

How Peer Learning Advances Multi-Sector Collaborations:
An Evaluation of the All In: Data for Community Health Affinity Group Program

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Abstract

Background: Peer-to-Peer learning is used for individuals to share knowledge and ideas with one another through formal and informal activities. This method helps peers to receive feedback from other one, gain teamwork skills on projects, and use principles from other sectors which can advance their own work. Peer-to-peer learning is used in multi-sector collaborations in advancing data sharing in public health. This report serves as an evaluation of the All In: Data for Community Health Affinity Group pilot to determine the effectiveness of peer engagement between participants, subject matter expert (SME) leaders, and support staff.

Methods: Data was collected using surveys for SME leaders, support staff, and participants. These stakeholders were asked to report information on if they found the Affinity Groups to be effective in peer-to-peer learning, which practices were used to encourage engagement during meetings, and recommendations they had for future iterations of the program.

Results: For the SME Leader Feedback form, six major themes emerged through analysis. Most SME leaders found there to be engagement within sessions, but preferred group sizes be reduced to allow for consistent attendance. SME leaders stated there was less engagement between participants outside of meetings, such as low engagement on the All In Online Community (OC) platform. Of the participants who completed the post-Affinity Group assessment survey (N=48), 89% of them said they would be somewhat or very likely to participate in a future Affinity Group.

Conclusion: The results from the evaluation conclude there to be high engagement between peers with the support of SME leaders as facilitators and support staff who assisted groups during sessions. Half of participants shared they made connections to some extent, recommendations to support engagement across groups should be implemented to get individuals involved in other areas of All In Programming. All In should consider piloting short and long term recommendations and discuss how they can be used to catalyze an expansive version of the Affinity Group program in the future.

Introduction:

Purpose

This report serves as an evaluation for the All In: Data for Community Health Affinity Group program. The report will examine the effectiveness of peer-to-peer connections and data sharing within multi-sector collaboration of the Affinity Groups, and then will suggest future recommendations that will shape logistical structures of the program, increase opportunities for engagement through other All In programming, and provide long term goals for how All In can further develop the pilot into a large-scale initiative. I used the Framework for Program Evaluation in Public Health by the Centers for Disease Control (CDC) (Milstein & Wetterhall, 1999) as a standard tool to evaluate elements from the Affinity Group Program. This framework uses a six step process and four standards that help avoid creating an imbalanced evaluation. These six steps include engaging stakeholders, describing the problem, focusing on evaluation design, gathering credible evidence, justifying conclusions, and describing the shared lessons learned. The four standards are utility, feasibility, propriety, and accuracy (Milstein & Wetterhall, 1999). To provide guidance in addressing the structure and numerous content of the report, I used the [Evaluation Report Checklist](#) tool from Western Michigan University (Miron, 2004). This evaluation serves as a written product for Northwestern University's Master of Public Health Culminating Experience and will weave core competencies I have learned through my coursework and in collaboration with the Illinois Public Health Institute (IPHI), Data Across Sectors for Health (DASH) and All In collaborators.

Background:

Peer-to-peer collaborations are a method of sharing knowledge, ideas, and experiences between individuals through an array of formal and informal activities. It allows individuals to explain their ideas to one another and work collaboratively on projects. Individuals can receive feedback from others on their work and evaluate their own learning styles (Boud, 2001). Peer learning enhances skills such as teamwork, reflective thinking, and communication. Individuals who are involved in peer-to-peer learning can include students or individuals who have an interest in similar subject matters. Peer learning encompasses multiple activities such as discussions, seminars, collaborative projects, and community based activities. By using this peer-to-peer framework, individuals are developing critical thinking skills and are using overlapping practices and principles from other industries to problem solve around greater issues in their own field of work. Peer-to-peer connections are relevant in the field of public health to get private and public sectors to collaborate to collect and share data. By constructing these types of partnerships, it allows multi-sectors of health to join forces towards aiding community needs, advancing health equity, and promoting justice.

Data sharing and peer-to-peer learning are valuable to multi-sector collaboration as they lead towards positive actions in reducing inequities affecting one's social determinants of health. Government, community organizations, nonprofit sectors, and individual community members are striving to address issues such as racial inequity, health and housing, and behavioral health. Health-related information systems and integrated data systems (IDS), link together individual level data, such as electronic health records (EHR) or data repositories, from different social and

health agencies for research, evaluation, policymaking, or program monitoring. These systems help with decision making at the individual, health system, county, and larger jurisdictional levels (King et al., 2016). By practicing data sharing initiatives with stakeholders, it drives partners to aid their communities in decision making practices. Data sharing helps to understand what issues communities are facing so they can measure the impact of interventions and identify solutions (Allen, et al., 2021). Advantages of data sharing include cost-efficiency, increased cooperation between stakeholders, and innovation through implementing public health programs (Van Panhuis et al., 2014). Collaborators can assist communities by aiding them in developing their own capacity and infrastructure towards community action. It takes time and trust needs to be established for authentic engagement between partners (CTSA, 2011).

The Robert Wood Johnson Foundation and the Georgia Health Policy Center have developed a framework known as Aligning Systems for Health and have created the Cross Sector Alignment Theory of Change. The Theory of Change builds on past public health models to focus on how multi-sectors such as social service, health care, and public health can meet the needs of communities in sustainable methods (Georgia Health Policy Center, 2019). It involves core components such as having a shared purpose, sharing data between entities, establishing sustainable financing, and having strong governance with leadership and defined roles. The theory posits that these factors work together to create change in mindsets, policy, and practice leading to overall change of community needs. As part of the framework, adaptive factors are valuable to the function of the core components, which include trust, equity, power dynamics and community voices (Aligning Systems for Health, 2021). The four adaptive factors are interconnected and are used for accomplishing health and racial equity when there is a partnership between organizational and community leaders (Aligning Systems for Health, 2021). By engaging with peer-to-peer learning and shared data systems, networks of community-based organizations can use multi-sector data to understand the impact of community health outcomes, which is aligned with the work [All In: Data for Community Health](#) strives to complete.

Background on All In: Data for Community Health

[All In: Data for Community Health](#) is a network of communities that work with multi-sector partnerships to improve community health across the nation. Shared data systems help communities by working with different sectors to have a well-rounded profile of a community and their needs through data collection to understand what action is needed. This eventually can lead communities to increase their own capacity of improving programs and implementing public policies. All In partners include the BUILD Health Challenge, Data Across Sectors for Health (DASH), Network for Public Health Law, New Jersey Health Initiatives, Population Health Innovation Lab (PHIL), and Public Health National Center for Innovations (PHNCI). DASH is led by the Illinois Public Health Institute (IPHI) in partnership with the Michigan Public Health Institute (MPHI) and is funded by the Robert Wood Johnson Foundation (RWJF).

All In programming consists of the All In Podcast, webinars, the All In National Meeting, the All In Online Community (OC), and Affinity Groups. The All In podcast published its first episode in 2018 and invites community leaders to discuss their collaboration with other sectors of health to improve the well-being of communities. The podcast is a method of sharing community experiences to listeners through a digital format in a more convenient way. Another

resource All In offers is webinars, showcasing the work of its partners and their funded programs, community organizations and speakers so content can be absorbed in a more formal format. All In was able to use the webinars to gather interested audiences to educate and ask questions through an online presence, given the COVID-19 pandemic. Annually, All In hosts their National Meeting to bring together stakeholders from public health, health care, and national organizations across the U.S to share information about the use of data and how organizations are using it towards improving community health. The National Meeting consists of a multi-day event, in which each day is focused on a different theme related to advancing health equity and data sharing. The National Meeting is a unique opportunity to allow a growing group of diverse individuals from public health, communities, and national organizations to work, share ideas, stories, and tools. All In also hosts a social platform called the [All In Online Community](#), which is a centralized location to facilitate discussions, share resources, connect, and learn from other professionals from different sectors of health. The Online Community provides members an online platform to engage in virtual discussion forums about multi-sector topics. Lastly, another method of peer-to-peer collaborations All In is involved with is the Affinity Group program, which I will explore in greater depth throughout this evaluation report as I reviewed the launching of the pilot to the completion of the first round. I will explain in detail about the multiple methods used for data collection, which assess participation of SME leaders, support staff and participants, provide an explanation of findings, and a set of recommendations that will support future rounds of programming.

Background on All In: Affinity Groups

In 2021, All In launched a nine-month pilot of Affinity Groups, which involved the promotion of peer-to-peer learning within data sharing among stakeholders interested in multi-sector collaborations to solve systemic issues that affect communities. Interested participants are involved in multi-level sectors such as health care delivery, governmental public health, and personal health, but specific areas include social services, transportation, the physical environment, community development, and more. Some of the Affinity Group topics range from law and data, behavioral health, technology solutions, and housing. Affinity Group discussions are participant-led, while subject matter experts (SME) leaders are the ones facilitating related activities for each group. The groups are designed to share resources, build connections, and help members discover different topics of interest related to data sharing and community engagement. Each group had a document outlining their learning goals, key activities, expectations of SME leaders and participants, and deliverables. A few deliverables described are creating summaries of what was learned, completing pre and post program evaluations, and developing program summaries that include participants' experiences and areas for improvement.

The goals of Affinity Groups consist of fostering peer learning in semi-structures spaces, creating opportunities for participants to work with SME leaders, facilitating activities such as inviting guest speakers, using the All In Online community to increase discussions, and understanding what areas of growth and refinement are necessary after the nine month pilot phase for future rounds of Affinity Groups. Participants come from varying multi-sectors and groups such as local public health departments, hospitals, and academia. Participating organizations include the National Association of County and City Health Officials (NACCHO), March of Dimes, Brigham and Women's Hospital, New Jersey Department of Health, The

Health Collaborative, and All In partner organizations like PHNCI. All In and the Affinity Group program welcomes a variety of stakeholders who are involved in improving health through multi sector work. SME leaders were asked to facilitate between four to six meetings, which were conducted virtually and would receive assistance from support staff to aid with administrative tasks. Funding for the program came from the All In budget as each SME leader received \$5,000 for participation and they were offered \$1,000 for technical assistance for providing professional support to participants. Other All In Partners also assisted the program through in-kind support such as staff time.

Participants, SME leaders, and support staff were asked to follow a few guidelines to provide a space for shared learning by facilitating and assisting groups. Participants were given [guidance](#) on how to make the most from their involvement with the groups and peers. They were given learning goals which corresponded to the relevant topic for each group. Participants were asked to attend a majority of the four to six meetings and follow the set norms that each group developed in their first meeting. They were asked to bring their questions and raise ideas during discussions to work out potential solutions for community challenges. For each SME leader, they were asked to create agendas for groups, invite guest speakers to share their lived experiences, share resources to participants, ask for feedback on improvement, and share posts in the Online Community. Support staff were asked to send and schedule meeting invites, share materials to members and SME leaders, assist with writing articles or blog posts, and helping SME leaders to co-design group agendas. Staff members were also asked to support Affinity Group Participants with updating rosters for new participants and ensuring that they were up to date with resources and notes.

For the first pilot of Affinity Groups the following eight topics were chosen: Accountable Communities for Health (ACHs), Behavioral Health, Community Indicator Dashboards, Centering Racial Equity throughout Data Integration, Developing Meaningful Measures by Centering Community Voice, Leveraging Health and Housing Data Integration to Achieve Positive Outcomes for Vulnerable Populations, Reimagining Technology in Support of Cross-Sector Referral and Care Coordination, and United Way & 2-1-1 Partners. The United Way & 2-1-1 Partners Affinity Group is the only industry based group, since it serves as a space for the organization United Way and 2-1-1 collaborators to strengthen their work. United Way is a network of over 1,800 nonprofit organizations focused on finding community based solutions targeting sectors of health, education, and financial stability. Other Affinity Groups are curriculum based such as the Reimagining Technology and Centering Racial Equity throughout Data Integration groups, while others have an open discussion format. Topics came about through feedback from the All In Community, webinars and National Meeting as members had interest in similar focus areas. Each Affinity Group had varying start and end dates, but sessions began on April 1st and concluded on November 19th, 2021.

Project Overview:

The purpose of this evaluation of the All In Affinity Group Program is to understand the effectiveness of how the program goals were reached, analyze how activities and the structure impacted SME leaders, participants, and support staff. I reviewed feedback from a variety of assessment instruments, such as surveys for SME leaders, support staff, participants, and session

recording metrics from Vimeo (2022) and posts from the All In Online Community. To understand how program goals and activities were reached, I analyzed and synthesized data from the results of a survey distributed for SME leaders and presented findings back to All In staff and SME leaders at a virtual meet up. I created a survey for staff members to collect their feedback on the program overall, recommendations for improvement, and how they spent time supporting participants. I reviewed the analytics of the All In Vimeo account to understand the engagement outside of the meetings and the utilization of recorded sessions. To assess the impact of how Affinity Groups help ignite peer-to-peer learning through multi-sector collaborations, I gathered quotes and video clips from participants and support staff as to how they perceived the groups to benefit their own work. Prior to conducting this evaluation, I conducted a list of areas of discovery for analysis. I then collaborated with All In staff to refine the following research questions and aims to gain insights from various backgrounds and those with expertise around the program for this report. We discussed the need to evaluate how the involvement of SME leaders and staff influenced positive outcomes, such as increasing knowledge among participants around their given learning goals. I considered the interest and goals of All In collaborators and what they would have liked to see throughout this evaluation such as developing a set of recommendations that will further the agenda of All In and its partners to expand the Affinity Group pilot into a foundational program. This Affinity Group program can be used as a toolkit of best practices by other institutions nationally to launch their own initiatives around data sharing and can evaluate their programs using the following research question and aims to better understand if positive impacts were achieved.

Research Question:

1. *To what extent did the All In Affinity Groups effectively reach the goals of the program and assist with fostering peer learning and data sharing across multi-sectors of health?*

Specific Aims:

1. *Through the perspective of participants and SME Leaders, in what approaches did the Affinity Group program enhance peer-to-peer engagement efforts?*
2. *How were SME leaders and staff supported as they launch and maintained the Affinity Group Program?*
3. *What recommendations can be suggested to All In collaborators that will lead to produce an expansive design of the Affinity Group Program for future iterations?*

The remainder of this report will highlight multiple methodologies used to support these aims, findings from each instrument and method used, and provide a set of recommendations to amplify the future of the Affinity Group Program for All In.

Methodology:

The methodologies for the report were developed in collaboration with All In staff. As mentioned in the CDC's Framework for Program Evaluation in Public Health, public health is conducted through partnerships, and stakeholders are needed to engage in evaluation to "ensure that their perspectives are understood" (Milstein & Wetterhall, 1999). Foundational and

community health research-based competencies from Northwestern University MPH program were used and were implemented throughout each step of the evaluation framework. The foundational competencies were to analyze quantitative and qualitative data and to interpret results for public health research or practice. The survey for support staff was designed with open and closed-ended questions to yield qualitative and quantitative data. The community health research-based competencies include describing the importance of community and stakeholder engagement in research, interventions, and evaluations. Other competencies include using the principles of planning, assessment, and evaluation of community health programs, and dissemination findings to stakeholders. The surveys and collection of insights were advantageous for this evaluation as they could capture a wide range of perceptions. By following the CDC's Framework for Program Evaluation for Public Health (Milstein & Wetterhall, 1999) it will assess the necessary criteria to conduct a proper analysis. The findings and recommendations from this report will also be disseminated among All In Partners, stakeholders, and program funders including the Robert Wood Johnson Foundation (RWJF).

Overview of Methods and Data Analysis:

A variety of methods were used to grasp ideas of the stakeholders of the program through multiple modalities. This included collecting data from All In support staff, SME leaders, and participants through surveys. All surveys were presented in English and were sent to participants through email, and self-administered electronically, as it was a convenient strategy for stakeholders and allowed them the opportunity to provide meaningful responses. The data collection phase began in November 2021, after the final groups held their final meetings. Data collection ended in February 2022. For the analysis of the SME Leader Feedback Forms and the Support Staff Survey, I used thematic analysis (Attride-Stirling, 2001) to pull out common themes and experiences from both instruments. Detailed descriptions of each method and steps for analysis for the SME Leader Feedback form, Support Staff Assessment, and selection of participant quotes are described under each instrument below.

SME Leader Feedback Form

To assess the effectiveness of program dissemination through SME leaders, the DASH Research Evaluation and Learning (REL) team created and distributed the "All In Affinity Group SME Feedback Form" (Appendix A) and was sent to 12 SME leaders, in which 10 forms were received, as there were two groups had two SME leaders jointly facilitating their Affinity Group. All questions were in an open text format and ranged from to how SME leaders thought Affinity Groups met their goals, thoughts on logistical aspects such as group size and length, and how they perceived participant engagement including barriers or activities. All In staff included questions about the levels of collaborative problem solving that occurred among participants. By using an open text format, each SME leader was able to provide a more in depth answer to how they perceived the effectiveness of the program and what additional changes could be made to improve the program.

An inductive approach (Kiger & Varpio, 2020) was used to gather main ideas from the SME leader feedback forms, so thematic analysis was conducted (Attride-Stirling, 2001). I completed all the qualitative analysis for this instrument and guidance was provided by Kara

Mannor, a research associate of the REL team. Before analysis began, I read through each form to become better familiarized with the content. A coding guide was developed as I reviewed the first three feedback forms. After the guide was refined and finalized, it was applied to the rest of the feedback forms. Coding was completed manually without the assistance of qualitative software. I went through each feedback form and extracted key ideas, patterns, or new pieces of information that would lead to the creation of the themes. To provide support in this step of analysis, the REL team reviewed and provided additional themes. These themes centered around the ways engagement occurred in meetings, if learning goals were met, and other miscellaneous information that SME leaders reflected on.

Support Staff Assessment

As for evaluating the utilization of support staff for SME leaders, I created and disseminated a survey called the “All In Affinity Group Staff Assessment”, (Appendix B) using Alchemer, (2022) an online tool to build, run and analyze surveys. The purpose of the survey was to capture the total time staff members spent assisting with activities, such as maintaining the group rosters or sending out meeting notes. It was also important to consider what types of support were benefiting participants and SME leaders and what areas were needed for improvement. Input on the phrasing and structure of the survey was completed by the REL team before it was distributed. The survey included seven items ranging from open and closed ended formatting such as numerical scales to depict the number of hours spent on activities and open-ended questions to give staff members the space to describe their experiences. Similar to the SME Leader Feedback form, I read through each of the open-text responses for the survey questions and created a coding guide for the first two surveys. I then finalized the guide with DASH staff and then applied the codes to the qualitative sections of the surveys. Once the coding was completed, I organized each code into relevant themes such as what roles staff took on, if participants were engaged during meetings, and what ways All In could aid support staff in future rounds of Affinity Groups.

Participant Survey & Collection of Quotes

To assess whether the structure and objectives of the Affinity Group program was valuable to participants, the REL team created and distributed a survey (Appendix C). Participants were asked about their overall experience in attending meetings, if they gained new information relevant to the goals of each group, how Affinity Groups impacted their methods of data sharing, and if improvements were necessary. The survey included 15 questions with formats ranging from the Likert scale, multiple choice, and open-ended responses. By using open ended questions, it provides the participants a space to expand on future aspects of Affinity Groups. The survey was self-administered and was created using Qualtrics (Qualtrics, Provo, UT).

In addition to using the survey, I collected a series of quotes and video clips from participants (Appendix D). We asked participants via email if they would volunteer to provide testimonials on how the program impacted their participation, how it aided their own work, and any lessons they learned. If participants were willing, they could record a video or audio recording of their experiences. Participants were given approximately two weeks to respond with

a quote in the format of their choosing. We asked these individuals for their approval to include their quotes and information into this report and received their written permission. These selected quotes, from highly involved participants, were not analyzed for core themes, but instead are to showcase the value of the Affinity Group program.

Results:

SME Leader Feedback Findings

After analysis of the SME leader findings, 6 main themes were identified (Table 1). These themes were disseminated to SME leaders through a presentation at a virtual meet-up in November 2021 and were described in a brief synopsis document (Appendix E & F). Below are the themes that surfaced through the SME leaders’ responses of their participation in Affinity Groups. These themes were highlighted as they were the most compelling to capture an extensive array of insights from leaders, and they describe the strengths and limitations to program activities and organization.

Theme 1: Meeting Logistics and Group Size

A common theme pulled from the feedback was there was not enough dedicated time during scheduled meetings to have meaningful discussions on multi-sector work (1.1). During the pilot of the Affinity Groups, meetings were held four to six times and lasted around one hour. One individual believed that the one-hour format worked for their group (1.3)

A few SME leaders believed it would be beneficial to hold meetings less frequently but have them be two to three hours in length, so participants could further explore challenges and work with one another to come up with potential solutions if applicable (1.2). One of the primary program goals for Affinity Groups is learning through semi-structured space to collectively problem solve, so participants feel they need adequate time to share and connect with each other.

Table 1:

Theme 1: Meeting Logistics and Group Size
<p>1.1 I wonder about whether six sessions of one hour each might pose difficulties to get into complex topics, and whether a smaller number of longer sessions might be appropriate.</p> <p>1.2 It’s also difficult to get into these complex issues meaningfully in an hour. Part of me does wonder if like three sessions of two hours each might get farther than six sessions of an hour. each time we didn’t really delve into the issues until 10 min in and then we have to be wrapping up 5 min out.</p> <p>1.3 I think one hour was the perfect amount of time to discuss a topic, problem solve and report out. We generally allotted 30 minutes for breakout sessions which I felt the participants really benefited from.</p>

Theme 2: Engagement Within and Outside of Sessions

One goal the All In network focused on was supporting participants to increase their engagement from a low or medium level to a high level through activities, guest speakers, and networking with other participants. During the first session, SME leaders created an agenda with participants to establish group norms and learning objectives and SME leaders were to review them at the beginning of each session onward. Most of the SME leaders stated that participants were engaged through discussion and provided thoughtful dialogue at each session (2.1). One SME leader wanted to emphasize that the meetings were member-led, allowing for participants to amplify their discussions (2.2)

Although there was significant engagement during sessions, leaders felt there was not enough engagement outside of the sessions (2.3). Some SME leaders gave assignments outside of sessions, so members could follow up and reflect outside of sessions, but this was not a requirement. A few SME leaders did provide optional office hours to discuss their work, which could be a useful method for participants to increase engagement. Although outside engagement was not a requirement for group members, it can be an effective method to continue participant-led learning.

Table 2:

Theme 2: Engagement Within and Outside of Sessions
<p>Quote(s):</p> <p>2.1 Participants felt highly engaged in the activities. Conversation within the group felt very free-flowing and open, and it wasn't necessary to push members to participate.</p> <p>2.2 I found it helpful to review the learning objectives and orientation of the group at the beginning of each session, emphasizing the member-led nature of the groups.</p> <p>2.3 If we could really figure out how to get people working together outside of the sessions, so that we could be reviewing work during the sessions, that might be another way to make a 1 hour format work.</p>

Theme 3: Multiple Methods for Engagement

Affinity Groups were participant-led, and SME leaders facilitated activities during sessions to enhance learning. Outside speakers were invited to share their relevant lived experiences, allowing participants to get some insight into problem solving when working with community members and organizations (3.1). SME leaders engaged participants by using examples from fellow community members to reflect on topics throughout the sessions. Since Affinity Groups were conducted virtually to accommodate the COVID-19 pandemic, SME leaders were creative using virtual tools to further foster engagement among members (3.2). These modes of engagement provided new methods to have meaningful discussions and engender creativity. Other SME leaders described using the Consultancy Challenge activity, in which participants engage in collective problem solving and teamwork skills using real world challenges. Another group mentioned they did not use it but thought it would work well as a good foundation for discussion.

Table 3:

Theme 3: Multiple Methods for Engagement
<p>Quote(s):</p> <p>3.1 After the second session we decided to add in a real person. I think that was very helpful and useful for them. Heard that it gave them new ideas and considerations that they had not thought of.</p> <p>3.2 We used different types of activities in the wrap up sessions such as word clouds, Jam boards, and sticky notes to keep our participants engaged as well as provide a visual display of information presented.</p>

Theme 4: Involvement of Support Staff

SME leaders were pleased with the additional help from staff members. They provided the technical support that SME leaders needed to keep Affinity Groups running (4.1, 4.2). Staff members assisted with the planning of meeting agendas, sending reminders and their guidance on successes and improvements was supportive to the leaders. Support staff continuously provide the SME leaders with resources to achieve the objectives of the program.

Table 4:

Theme 4: Involvement of Support Staff
<p>Quote(s):</p> <p>4.1 The All In team was fantastic! You gave us the room to be creative and supported our efforts throughout. We literally couldn't have done it without you!</p> <p>4.2 All In support was critical in scheduling meetings, sending reminders to attendees, and coordinating logistics. Additionally, I very much appreciated staff assistance planning meeting agendas and flow, particularly at the outset of the work.</p>

Theme 5: Varying Engagement in the Online Community

Each Affinity Group had space to connect with their group members using the Online Community, an optional interactive platform for networking with other All In members. Members can share news and resources, learn about best practices, upcoming events, and funding opportunities. The Online Community offers an open forum, in which individuals can post announcements and share resources. The platform had forums dedicated to each of the eight Affinity Groups, where participants were encouraged to use the space to connect outside of meetings, but SME leaders felt that it was difficult to get participants to use it (5.1).

Another SME leader hoped they could get their participants to use the Online Community between sessions and even used their own virtual methods, such as Google Groups, to encourage participation. Despite these efforts, SME leaders felt that participants did not maintain their use of the Online Community (5.2). SME leaders wanted the conversations occurring on the platform to be meaningful and believed there should be more guidance for participants about posting. An analysis was conducted to understand engagement within each group on the Online Community.

I reviewed the number of participants and posts that were being shared. For most groups, there was little engagement between participants, except for the “Developing Meaningful Measures by Centering Community Voice” group, with 48 posts (5.3).

Table 5:

Theme 5: Varying Engagement in the Online Community
<p>Quote(s):</p> <p>5.1 The online forum was challenging in trying to encourage participants to sign up. If there was a way to automatically enroll the participants into the forum, that may help increase discussion on the platform.</p> <p>5.2 I wish that we could have fostered better use of the online network to support our connection between meetings, but we didn’t quite seem to find the right way to nurture the community. Our early failure with us managing the google group created quite a bit of confusion as well.</p> <p>5.3 The participants were very engaged in discussion, and we had some great activity in the online forum also. Some participant feedback came in through the online forum.</p>

Theme 6: Success in Meeting Learning Goals

Of the SME leaders, five agreed that their group accomplished their learning goals (6.1, 6.3, 6.4, 6.5, 6.6). One SME leader described that using multiple stakeholders throughout the program helped participants understand the learning goals (6.1)

Each Affinity Group had three learning goals, except the “United Way & 2-1-1” which had nine. SME leaders were asked initially to outline the group’s goals, so participants had a general understanding of what to expect. SME leaders then built these goals around common issues experienced by members of the group as they resolve challenges in their work. The goals for each group depended on the given topic, but some examples included learning about different approaches to using data, how to build trusting relationships with community members, and how different equitable strategies can be applied to communities while mitigating risks of harm. Leaders mentioned how the combination of frameworks, guest speakers, and strong examples of partnership led to the group's achievement in meeting the goals.

Other SME leaders were unsure if the learning goals were met because there was not enough post-assessment data collected, but still believed their group met a few goals. In the “Developing Meaningful Measures by Centering Community Voice” group, their second learning goal was getting practitioners and partners to learn how to co-create measurements with individuals with lived experiences to better understand what types of data collected, what should be measured and how to use findings (6.2). Another SME leader felt that towards the end of the program, their group gained momentum, but believed that it was hard to judge if it met the goals. It’s important to note that these quotes were captured before the program evaluation was conducted, so this report will be disseminated to members of All In and various stakeholders, so they can better understand how Affinity Groups met the learning goals.

Table 6:

Theme 6: Success in Meeting Learning Goals
<p>Quote(s):</p> <p>6.1 I think our group was successful in meeting the objectives by providing a combination of subject matter expertise as the facilitators while also utilizing the variety of expertise within the group.</p> <p>6.2 Objective two may have been a bit lofty for a time limited Affinity group. Practitioners and partners need more than the time in this Affinity Group to learn how to co create measures that meet all of the intentions we included in objective two.</p> <p>6.3 I think we met our objectives – participants had the opportunity to think and talk through the role of data dashboards, what works and what doesn't design wise, talk data literacy and sustainability.</p> <p>6.4 The group met its objectives, and the meetings were very successful.</p> <p>6.5 The intersection between housing and health care has never been more active and alive, and this really showed in the great attendance of our Affinity Group meetings.</p> <p>6.6 “I think we met objectives one and three. We had a good combination of persons with lived experience and professionals present ideas, frameworks, and strong examples of partnership in measure development.”</p>

Support Staff Assessment Findings

The support staff survey was sent to five staff members and four completed it. The survey was used to gather information about how many hours support staff worked on the program and through which modalities they supported SME leaders and members such as creating communications, organizing meetings, or scheduling meetings. Staff members spent more time preparing to launch meetings, preparing for the last meeting, and wrapping up the pilot, than maintaining the groups throughout the sessions. One staff member described how much time and support it takes to assist with the groups. The staff member quoted the following:

“I think one thing to lift up here is that supporting SMEs and the affinity groups is an ongoing continuous job. It encompasses highs and lows as it relates to staff capacity. Some days I may take a good chunk of the day to send and respond to emails, upload materials to the OC, merging presentations, updating rosters, coordinating with SMEs, etc. For the DASH staff, we were doing this on top of several full fledged projects”.

When asked if they found the All In Online community useful for facilitating peer networking and engagement, most staff said they did not find it helpful. They said that support staff and SME leaders were the main individuals posting materials, rather than the participants themselves as it was difficult to get participants to buy into the platform. Another support staff member felt that participants did not want another platform to commit to and connect outside of the groups. Although one staff member pointed out the Online Community was beneficial:

“The All In Online Community came in handy for those who could not attend the sessions. They could follow the entire group through recordings and materials shared during the sessions”.

Even though participants had access to video recordings, when the Vimeo (2022) account was reviewed for usage, I found that for each Affinity Group recordings, five out of eight groups had zero view counts for each video recording. Two Affinity Groups had view counts per video but were all less than 10 views. One of the Affinity Groups did not have any records available.

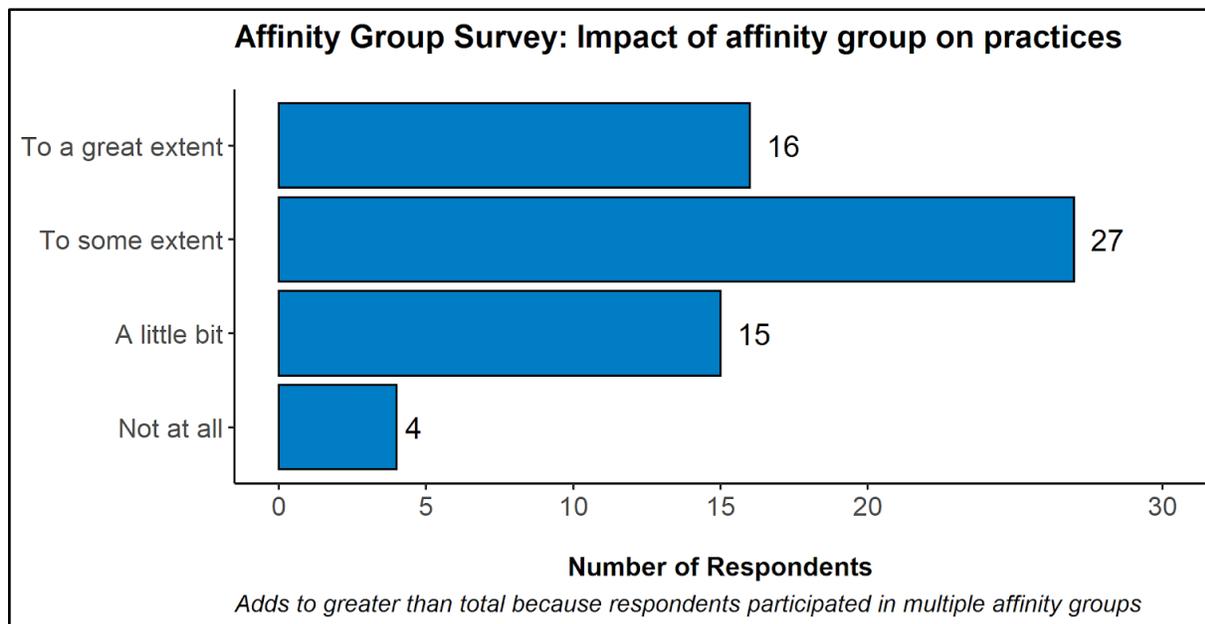
Staff members were asked if they felt engagement occurred within meetings and outside of meetings. Like SME leaders, they agreed there was strong engagement between participants during the sessions but felt that participants did not engage with one another outside meetings and in different All In programming. A few SME leaders offered office hours as another method of engagement outside of the scheduled sessions, which one staff member describes:

“I saw some participants actively responding to emails from the SME leader. I also know that some participants attended the SME leader's open hours. Aside from that I don't think there was much connecting”.

One staff member described that in their Affinity Group, participants were very engaged during sessions as it was a small core group but were unsure if they connected outside of virtual meetings. Similar to the SME leader findings, staff found there to be less interaction between participants, but wanted to see how it could be improved in the future rounds of Affinity Groups.

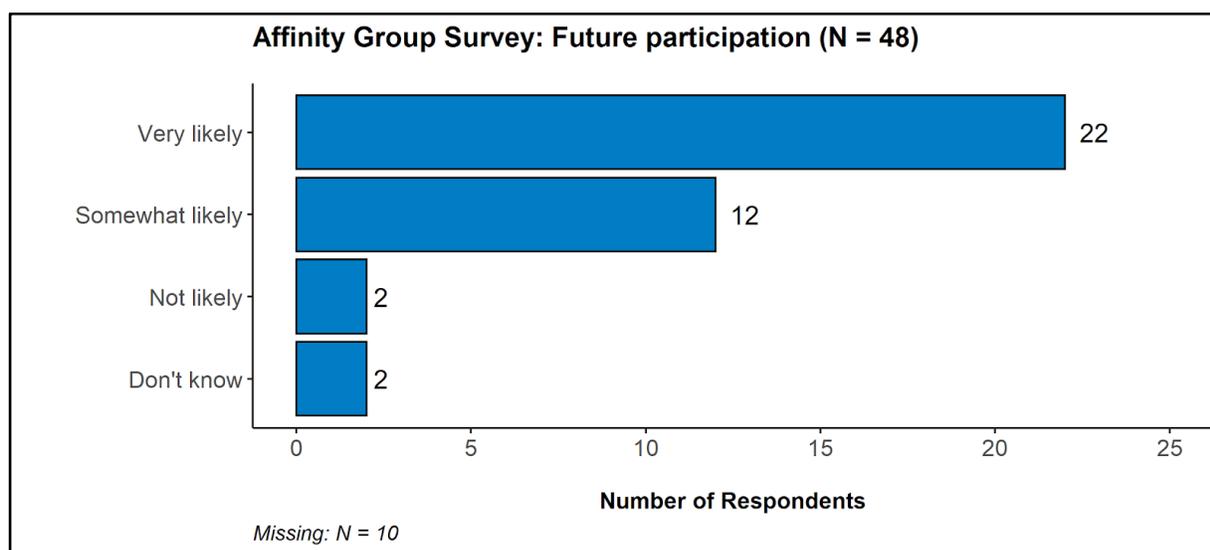
Participant Survey Findings

48 participants out of 271 (18%) completed the post-Affinity Group survey (Appendix G). Of the 48 individuals who responded, 37 (77%) attended more than one meeting. Each Affinity Groups had established three learning goals, and from six of the eight groups, at least 50% of participants rated that the three objectives were useful to some extent or to a great extent. For four of the groups, at least 70% of participants rated the three objectives as useful, to some extent, or to a great extent. In relation to how the Affinity Group project would influence participants data related practices, 69% of responses indicated the groups did to some extent or a great extent.



How participation influenced their data-related practices

Participants were asked whether equity concepts were integrated into their Affinity Groups sessions and 61% said that they were to some extent or a great extent. Some ways these equity concepts were incorporated were through using toolkits, sharing resources from BIPOC authors, and having the opportunities to engage with persons with lived experiences who faced inequities when developing materials. One goal of Affinity Groups is to network and share topics of interest with others in the All In network. Over half of the participants said that through the program they made connections to a great extent. By creating these connections, participants can have guidance when working on multi-sector issues from their peers and share resources with one another. Participants were asked if they would join the Affinity Groups again and 89% said they would be somewhat or very likely to participate in a future Affinity Group.



Respondents' likelihood to participate in future Affinity Groups

To capture how participants felt about the overall structure, activities, and value of peer-to-peer learning, I asked a total of 69 individuals to share a quote or video clip describing their experience. These requested quotes and highlights were from varying practitioners, program managers and partners at All In across the U.S. Overall, we received five curated quotes and one video recording describing what Affinity Groups meant to them, how the space allowed them to problem solve, and in what ways the program allowed them to strengthen the work they do outside of All In (Appendix D).

One of the Affinity Groups was specifically for representatives involved with the organizations United Way & 2-1-1. The purpose was to strengthen partnerships, clarify member roles and establish a community of practice engaged in data sharing collaboratives. United Way supports 2-1-1, which is a national network providing services and information for individuals looking for help with housing, food, transportation, and health care. One individual described how the impact of participating in the United Way & 2-1-1 Affinity Group had on their ability to connect with other members to enhance their own work:

“The Affinity groups have been extremely impactful for me because it allowed an opportunity to connect with like-minded leaders across the US. It also provided a safe space to share issues, successes and gain insight from others who are doing the work within 211's, United Way's and other community agencies. I appreciated the ability to learn and connect with others because my previous experience was not coming from another 211 when I took the leadership role in MD. I was able to learn from those on the ground and with many years of experience to pull on with all my crazy ideas!”
- Quinton Askew, CEO/President, 211 Maryland

The Robert Wood Johnson Foundation (RWJF) and The Pew Charitable Trusts collaborated on the Health Impact Project: Calling All Sectors Initiative, which is a national initiative to include health considerations in policy decisions across sectors such as housing, transportation, and education. The project supports technical and financial assistance and training through identifying practices and research that promotes health that is integrated into organizations and governments. A fellow Affinity Group participant, who serves as a Senior Manager for the Health Impact Project, described the value of the collaboration through the leadership of the RWJF and The Pew Charitable Trusts:

“I receive All In's weekly consolidated digest and regularly search the open forum online community to access relevant resources, tools, and insights. I also participated in two Affinity Groups which provided access to subject matter experts who guided participants through focused content and peer learning and technical assistance opportunities. For example, I was able to present a challenge from our work for Affinity Group members to weigh in on, providing insights, resources, and strategies. Easy access to a broad network of initiatives actively engaged in multi-sector collaborations of organizations, community members, local and state government agencies and other stakeholders working together to improve health and well-being through data sharing has truly been invaluable for our

work.” -Maura Dwyer, Senior Manager, The Pew Charitable Trusts

A few DASH staff members who supported Affinity Groups also had the opportunity to participate in the groups. Staff members mentioned how Affinity Groups gave them the platform to learn new topics around data sharing outside of their own work. The “Reimagining Technology” Affinity Group explored how communities could use their relationship with systems for social care coordination and implement equitable strategies. One staff member who attended sessions of this Affinity Group quoted the following:

“The Reimagining Technology Affinity Group was truly engaging and utilized very cool innovative approaches to tackling tough concepts in a virtual environment. The Subject Matter Experts (SMEs) took their time to really dig deep into topics like governance, data standards, and trust! These are things that I often don’t learn about, as the founder of a community-based organization. I have now been able to reinforce the importance of building community agency into the development of community plans through shared resources and data equity.”

-Natrina Kennedy, Former Program Manager, DASH

Recommendations:

Based on the CDC’s Framework for Program Evaluation in Public Health, step five is to justify the conclusions based on the findings by creating a set of recommendations for action (Milstein & Wetterhall, 1999). The recommendations below will continue to expand and redesign the Affinity Group program. These recommendations were developed by analyzing the findings of this evaluation and will describe suitable solutions that the All In Program can accomplish by further expanding the Affinity Group program. I consulted with All In staff members to gain insight into whether these recommendations would be feasible and which individual members could take on the responsibility of leading them towards actionable goals. In terms of feasibility of implementing these recommendations, All In has the capacity to provide funding, staff members, and a large network of partners to expand the pilot phase of the Affinity Group program into a larger project. These recommendations will range from operational suggestions, such as adjusting the structure of the program, and long term goals for future iterations. All In could test the effectiveness of these recommendations by piloting each one to have a better perception of whether they were able to correct any issues that occurred in the first round of Affinity Groups. By using these recommendations, All In can create new initiatives to further support multi-sector work and individuals working in these shared spaces, thereby helping advance the field of public health.

1. *Experiment with the duration of meetings and group sizes of Affinity Group sessions*
 - a. Many of the SME leaders voiced in their feedback forms that they would prefer to have longer sessions that occurred less frequently because they wanted more time to be able to discuss their selected topics and have more valuable conversations. The findings also showed that some SME leaders found that smaller group sizes led to better attendance. The All In team should consider implementing different lengths for meeting times ranging from one to two hours for different groups.

Most of the Affinity Group sessions are divided into a meeting type, such as being either discussion-based or curriculum-based. For discussion-based meetings, they could have a longer window of time to allow for more collaborative discussion on the given topic. For the curriculum based groups, meetings may differ in length based on the content participants are learning in one session, which then could be applied to discussions in the following session. If the All In team were to pilot varying meeting lengths, they should strategically decide which Affinity Groups would be most appropriate for longer or shorter meetings. To control for the group size and continuous attendance, one consideration is having an Affinity Group for which future members apply to join, to further stimulate discussions. By doing this, it will allow SME leaders with interest in facilitating small groups to participate, and All In staff can limit the number of participants enrolled. Staff can gather feedback from SME leaders about who is interested in leading the group and what Affinity Group topic should be chosen. All In Staff can evaluate the progress of the longer sessions or groups that require membership to see if they are meeting their agreed upon objectives and are using the extra time effectively.

2. *Increasing opportunities for Affinity Group participants to attend other All In Initiatives*
 - a. This recommendation is based on SME leaders and staff reporting a lack of engagement outside of the Affinity Group sessions. Affinity Group members should be informed about opportunities for engagement outside of their sessions and should have the space to connect with others who are involved in other All In projects if desired. Participants should be aware of how their learning goals can be enriched through different offerings from All In. This can be achieved by providing members free access to different programming offered by All In such as the National Meeting or increasing opportunities for connections such as having all Affinity Groups members come together to have a large group session. The National Meeting requires a registration fee for those who would like to attend. For participants who were highly engaged and attended a certain number of Affinity Group sessions, All In should consider reaching out to these participants Group members and offer them free registration. By adding an extra opportunity for engagement, participants can connect with other Affinity Group members or interact with speakers of their interest. The other method All In staff should consider is having cross-over sessions between different Affinity Groups. Some participants have joined multiple Affinity Groups, but not all have the opportunity to co-learn together. The All In team should consider having a distinct session involving all groups that addresses common themes, such as learning about how to solve issues in data sharing. This will provide members the opportunity to engage with others who are not in their assigned Affinity Groups and to share their experiences. This recommendation can be led by the All In team and they can collaborate with SME leaders to develop the necessary materials for the collaborative sessions and discuss which themes will be deemed useful.

3. *Creating a Listserv for All Affinity Group Stakeholders to be notified of All In events and updates*
 - a. One technical recommendation All In should establish is the use of a listserv for mailing out information to Affinity Group participants, SME leaders and staff. The purpose of creating this listserv is to share events hosted by All In, such as webinars or the National meeting, highlight the work of Affinity Groups, and share valuable resources that can be utilized by members. It would be a collective method for disseminating information, so all stakeholders receive it at once. As mentioned in the SME leader findings, it was difficult to get participants to sign up for the All In Online Community, so the use of a listserv can be a potential resource for members to highlight the progress of each group. The listserv would not replace the Online Community, but participants, SME leaders and staff can receive a quick overview as to what other groups are involved in and get updates on their progress.

4. *Hold a Kickoff meeting for Affinity Group Participants*
 - a. To encourage engagement prior to Affinity Group sessions beginning, All In should host a kickoff meeting exclusively for participants. For the beginning of the pilot phase in 2021, SME leaders attended a kickoff meeting with All In staff to become better equipped with facilitating their groups and discussed their expectations, but there was no meeting for all participants who showed interest in attending and for those who would likely participate. For the next round of Affinity Groups, All In staff should host a meeting or kick off celebration to highlight the different groups, introduce SME leaders, and have break out rooms so that participants from different groups can network with others. This meeting can be a space to inform participants about the Online Community, describe its purpose, and demonstrate how to use it. Staff could inform participants of webinars and highlight what the purpose of the National Meeting. All In staff can also define the expectations for attending groups and what experiences they would like to get out of their discussions. Staff can also discuss what previous resources or projects past participants have worked on in the pilot phase and what work can be further continued by new members. Hosting an initial meeting for participants will help orient them to the objectives of the program and describe how the All In network can further their work in multi-sector collaborations.

Limitations:

Most of the limitations of this report relate to small sample sizes for the instruments used. For the support staff survey, the five staff members who assisted groups were asked to complete the survey and only four responses were received. Although only a total of five staff were involved in supporting the pilot program of Affinity Groups, these findings may not fully represent which tasks were completed. It may not showcase all parts of the program they found to be beneficial to participants, as compared to a large-scale version of the program with more staff members. The other limitation with the participant post Affinity Group survey was the number of respondents. The survey was sent out to a total of 271 participants and only 48 (18%) completed it. The low response rate could be related to significant attrition observed over the

course of the program and may affect the generalizability of the evaluation as there could be a difference in reflections shared with a larger sample size. This could be related to COVID-19 restrictions being lifted and more participants having to shift their responsibilities, hindering their ability to attend meetings toward the program's end. Participants could have faced virtual fatigue from attending online sessions during this time, contributing to the low response rate.

Conclusion:

The pilot phase of the All In Affinity Group program strived to connect SME leaders and participants to further educate them about one of eight topics related to multi-sector collaborations and connecting shared data systems to advance public health. At the end of the pilot phase, instruments used to collect viewpoints from SME leaders, staff, and participants helped determine that peer-to-peer learning is a valuable method in this type of setting, as stakeholders from organizations can come together to discuss similar issues across the nation. With the help of All In collaborators, the Affinity Groups can be heightened into a well-grounded program by considering these recommendations. These recommendations will benefit the work of SME leaders and staff, which will yield further advancements of the work participants are conducting as they engage with national multi-level organizations and communities to achieve health equity by exploring sustainable solutions.

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Appendices

1. Appendix A: All In Affinity Group SME Leader Feedback Form

<https://docs.google.com/document/d/1OCsIJ0jNIRqQKaPU7Peja8VXDPAXII8IO-mHHDPO1hU/edit?usp=sharing>

2. Appendix B: All In Affinity Group Staff Assessment Template

<https://docs.google.com/document/d/1dbMqOvXD6XaFB0NgoTR2Xy2yohaV75TBnnUs-hrPRs/edit?usp=sharing>

3. Appendix C: All In Affinity Group Experiences Survey

<https://docs.google.com/document/d/1sYcbduRk3PJ0RVtWIMF89IDr8MGrbz8x/edit?usp=sharing&oid=110112519544814121805&rtpof=true&sd=true>

4. Appendix D: Affinity Group Member Selected Quotes

https://docs.google.com/document/d/1bCytu3d_4IR9TK8YMuNdJzOrpmMr46ogDupwGCco288/edit?usp=sharing

5. Appendix E: Affinity Group SME Leader Highlights PowerPoint

https://docs.google.com/presentation/d/1lIB4KbS-aBzCXvqk_TRwoFIrjnLmSQWZ/edit?usp=sharing&oid=110112519544814121805&rtpof=true&sd=true

6. Appendix F: Affinity Group SME Leader Evaluation: 10 Highlights

<https://docs.google.com/document/d/1Id1s0mkJ5hFatjk0X9W4p9usZd211eQmySUDyQ8o5RM/edit?usp=sharing>

7. Appendix G: Affinity Group Participant Post-Assessment Survey

<https://docs.google.com/presentation/d/1iPXRv9Lc1mHHvRdbbaUYcLkmu6N-32i2/edit?usp=sharing&oid=110112519544814121805&rtpof=true&sd=true>