Study circles.
- Door-to-door recruitment.
- Meet residents where they are.
- Multiple involvement opportunities.
- Transportation, child care, and translation.
- Training related to community residents' concerns.

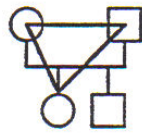
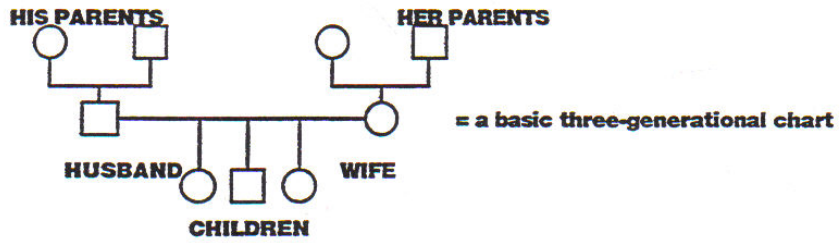
Model of an ECOMAP



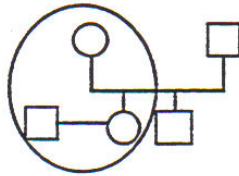
(Models borrowed from Spradley and Allender, 1996)

Model design based on work by Wright, L. & Leahey, M. (1994). *Nurses and families: A guide to family assessment and intervention* [2nd ed.]. Philadelphia, PA: F.A. Davis Co., p. 57.

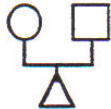
GENOGRAM: AN EXAMPLE



= a triangle identifies a relationship in which a third person is brought into a dysfunctional relationship between a pair in order to reduce the anxiety or to stabilize that dyadic relationship



= a line around a combination of members points out that these members are in alliance or collusion



= child in utero

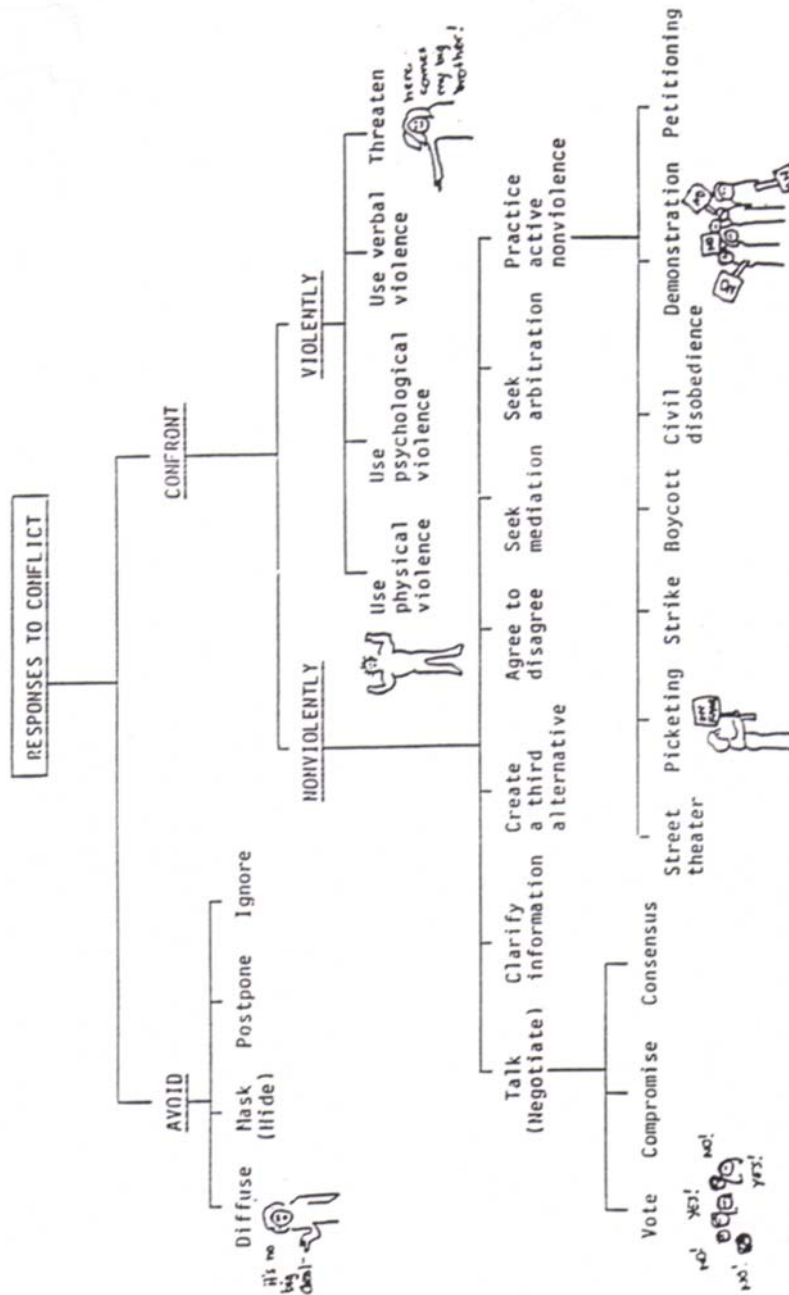


= abortion or stillbirth

d. 1972

= died in 1972

Models borrowed from: Sherman, Robert and Norman Fredman, (1986), Handbook of Structured Techniques in Marriage & Family Therapy, New York: Brunner/Mazel Publishers, p. 85.



OPERATING ASSUMPTIONS FOR APPROACHING CONFLICT

1. All needs are legitimate.
2. There are enough resources to meet all the needs.
3. Within every individual lies untapped power and capacity.
4. Process is as important as content.
5. Improving situations is different from solving problems.
6. Everyone is right from his or her own perspective.
7. Solutions and resolutions are temporary states of balance.

From:

Gerstein, A., & Reagan, J. (1986). *Win-win: Approaches to conflict resolution*. Salt Lake City, UT: Peregrine Smith Books.

BELIEFS THAT LEAD TO IMPASSES

1. "It is impossible to solve anything. Life and its difficulties are too complex and beyond the capacity of humankind to deal with."
2. "I feel helpless so let's argue."
3. "This is my territory/property. I own this."
4. "Stand fast, don't give up."
5. "Things don't work out."
6. "You can't expect too much."
7. "Someone has to suffer. "
8. "There are a lot of things that are none of your/my business."
9. "Don't ask dumb questions."
10. "There is not enough time."
11. "This can't make a difference."
12. "This is just the way it is."
13. "You just can't get anywhere with certain people."
14. "Man is basically flawed."
15. "You have to compromise."
16. "There will always be winners and losers."
17. "You can't really trust anyone."

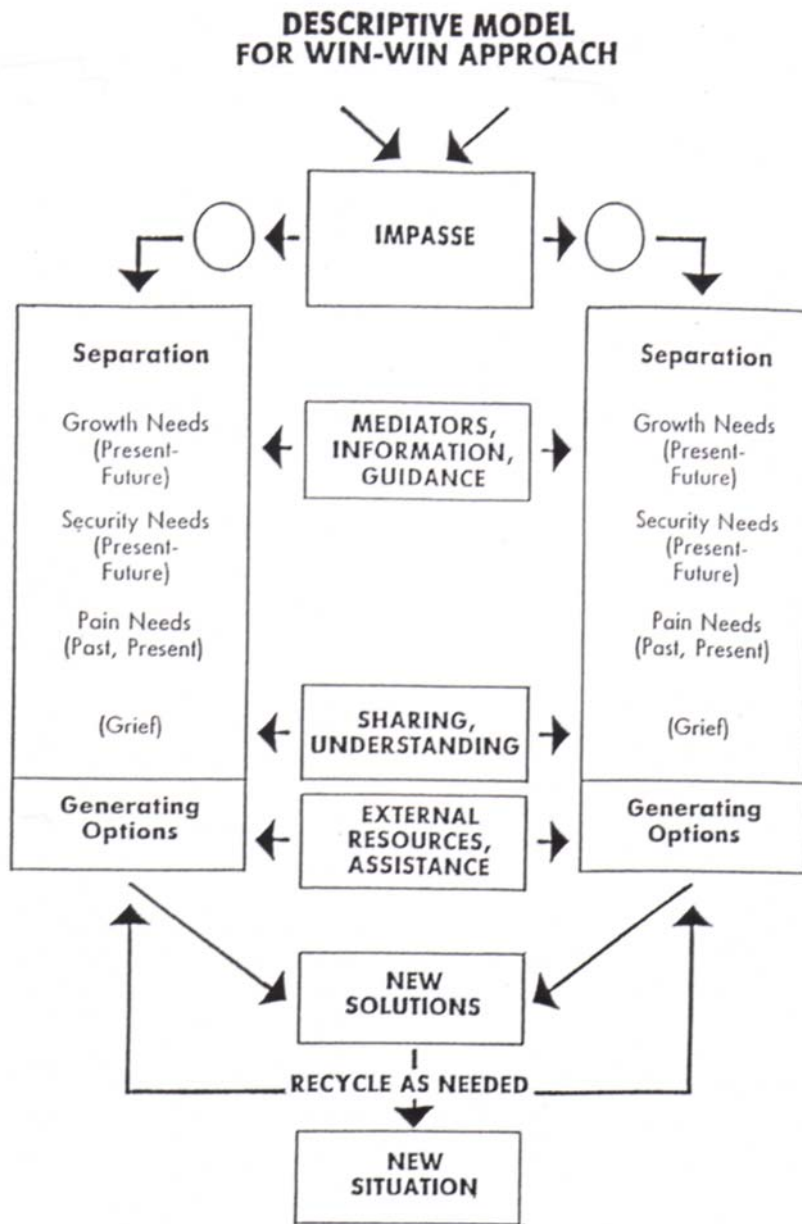
From: Gerstein, A., & Reagan, J. (1986). *Win-win: Approaches to conflict resolution*. Salt Lake City, UT: Peregrine Smith Books.

Black, J. (1998). *Interagency child welfare practice: Collaboration in service of children and families*. Berkeley: University of California at Berkeley, California Social Work Education Center.

BELIEFS THAT LEAD TO WIN-WIN RESOLUTIONS

1. "It is possible to solve problems. Life and its complexities are well within the capacity of humankind to deal with."
2. "I am powerful and adaptive and do not need to argue."
3. "This is our territory, our planet."
4. "Navigate and be willing to let go."
5. "Many things do work."
6. "Expect a lot of self and others."
7. "Much of human suffering can be eliminated and avoided."
8. "Everything is our business."
9. "There are no dumb questions."
10. "There is plenty of time. People only act in the present and it is always only NOW."
11. "It is impossible not to make a difference."
12. "This is just one of the ways it is."
13. "You can get somewhere with anyone."
14. "Humankind is basically endowed with all the equipment to survive and adapt in this world."
15. "Compromise is only one option among many for resolving conflict."
16. "It is possible for everyone to win."
17. "It is possible to learn to trust ourselves and others."

From: Gerstein, A., & Reagan, J. (1986). *Win-win: Approaches to conflict resolution*. Salt Lake City, UT: Peregrine Smith Books.



from Gerstein, Arnold and James Reagan, Win-Win: Approaches to Conflict Resolution (Salt Lake City, UT: Peregrine Smith Books, 1986).

COMPONENTS FOR EFFECTIVE CONFRONTATION

STEP I

"When..."

Describe the behavior that is causing the problem.
Describe the behavior objectively, using concrete terms.
Describe a specified time, place, and frequency of the actions.
Describe the action, not the "motive".

STEP II

"The effects
are..."

Describe concretely how other's behavior affect your life.
Describe what it is you do in response to other's behavior.
Include short and long term effects for you and the other
person. Think of what the end result is.
Be as specific and clear as possible.

STEP III

"I feel..."

Express your feelings calmly.
State feelings in a positive manner, as relating to a goal to be
achieved.
Direct yourself to the specific offending behavior, not to the whole
person.

STEP IV

"I'd prefer..."

Ask explicitly for change in the other's behavior.
Request a small change, and only 1 or 2 at a time.
Specify concrete actions you want to see stopped, and those you
want to see performed.
Take account of whether the other person can meet your request
without suffering large losses.
Specify (if appropriate) what behavior you are willing to change to
make the agreement.

STEP V

"The consequences
will be..."

Make the consequences explicit.
State how appreciation will be shown if they abide by the
contract.
State the negative consequences (punishment) that will occur if the
behavior continues.

STEP VI

"What's your
reaction..."

Ask what the other person heard - did they understand,
Ask if they have an alternative.
Ask how the other person feels and thinks.

ACTIVE LISTENING²

Listening to Others:

- Listen to content message and feeling message.
- Grasp the story and the feeling.
- The real story may be in the feeling.

Reflection:

- Mirroring what you heard in the "here and now."
- You feel _____ because _____.

Clarification:

- Obtaining more information.
- Summarizing and condensing prior data in one or several brief sentences.

Silence:

- Resist urge to "fill the gap."
- "Silent resistance" vs. "silent reflection."

Initiating:

- Operationalizing goals and problem solving.
- Don't rush the process.

² Allender et al. (1997). *Interprofessional collaboration training project. California State University, Fresno, serving children and families*. Monmouth, OR: Western Oregon State College, Teaching Research Division.

APPENDIX

Framework for Analyzing Community Human Service Systems

FOCUS A: UNDERSTANDING NEED

Task 1: Identify the Target Population

- What target populations are identified within the community, and how are they categorized?
- What target population will be the focus of this assessment?
- What priority is given to the needs of the target population in this community?

Task 2: Define a Continuum of Need

- How can target population needs be conceptualized so that a determination can be made about the extent to which they are (or are not) being met?

Task 3: Assess Target Population Needs

- What are feasible and appropriate ways in which to find out how many people are in need in each of the areas identified as relevant to this target population?

Task 4: Identify Collective Community Needs

- Are there needs in this community that require something other than a human service response?
- What data supports the existence of these needs?
- How are these needs expressed by the people of this community?

FOCUS B: IDENTIFYING AUSPICE OR SPONSORING ORGANIZATIONS

Task 5: Examine Informal Service-Delivery Units

- What informal units would typically assist the target population within a local community?
- What importance does the household unit have to the target population within this community?
- What importance do natural support and social networks have to the target population within this community?

5 / UNDERSTANDING A COMMUNITY HUMAN SERVICE SYSTEM

- What informal units are actively engaged in service delivery to the target population within this community?
- Are race, ethnicity, or gender factors in the provision of informal services and support?

Task 6: Examine Mediating Service-Delivery Units

- What mediating units would typically assist the target population within a local community?
- What self-help groups are available to the target population within this community?
- What voluntary associations have members from, or take an interest in, the target population within this community?
- What mediating units are actively engaged in service delivery to the target population within this community?

Task 7: Examine Formal Service-Delivery Units

- What nonprofit agencies deliver services to the target population within this community?
- What public agencies deliver services to the target population within this community?
- What for-profit agencies deliver services to the target population within this community?
- Are there differences in service delivery across formal units that appear to be based on race or ethnicity, gender, affectional preference, disability, or age?

FOCUS C: DETERMINING SYSTEMIC COMPETENCE

Task 8: Determine Linkages Between Units

- How are the various types of service units generally connected within a community?
- What are the established linkages between units that serve the target population within *this* community?
- Where are linkages between service units obviously needed, but not currently established?
- Are the interests of ethnic minorities and women represented in the network established through linkages between units?

APPENDIX

Framework for Analyzing a Human Service Organization

FOCUS A: IDENTIFYING THE AGENCY'S TASK ENVIRONMENT

Task 1: Identify Funding Sources

- What are the agency's funding sources?
- How much and what percentage of funds are received from each source?
- Which funds are earmarked for certain programs or services and which are flexible?

Task 2: Identify Sources of Noncash Revenues

- Does the organization use volunteers? If yes, how many and for what purposes?
- What material resources (e.g., food, clothing, physical facilities, etc.) does the organization receive?
- What tax benefits does the organization receive?
- How important are noncash revenues to the organization's operation?

Task 3: Identify Clients and Client Sources

- What client groups does this organization serve?
- How many unduplicated clients are served by each program?
- How are client needs determined?
- Within each client group, how many (or what percentage) are able to pay? Contract eligible? Unable to pay (low-pay or no-pay)?
- What percentage of clients are ethnic/racial minorities, women, gays or lesbians, or members of other oppressed groups?
- How and by whom (i.e., self, family, provider) are clients referred to this organization?
- How and to which agencies does this organization refer clients?

Task 4: Identify Other Constituents

- What state and federal regulatory bodies oversee programs provided by this organization?
- What agencies contract with this organization for service delivery?

7 / PRACTICE IN HUMAN SERVICE ORGANIZATIONS

- What professional associations, labor unions, or accrediting bodies influence agency operations?
- Is this organization affiliated with or sponsored by religious, ethnic, or fraternal bodies?
- How does this organization define its "public," and what groups are part of this definition?

FOCUS B: RECOGNIZING THE DYNAMICS OF AGENCY/ENVIRONMENT RELATIONS

Task 5: Observe Relationships with Clients

- Has this organization targeted new or different clients within the last five years?
- What is the organization's domain (specifically, what types of clients does the organization serve)?
- Are these clients ones who bring resources to the agency or for whose services resources must be obtained elsewhere?
- Does the organization claim a larger domain than it serves, and are significant numbers of clients turned away?
- What types of clients does the organization refuse (e.g., are most of these the poorest or most troubled clients, are most of these minorities as opposed to nonminorities)? What happens to these clients?

Task 6: Observe Relationships with Resource Sources

- How good are the relationships between funding sources and organizational leaders?
- How does the organization use and work with volunteers?
- How good are the relationships between important external various constituencies and organizational members?
- What types of changes have recently affected the organization, particularly in the area of access to resources?

Task 7: Observe Relationships with Competitors

- What other agencies provide the same services to the same clientele as this organization?
- Are there mechanisms for interagency cooperation and are they used?
- With whom does the organization compete?
- With whom does the organization cooperate? Are these relationships formal or informal (e.g., is the organization part of a coalition or an alliance)?

THE ORGANIZATION AS THE TARGET OF CHANGE

FOCUS C: ANALYZING THE ORGANIZATION

Task 8: Identify Corporate Authority and Mission

- Is the organization operating in a manner that is consistent with its mission and authority?
- To what extent is the mission supported by staff who perform different roles within the organization?
- Are policies and procedures consistent with mission and authority?

Task 9: Understand Organizational Structure

- What is the organizing theme for the basic organizational structure (e.g., bureaucratic, organized around programs, organized around professional disciplines, alternative or nontraditional, etc.)?
- Is this the most logical structure? Is it consistent with and supportive of the mission?
- Are staff clear about reporting lines and accountability?
- Is supervision logical and capable of performing expected functions?
- Is there an informal organization (people who carry authority because they are respected by staff, and thus exert influence outside those in formally designated positions)?
- Are there clear distinctions between staff and line functions?

Task 10: Understand Administration, Management, and Leadership

- How is the workplace organized and work allocated?
- Is appropriate authority assigned along with responsibility?
- How close is supervision and what, exactly, is supervised? Is it tasks, or is it functions, or is it the employee, depending on need?
- How are people treated in the workplace, including the very lowest level employees?
- Do employees feel valued at every level? Do they believe they are making a contribution to the success of the organization?
- How are decisions made? Is information solicited from those affected? Is it used? Are there individuals or units within the organization that are left out of decision making? If so, why?
- How is conflict handled?

Task 11: Recognize the Organization's Culture

- How would one begin to describe the organization's culture?
- What are the organization's artifacts and creations?
- What are the organization's stated values and what is actually valued within the organization?

7 / PRACTICE IN HUMAN SERVICE ORGANIZATIONS

- How do leaders within the organization influence organizational values and assumptions?
- What are the taken-for-granted patterns within this organization?
- Is behavior consistent with culture?
- Are there minorities or others who feel left out of the accepted organizational culture?

Task 12: Assess the Organization's Programs and Services

- What programs are offered? What services are offered within each program? Are the services consistent with the goals and objectives of the program?
- Is there a common understanding among management and line staff within each program about problems to be addressed, populations to be served, services to be provided, and outcomes to be achieved?
- Are staffing patterns appropriate to the services to be provided? Are any staff over or under qualified? Are workload expectations reasonable given expectations for achievement with each client and within each service and program? Is consideration given to cultural and racial understanding of workers and clients?
- What data is collected on clients and how is it used?
- What evaluative information is expected from the evaluation plan? Is there a plan to gather information about clients and the extent of improvement at the point of termination and in a follow-up survey or interview? Is there an effort to determine level of client satisfaction with services? What do the findings reveal to date?

Task 13: Assess Organizational Technology

- What are the job expectations for each level of staff within the organization? What background education and experience is required to perform these jobs? Do those who hold these jobs have the appropriate credentials?
- Are staff members performing competently in their positions? Are they meeting expectations? Are they effective (do they get good results) in working with clients?
- Is each discipline supervised and evaluated by someone with appropriate knowledge, values, skills, and professional identification?
- In what ways are various units representing different disciplines (e.g., social work, psychology, medical, data processing, etc.) linked with each other for the purposes of collaboration and communication?

Task 14: Locate Personnel Policies and Procedures

- How diverse is the workforce? Are differences valued in this organization?
- How do managers and administrators view staff? As people who carry out tasks? As members of teams or units? As creative problem solvers who have an important stake in organizational success?
- What formal and informal criteria are used for evaluating performance?
- What kinds of behaviors does the organization reward?

THE-ORGANIZATION AS THE TARGET OF CHANGE

- What is the organization's philosophy and policy about staff development and training? What resources are invested in it?
- How attractive are wages, hours, working conditions, and fringe benefits? How attractive is the facility and the work environment?
- What are the affirmative action policies and how are they implemented?
- To what extent does the organization groom people for higher level positions, and to what extent do they promote from within?

Task 15: Recognize How the Organization Deals with Community Relations

- Is there a clearly defined public image, and is there a strategy for communicating this image to the public? What kinds of resources, including funding, does the organization invest in promoting its public image?
- What is the reputation of the agency, its programs and services, its board, executive, management, and line staff with the general public, other agencies, funding sources, clients, and other relevant constituencies such as minority communities?
- Do the agency's facilities and published materials contribute to its desired public image?
- Does the agency respond when needed by other community agencies for political activities, fund raising, dealing with community social problems, or other issues?

Task 16: Recognize Methods of Financial Management and Accountability

- Is the budget prepared in accordance with accepted standards of accounting and financial reporting? Are annual audits conducted?
- Are program staff involved in a meaningful way in preparing the budget, and do they get useful feedback about expenditures and unit costs during the year? Do program staff use budget data as a measure by which they attempt to improve efficiency?
- Do resources appear to be adequate to achieve stated program goals and objectives?
- What are the major sources of revenue for the organization? What demands and restrictions does each funding source place on the organization and its programs?

Task 17: Assess Facilities, Equipment, Computer Utilization, and Records Management

- Do employees feel that they have enough space? Is the physical work environment attractive and conducive to high productivity?
- Have problems been identified with current facilities and equipment? Is there a plan to address the problems and to fund solutions?

7 / PRACTICE IN HUMAN SERVICE ORGANIZATIONS

- Are there conditions related to facilities or equipment that appear to act as barriers to productivity or work flow?
- Is the agency able to produce data that will answer important questions about clients, programs, and services? Does the agency have a computerized record-keeping and management information system that includes client data?

HIERARCHY, POWER AND CONTROL IN COLLABORATIVES: VICIOUS CYCLES THAT ERODE COLLABORATION

(Lawson & Hooper-Briar, 1994)

1. The head, or top executive, of an organization adopts a mission statement that is offered to others, both inside and outside the organization, as a vision.
2. The head's mission, privately described as "my agenda," is presented publicly as "ours."
3. The head delegates implementation to middle managers who lack enough experience with change, fail to understand the mission's bedrock values, and are prone to obey and invoke, rather than negotiate and transform, organizational policies and procedures.
4. These middle managers and others whom they hand-pick identify tasks and task groups, which they believe to be expressions of the mission; these tasks and task groups change the mission (innovation), framing in it ways that they can understand and use.
5. Compliance-based implementation strategies are employed; middle managers equate them with education and constituency-building activities.
6. Criticism and negative feedback from persons not involved in these decisions are perceived by middle managers (and the head) as attacks or attempts to sabotage the innovation; messengers are blamed for unfavorable messages, labeled (e.g., "too far ahead," "disloyal," "too intense," "has his/her own agenda"), and marginalized.

Lawson, H., & Hooper-Briar, K. (1994). *Unpublished materials*. Oxford, OH: Miami University School of Education and Allied Professions.

Black, J. (1998). *Interagency child welfare practice: Collaboration in service of children and families*. Berkeley: University of California at Berkeley, California Social Work Education Center.

7. Marginalized persons become apathetic, frustrated, and angry; their feelings spread through the organization like a contagious disease.
8. Confronted with what they perceive as opposition, sabotage, and commitment-morale problems, head and middle managers intensify efforts and steps 4-8 recur.
9. This cycle prevents the innovation from moving beyond the status of "a pilot" or "project." At best, limited changes are effected; oftentimes, the collaboration fails.
10. There are two related "root causes" of these cycles:
 - A. The failure to articulate completely a strategic vision and its accompanying bedrock values; once articulated, fidelity increases and democratic ownership and participation are facilitated.
 - B. Absence of informed and appropriate leadership. Top-down, hierarchical strategies, involving power and control—which are non-collaborative—are superimposed on plans for a collaborative. The results are predictable.

Realizing the Vision: A Five-Stage Process

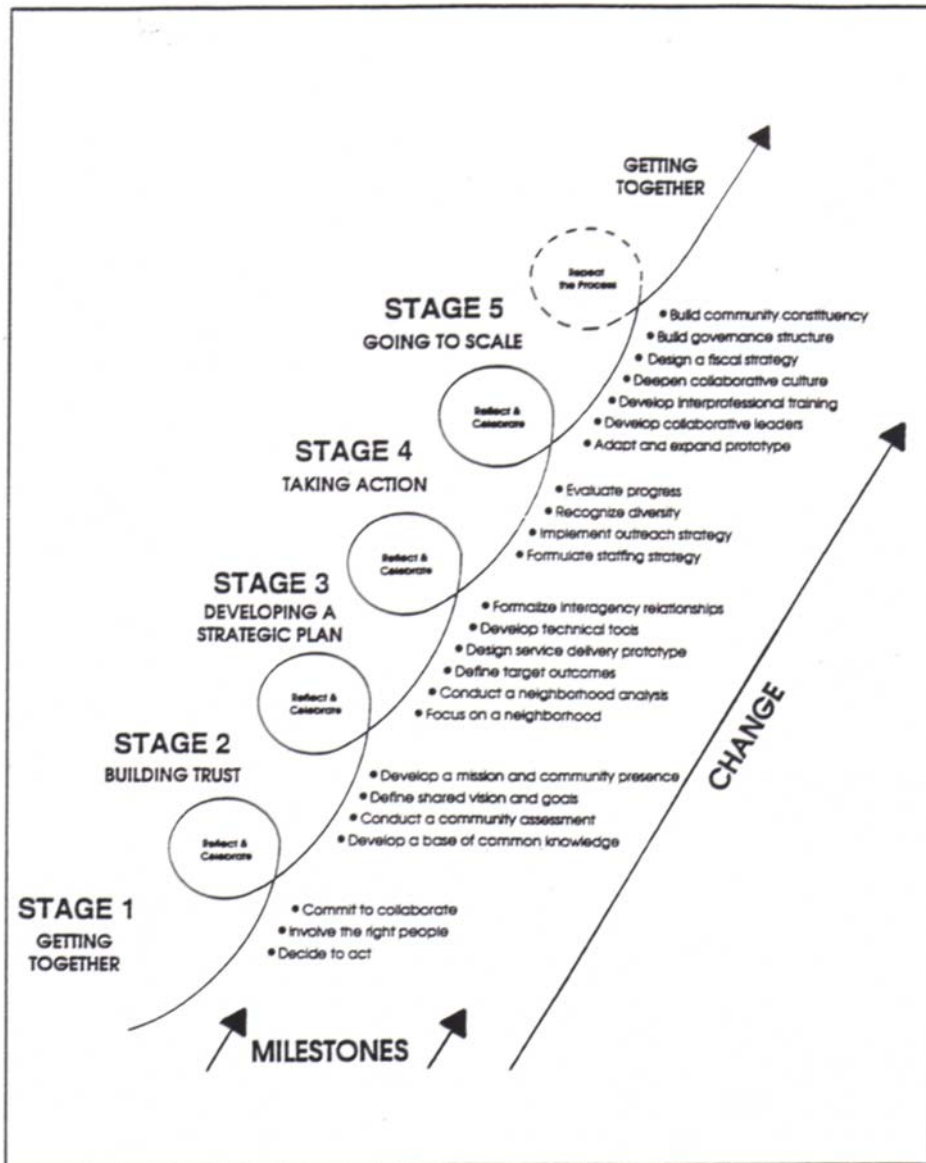


Figure 2. Building a New System: A Five-Stage Process for Change

Together We Can

Summary of Five-Stage Process

Stage One: Getting Together. In this stage, a small group comes together to explore how to improve services for children and families. They identify other community representatives with a stake in the same issue, make a joint commitment to collaborate, and agree on a unifying theme. They also establish shared leadership, set basic ground rules for working together, secure initial support, and determine how to finance collaborative planning.

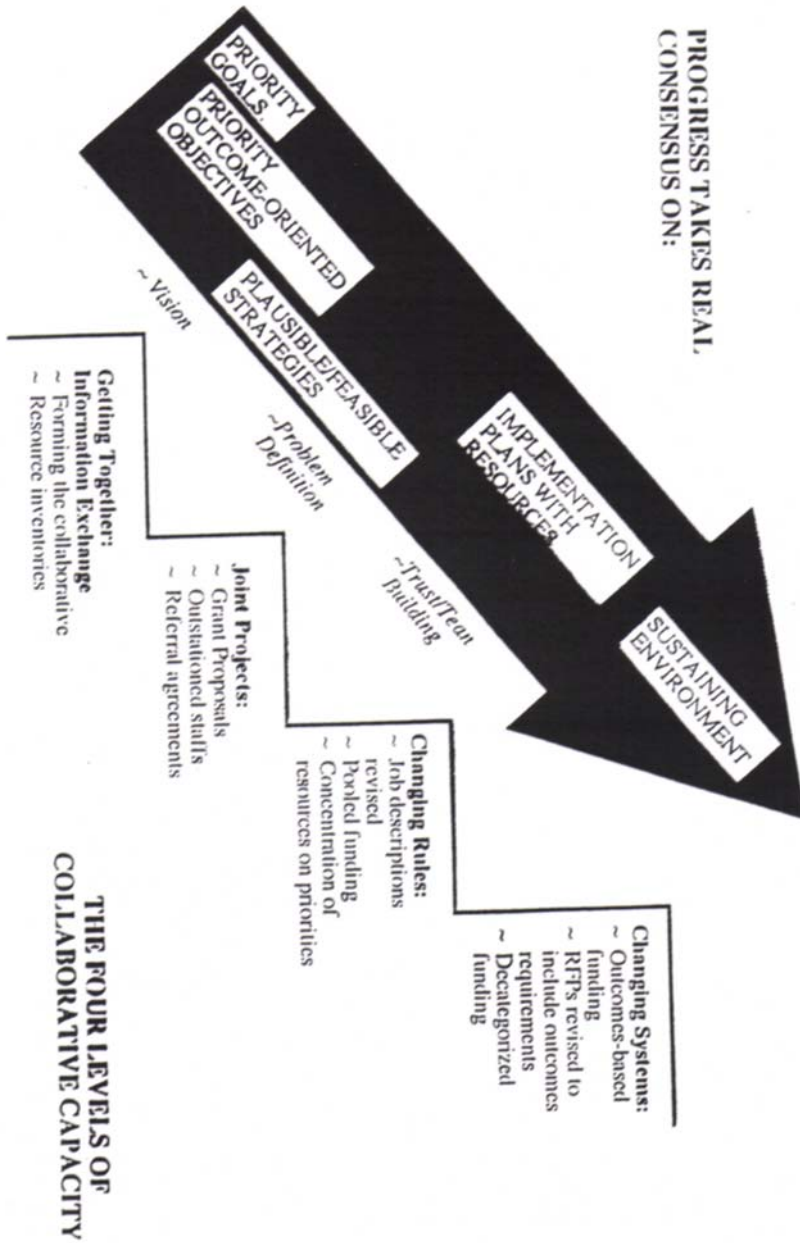
Stage Two: Building Trust and Ownership. Next, partners establish common ground. They share information about each other and the needs of families and children in their community. Using this information, they create a shared vision of what a better service delivery system would look like, and they develop a mission statement and a set of goals to guide their future actions.

Stage Three: Developing a Strategic Plan. Here, partners begin to explore options that flow from their common concerns and shared vision. They agree to focus on a specific geographic area, and they design a prototype delivery system that incorporates the elements of their shared vision. Partners also develop the technical tools and interagency agreements needed to put their plan into action. During this stage, the group may go back to preceding stages to bring in new partners and to continue building ownership.

Stage Four: Taking Action. Partners begin to implement the prototype. They use the information it provides to adjust the policies and practices of the organizations that comprise the prototype service delivery system. Partners design an ongoing evaluation-strategy that helps them to identify specific systems-change requirements, make mid-course corrections, and measure the results.

Stage Five: Going to Scale. Finally, partners take steps to ensure that systems-change strategies and capacities developed in the prototype are adapted, expanded, and recreated in locations throughout the community where profamily services are needed. To do this, partners continue to develop local leadership, strengthen staff capacity by changing preservice and inservice training, and build a strong constituency for change.

Melaville, A.I., Blank, M.J. and Asayesh, G. (1993). Together we can: A guide for crafting a profamily system of education and human services. Washington, D.C.: U.S. Department of Education and U.S. Department of Health and Human Services.



COLLABORATION

Communicate

Open

Listen

Learn

Aim

Brainstorm

Observant

Resourceful

Trust

Invest

Outcome

Navigate

Communicate

- no professional jargon
- share information; decide on confidentiality rules
- obtain signed releases

Open

- listen to new information and suggestions of others
- offer your perspective and find ways to synthesize with other ideas

Listen

- really hear what others are saying
- quiet your mind so you focus on what is being said rather than your next statement
- be an active participant, feedback your understanding

Learn

- ask questions when you do not understand
- attempt to remember
- teach others your expertise
- holistic approach
- no one answer or one expert--gather information

Aim

- know what the goal of the meeting is
- do not get sidetracked by turf or personal issues
- assist in assessing and planning a treatment strategy
- no hidden agendas

Brainstorm

- explore all possibilities in the case
- get feedback from everyone
- narrow options from large pool
- no criticisms of ideas as they are fed into the pool

Observant

- notice body language and what people are not saying
- team approach is about people--explore and confront feelings as appropriate
- be aware of group dynamics

Resourceful

- teamwork produces tremendous creativity
- look at issue from all angles
- explore many options
- be familiar with available resources and possibilities
- step outside normal boundaries

Active

- engage yourself
- participate in the discussion
- seek ways to contribute which build on the ideas of the group

Trust

- build comfort with one another
- establish ground rules of confidentiality, leadership, attending
- become comfortable with one another
- follow through on your commitments

Invested

- be prepared--gather information before the meeting
- plan to spend the time in the process
- believe in the importance of the process

Outcome

- create a plan that people can endorse
- assign responsibilities, designate time frame in which to evaluate success
- make written commitments

Navigate

- check your bearings--personal, professional
- clarify with your systems or institutions
- steer the process toward your desired outcomes
- sometimes the waters are treacherous!

November 1993
Julie O'Donnell

Puzzle Game

On large pieces of posterboard, create drawings representing possible collaborative partners (schools, hospitals, child welfare agencies, law enforcement, children, families, agency staff) and words relating to collaboration (sharing, conflict, communication, negotiation). Cut the poster into pieces as in a jigsaw puzzle. Five puzzles are needed for a class size of about 40 students (break students into five groups).

Each group of students should get a disassembled puzzle. Tell them that they must work together as a group in silence to construct the puzzles. They may use non-verbal behaviors as a means of communicating. Allow approximately 15-20 minutes for the puzzles to be put together.

After all of the puzzles are completed, the instructor leads a discussion about the experience. The instructor should include his/her impressions or observations of the experience.

Sample Discussion Questions:

1. What contributed to completing the puzzle?
2. What got in the way of completing the puzzle?
3. How did the group communicate?
4. How did you feel about the exercise?
5. How does this experience relate to other collaborative activities you have been involved in?

Sharing Roles and Responsibilities Exercise

Divide students into groups based on their professional identities (e.g., social workers, nurses, teachers, lawyers, law enforcement, etc).

Ask each group to select another professional group and develop a thorough list of the knowledge and skills that they expect that group to have, as well as the activities that they expect to be usual in that practice environment. (If the instructor is aware of specific areas of conflict or misunderstanding amongst professional groups that have become obvious during class periods, s/he may wish to assign the professional groups accordingly).

When each group has completed their list, combine the groups in the total class and have students share their perceptions (and stereotypes, potentially) about the various professions' areas of expertise and practice. Allow for full discussion by all class members so that perceptions and stereotypes can be addressed. See if the group can come to a consensus about areas of expertise and knowledge that are specific to one profession, and areas that may benefit from input and expertise from multiple professional groups.

Re-form the class into new groups, with each profession represented in each group. With the newly developed knowledge of areas of specific and shared expertise, have each group discuss the case vignette, "The Family at Risk," and identify the various roles and tasks for each of the professions represented. Report back to the full class and discuss.

Additional Written Assignment

The instructor may wish to have an additional assignment during class, or have students bring in written comments to the next class meeting. The following assignment would help students build on the knowledge gathered thus far, and in particular, the knowledge gleaned during the last experiential exercise:

Ask students to reflect on how their own professional socialization has impacted their view of other members of the helping professions. How have these views encouraged or discouraged collaborative efforts? What new things have they learned so far about the collaborative process that they might utilize in their professional lives in the future?

An Interdisciplinary Administrative Dilemma

You are the administrator of a large human service agency that serves children and families in several adjacent communities. The agency offers a variety of services, including health screening and outpatient medical clinic services, child care, job counseling and training, advocacy, individual and family counseling, parenting training, comprehensive social services, and a small day treatment center for emotionally disturbed children. The agency has the following full-time staff members:

- 1 Executive Director
- 1 Administrative Assistant/Secretary
- 2 Clerical Staff
- 2 Registered Nurses
- 2 Nurse Assistants
- 3 Social Workers
- 2 Job Counselors
- 3 Child Care Workers

The agency also has two part-time physicians who provide a total of 15 hours/week of on-site services to the agency clients, and six student interns from the social work, nursing, and education departments of the neighboring university.

All of the staff members are involved in community collaborations and frequently come and go to the agency office at various times during the day. The agency is located in a very densely populated part of the community, and shares a parking lot with several other businesses. The agency has four designated parking spots. Street parking is available on the adjacent streets and a public parking lot is located three blocks away.

Class Activity

Divide the class into work groups, with representatives of multiple professions in each group. Assign each group the task of deciding upon a policy for the allocation of parking spaces among the full-time staff members.

This exercise allows students to experience some of the conflicts and collaborative barriers that present themselves when working with a complex, interdisciplinary staff. Issues of power, status, competition, and practicality will enter into the group discussions.

Have each group report back to the larger group with their strategies for a Parking Space policy for the agency.

S.B. - A CASE VIGNETTE¹

S.B. is a male child born in August 1984. He was the result of an uncomplicated term pregnancy and a 2-hour labor following a Pitocin induction. His APGAR scores were 7 at birth and 9 at 5 minutes. Infancy was uneventful except for mother's observation of head banging behavior. S.B. suffered a mild concussion in an auto accident at age 2.

Parents reported moderate frustration in disciplining S.B. since age 4. This frustration was seemingly due to S.B. not learning from previous attempts at discipline. Parents also noted a repetition of small accidents as though previous incidents did not modify future behavior. He did not complete simple play activities and he flitted from one activity to another. He usually got distracted by other activities when assigned simple chores; he was especially distracted by chores that required a sequence of tasks.

In third grade, the teacher reported that S.B. was fidgety, frequently out of his seat, and that he did not complete his deskwork. Mild external noises were distracting for S.B.

A review of his medical history revealed frequent benign recurrences of abdominal pain. It was noted that he had not required training wheels when he learned to ride a two-wheel bike. He is now 8 years old.

Student Activity

For each profession listed below, answer the questions provided and consider the best way to initiate collaborative interaction.

1. You are S.B.'s third-grade teacher. What classroom action would you take? How would you initiate further study? What are your expectations for further participation in managing S.B.?
2. You are the school social worker. The teacher has discussed S.B.'s classroom behavior with you. How would you respond?
3. You are S.B.'s physician. At the preschool exam, you noticed S.B. playing with the instruments and other objects in the examining room in a manner devoid of curiosity. Your receptionist has commented about his disruptive behavior in the waiting room. How would you initiate further study of S.B. and involve others in the process?
4. You are the local prosecuting attorney. A neighbor has filed a complaint against S.B. The neighbor alleges that S.B. set a fire in his/her garage. What action, if any, are you required to take by law? What is your response to the complaint?

¹ Source: Casto, R. M., & Julia, M. C. (1994). *Interprofessional care and collaborative practice*. Pacific Grove, CA: Brookes/Cole Publishing Co.

5. You are the lawyer for S.B.'s parents. They called you following a threat by the neighbors to sue for damages caused by the fire in their garage. The neighbors claim a right to compensation not only for the damaged garage but for the damage caused by other less destructive acts of S.B. such as picking their flowers and digging in their lawn. They also claim that they are entitled to compensation for the psychological distress caused by S.B.'s acts as well as the physical damage. The neighbors have agreed, however, not to sue if S.B. is removed from the neighborhood. What would your response be? As a lawyer, are you acting as a mediator or an advocate? Are these roles competing or complementary?
6. You are the social worker at the local mental health clinic. Mrs. B. has come to the clinic seeking help in handling S.B.'s discipline problems. She tells you that all of his teachers have had similar problems. How would you proceed?
7. You are the B. family's pastor. One of your Sunday school teachers reports to you that S.B. is disruptive in Sunday school. How would you respond?
8. You are the coach of the Little League team and S.B. is your left fielder. You are also a psychologist at the mental health clinic, though S.B. and his family have never been your clients. You notice that he plays by himself off to the side of the other players. When he goes to the field, he plays around in his area and watches activities off of the field. What would you do?
9. You are the school nurse. S.B. is unable to respond appropriately when you attempt to administer a vision screening test using the eye chart. What would your response be?
10. You are a nutritionist who has been consulted by the B. parents. They would like advice about the benefits of various dietary approaches that may ameliorate symptom patterns similar to those displayed by S.B. How would you respond to their inquiry?

For Further Discussion and Study:

1. What information in the case is not clear to you?
2. What other information would you need to know from the perspective of your profession in order to prepare yourself to participate in an interprofessional discussion of a treatment plan for S.B.?
3. Would it be helpful to develop a profile for S.B. that would span the time of his life? If so, how would you use such a profile? How would you go about developing it? Where should such a profile be maintained? How would access to the profile be controlled?

4. What are the ethical issues raised when professionals seek access to the records of other professionals regarding a particular client? How should such access be regulated?

THE FAMILY REUNIFICATION ROLE-PLAY

Directions for this activity can be found in:

Werrbach, G. B. (1993). The family reunification role-play. *Child Welfare*, 72(6), 555-568.

Black, J. (1998). *Interagency child welfare practice: Collaboration in service of children and families*. Berkeley: University of California at Berkeley, California Social Work Education Center.

WHAT'S THE MATTER WITH LAURA?

Laura is a 13-year-old, unattractive, slightly obese female who was brought to you by her grandmother, who is concerned that there has been a change in Laura's behavior over the past several months. The grandmother states that Laura has begun to stay in her room all of the time, and she will not talk to anyone in the house. She has found out from Laura's teachers, that Laura has been skipping school a lot lately, and she is very hostile towards everyone. The grandmother has brought her to you because she does not know what else to do, and she wants you to find out what's the matter with Laura.

You find out that until 3 months ago, Laura had lived with her 35-year-old mother, who found fault with everything about Laura, from the fact that her hair would not grow to an acceptable length, to the fact that her feet had grown too large. Laura says that her mother feels that the pressures from her full-time job as a nurse's aid, and looking for a man to help with the responsibility of raising her kids, are all that she can handle. Therefore, Laura's responsibilities were to prepare all of the meals, clean the house, wash and iron all of the clothes, and to look after her 3-year-old brother. Her little brother had been spoiled rotten by this father, one of her mother's many boyfriends, and does not mind Laura at all. Laura has never met her own father, but she knows through comments of relatives that she resembles him, that he is an alcoholic, and that he never followed through on anything, not even his plans to marry her mother. Each time Laura failed to complete a chore, her mother would remind her that she was just like her "no good" daddy.

Laura remembers her grandfather making her feel special, but he died when she was 12. Her only friend now is a boy named Joseph, a special education student, who tries to get her to ditch school with him. She does not have any activities. She tried out for the modeling club this year. Her mother was so mad because she had gotten home late from school, and had forgotten to iron a dress her mother wanted to wear on a date that evening, that Laura never went back to see if she had made it or not.

About 3 months ago, Laura had gotten home from school and had found her mother's new boyfriend there alone. As she tried to walk past him to her room, he attempted to fondle her breast. She managed to lock herself in the bathroom until her mother got home. She was afraid to tell her mother what had happened, because the last time one of her boyfriends had bothered Laura, the mother accused Laura of throwing herself at the man. The next day, the boyfriend was there again and she was not able to get away from him this time. Before anything could happen, the mother came home, and found

her boyfriend exposed and about to rape Laura. Laura states that her mother slapped her several times and threw her out of the house.

Laura asked her grandmother if she could stay with her, and the grandmother said yes, only on the condition that she accompany her to church 5 days a week and that she not become dependent on her like her daughter always was.

Several days after Laura came to live with her grandmother, she was harassed by two men standing in the doorway of the men's restroom at the service station on the corner. They were beckoning her to come over to them, and one was waving dollar bills at her. Laura states that she tried several times to talk to her grandmother about what happened, but the grandmother was always reading the Bible and would not talk to her.

Laura states that she spent so much time thinking about how lonely she was, and how afraid she was to walk past the service station, that she could not pay attention in class, and she started to ditch classes. She said she would find her a quiet room in school, to be by herself, until she felt like going back to her classes. Once day she accidentally knocked a girl's books on the floor, and the girl announced to everyone in the hallway that she was going to beat Laura up after school. Laura stated she was so frightened that a number of thoughts started running through her mind. She first thought about running away. She even found herself thinking about some Valium pills on her grandmother's dresser. Laura stated that she bumped into Joseph on lunch hour and he convinced her that she should ditch school with him to avoid the fight and maybe the girl would cool down. When they got to Joseph's house, he offered her some marijuana. She said this was the first time she had ever tried it. She stated that before she knew it, she had let him go all the way. Ashamed of what she had done, she decided to lock herself in her room, and don't talk to anyone. She noticed that for the past several weeks, she has been feeling dizzy, sick to her stomach, and she has not had her period this month.

Rebera Elliott Foston, MD, MPH
11/17/86

CASE VIGNETTE – JIMMIE

Jimmie is 14 years old and lives with his parents in a suburb of a large urban area. He is an active, bright, high school freshman. Recently, his father's brother came to live with them. This uncle is 35 years old and unmarried.

You live next door to Jimmie and his family. Jimmie enjoys stopping by to visit and talk with you about your work and other interests. He enjoys talking with you about his plans for the future, such as going to college and choosing a profession. He often confides in you and seeks your advice about "teenage problems." He often talks about how much he enjoys having an adult friend whom he can trust.

Lately, Jimmie has been acting very quiet and withdrawn. You ask if something is bothering him. Jimmie breaks down and starts talking to you while sobbing. While listening to him, you learn that he is feeling embarrassed; Jimmie's uncle has made him do some horrible things, such as undress in front of him, take showers with him, let him fondle and kiss Jimmie's genitalia, and talk about having sex. Jimmie is really scared of his uncle. Jimmie told his father, but his father would not listen. His father said that his brother would never do anything like this. Jimmie does not know what else to do. He has been trying to ignore his uncle but that is very hard to do. Jimmie is frightened and upset, and he wonders what he should do now.

Student Activity

1. Identify and discuss the issues this case presents for members of your profession.
2. Identify which professionals would be of assistance in developing a collaborative plan of care to meet Jimmie's needs.
3. With your colleagues from other professions, develop a collaborative plan for responding to Jimmie.

For Further Discussion and Study:

1. What are the responsibilities and obligations of your profession for reporting suspected child abuse? If you decide to report, should you tell Jimmie that you are going to make the report?
2. Are your personal responsibilities different from your legal obligations?
3. In this case, are you responsible as a private citizen or as a professional? How do you decide?
4. Should you refer Jimmie to another professional or attempt to offer services yourself?

From: Casto, M., & Julia, M. C. (1994). *Interprofessional care and collaborative practice*. Pacific Grove, CA: Brooks/Cole Publishing Company.

Black, J. (1998). *Interagency child welfare practice: Collaboration in service of children and families*. Berkeley: University of California at Berkeley, California Social Work Education Center.

COLLABORATION

Communicate

Open

Listen

Learn

Aim

Brainstorm

Observant

Resourceful

Trust

Invest

Outcome

Navigate

Communicate

- no professional jargon
- share information; decide on confidentiality rules
- obtain signed releases

Open

- listen to new information and suggestions of others
- offer your perspective and find ways to synthesize with other ideas

Listen

- really hear what others are saying
- quiet your mind so you focus on what is being said rather than your next statement
- be an active participant, feedback your understanding

Learn

- ask questions when you do not understand
- attempt to remember
- teach others your expertise
- holistic approach
- no one answer or one expert--gather information

Aim

- know what the goal of the meeting is
- do not get sidetracked by turf or personal issues
- assist in assessing and planning a treatment strategy
- no hidden agendas

Brainstorm

- explore all possibilities in the case
- get feedback from everyone
- narrow options from large pool
- no criticisms of ideas as they are fed into the pool

Observant

- notice body language and what people are not saying
- team approach is about people--explore and confront feelings as appropriate
- be aware of group dynamics

Resourceful

- teamwork produces tremendous creativity
- look at issue from all angles
- explore many options
- be familiar with available resources and possibilities
- step outside normal boundaries

Active

- engage yourself
- participate in the discussion
- seek ways to contribute which build on the ideas of the group

Trust

- build comfort with one another
- establish ground rules of confidentiality, leadership, attending
- become comfortable with one another
- follow through on your commitments

Invested

- be prepared--gather information before the meeting
- plan to spend the time in the process
- believe in the importance of the process

Outcome

- create a plan that people can endorse
- assign responsibilities, designate time frame in which to evaluate success
- make written commitments

Navigate

- check your bearings--personal, professional
- clarify with your systems or institutions
- steer the process toward your desired outcomes
- sometimes the waters are treacherous!

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