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Feature
Building Cities' Collaborative Muscle

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 The most pressing social problems facing cities today require multiagency and cross-sector solutions. We offer tools and techniques to facilitate the process of diagnosing and solving problems by breaking down silos to build up cities.

Building Cities' Collaborative Muscle

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Illustration by Mark Harris

In the summer of 2018, Mayor Naheed Nenshi of Calgary, Canada, decided to make mental health and addiction the cornerstone of his third term. Like many cities in North America, Calgary was experiencing a mental health crisis. The stigmas surrounding mental illness made people reluctant to access help, and addiction was a serious and growing problem. Opioids were wreaking havoc, and the city was averaging three to five overdose deaths per week.

Mayor Nenshi did not have formal authority over the health-care system, but he did have the power to convene public, for-profit, and nonprofit actors. Coordinating these entities, however, to work together across boundaries—spanning departments, organizations, and even sectors—to produce a lasting solution would take a lot of time and effort. He had to find a way to initiate and accelerate a complex collaboration to save lives.

The mayor appointed his community relations coordinator, Nancy Close, to head a team to create a comprehensive, person-centered strategy on mental health and addictions in Calgary. To ensure a range of perspectives, the mayor and Close invited representatives from United Way of Calgary and Area, Calgary Homeless Foundation, the provincial Alberta Health Services, the police department, and Calgary Neighborhoods—the city's business unit tasked with addressing social needs. They also invited a community advocate

who had shared the story of her late husband's struggles with mental illness and addiction in an effort to raise awareness and improve outcomes for people in similar situations.

The members initially felt overwhelmed by the task. Not only did they have to gather and analyze information about the intricacies of this problem, but they also needed to map the existing, highly

fragmented response to determine where, how, and why it was ineffective. The provincial government, the city government, nonprofits, and private-sector parties each offered an array of services, but little alignment existed among them. Most organizations focused on a specific part of the problem (addiction, mental illness, homelessness), served a particular group (youth, First Nations people, veterans), or focused on a particular type of service or intervention (prevention, shelter, treatment).

As the conversation continued, progress seemed increasingly elusive. Because efforts were fragmented, members struggled to determine whether the patchwork of organizations and their combined portfolio of services had the appropriate scale and scope to reduce opioid deaths and address the systemic issues related to mental health and addiction. They also faced difficulty in determining what types of interventions were most helpful to the individuals most at risk. Furthermore, the team suspected that the services were not sufficiently integrated, so the interventions were not as effective as they could be. Finally, it was impossible to determine whether the funders had allocated resources in the most effective, efficient, and equitable way.

City leaders around the world face the same challenge as Mayor Nenshi: how to tackle urgent, highly visible problems that emerge from larger, intractable social conditions. Dealing with such problems requires cities to engage in multistakeholder collaboration across

departments, agencies, and sectors. And for combined efforts to meet a community challenge, teams must coordinate, converge, and align—itself a formidable challenge.

While city halls have the power to convene, they typically have few resources to deploy because of strapped budgets and limited authority to mandate collaboration, especially in cases where the jurisdictional lines from different levels of government limit local discretion. Municipal leaders recognize the need for cross-boundary collaboration, but they do not know the best ways to build and sustain it.

The question of how to collaborate across boundaries admits no easy, universal answer. There are, however, striking similarities between the types of challenges that different collaborations face. From 2018 to 2020, the authors of this article—researchers from the Harvard Business School and the Harvard Kennedy School, working on the Bloomberg Harvard City Leadership Initiative—worked with 30 cross-boundary collaborations from cities in the United States, Canada, Iceland, and the United Kingdom. Each year, we convened 10 cross-boundary teams in New York City and facilitated sessions to help them reflect on their goals, theories of change, and capacity for collaboration. Afterward, we monitored their progress and examined their barriers and breakthroughs. Using interviews, surveys, group exercises, and direct observation, we gained a deeper understanding of what helps and hinders collaboration.

One takeaway became abundantly clear: Building collaborative capacity requires repeated practice, constant care, and iterative evaluation of progress and goals. Like fitness, it requires dedicated time to warm up and cool down, and equipment that helps stretch the right muscle groups. In this article, we present a process and a set of tools to train the “collaboration muscle,” using the team from Calgary with whom we worked in our case study. This process involves a diagnostic exercise and a ranking exercise that allow leaders collaborating across boundaries to understand both the enablers of and the barriers to their success.

COLLABORATION IN CITIES

We are interested in cross-boundary collaborations at the local level, because city governments rely heavily on the practice. Municipal governments alone rarely have the authority, resources, and expertise they need to tackle the problems they are expected to solve, so they must work in partnership with others.

Collaborations vary in composition, function, and structure. In terms of composition, they range from public-sector collaborations to public-private partnerships to collective-impact models. Functionally, collaborations range from high-level, strategic alliances focused on exchanging ideas and shaping policy to carefully constructed operational partnerships with integrated working processes. Structurally, some collaborations are decentralized networks, while others take on a hub-spoke configuration, in which one party takes the lead. Still others have a backbone organization supporting the collaboration.¹

While cross-boundary collaboration has received critical attention, it remains understudied; there is little evidence that one particular approach performs better than another. However, some scholars have reflected on how certain characteristics of collaborative arrangements might predict their effectiveness.²

Whereas the literature on governance examines the function and structure of cross-boundary collaboration, organizational-behavior

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literature highlights the role of team dynamics. This body of research offers insights on the critical conditions for team performance—for example, team design and team launch have greater effects on a team’s ultimate performance than ongoing team management does. Researchers have found that careful, early-stage attention to team composition, goal setting, working processes, role division, and communication is likely to pay off later, while diving into the work without this preparation dramatically increases the chances of failure.³

Team-effectiveness literature has focused mainly on relatively well-structured teams that are stable over time and have clear boundaries. Over the past decade, more research has considered “teaming” across boundaries, which focuses on the work people do in more fluid organizational structures, over a limited period of time, with diverse groups of people representing different organizations.⁴

A team of governance scholars (including one of this article’s co-authors, Jorrit de Jong) who studied multidisciplinary crimefighting collaborations found that individuals in cross-boundary teams struggled with a fundamental paradox: They are expected to represent the perspective of their organization and at the same time to reimagine the problem with the collaborative group.⁵ This dynamic leads to three challenges. First, such individuals need to align their perspective on the substance of the problem-solving effort: What is the problem, and how can we solve it together? Second, they need to address the accountability challenges that emerge when members are committed to the collaborative effort on the one hand but report to their superiors in their silos on the other. Third, they have to invest in a shared language, mutual understanding of perspectives, and trust.

These challenges can be formidable but are not always understood as such by the group. Experiencing these challenges without knowing how to address and overcome them can be stressful to members and can inhibit team progress. Fortunately, there are ways to support cross-boundary collaborations struggling with these challenges. A team of scholars at Johns Hopkins University and Harvard University, for example, found that diverse, cross-boundary groups in the health-care sector were more effective when they adopted

practices associated with joint problem-solving.⁶ These successful teams invited one another to problem-solve, asked one another how to break through barriers when they felt stuck, and offered one another resources and ideas to help make progress.

Combining the insights from governance literature and organizational-behavior and public-management theory brings the characteristics of cross-boundary collaboration into stark relief: Early attention to team composition, goal setting, working process, role division, and communication pays off later; inherent challenges associated with collaborative problem-solving, accountability, and team process can inhibit team progress significantly; and a learning orientation and joint problem-solving practices are conducive to overcoming these challenges and to driving team performance. We used these insights to design a process to engage with cross-boundary collaborations in cities, presented through the example of the Calgary team trying to find solutions to the opioid crisis.

TWO DIAGNOSTIC EXERCISES

The Calgary team faced two critical tasks: thinking together and acting together. The thinking part required them to integrate different sources of information, reconcile various perspectives on the problem, and design a sound collaborative solution. The acting part required them to function as a group that could mobilize a larger set of actors to execute the new solution. We have found that this work of thinking and acting in a newly formed, diverse group is demanding. It presents many challenges, ranging from building trust to arriving at a shared definition of the problem to securing the necessary resources and support.

To help overcome such barriers, we have developed a process that takes a team through two diagnostic exercises: the strategic triangle for collaborative solutions and the barrier prioritization tool. Each tool is grounded in academic research on public management and the development and use of teams, but we have adapted them specifically to the challenge of managing collaborative initiatives in the public sector and tested them in practice.

THE STRATEGIC TRIANGLE

The strategic triangle was designed originally to help a single public manager with authority over a single organization orient herself toward the critical dimensions of a particular strategic challenge.⁷ This conceptual framework and language also apply to the type of work the teams had been charged with: creating more value for the city's residents by rethinking and reorganizing the collective effort to solve problems.⁸ The framework draws attention to three dimensions of social problem-solving: public value, legitimacy and support, and operational capacity.

Public value refers to the positive social outcomes that a collaboration is pursuing; it is the net improvement in social welfare and justice that each individual—and everyone together—can enjoy if the proposed collaboration is undertaken. But to get to that point, participants must reach some agreement on the problematic social condition they are addressing and on what collectively needs to be done to ameliorate or permanently resolve the problem.

The dimension of *legitimacy and support* refers to the formal authorization, financial resources, and overall social and public political support needed to launch and sustain the effort at scale.

Whose permission is required? Which actors could provide the necessary legal, financial, social, and political support? Who are the allies in this process, and who are the opponents or fence sitters? Exploring the different dimensions of value at stake helps identify the actors whose authorization, financing, and approval will be required, and whose opposition will need to be accommodated or otherwise managed.

Operational capacity refers to the changes that need to occur in the existing operational approach to the problem. Presumably, this effort requires not only sustaining, scaling, and refocusing old operations but also creating new capacities that did not previously exist—at least, not in the local environment.

The strategic triangle sets out simple logic for both thinking and acting to design and execute a collaborative initiative: Identify the public value to be achieved, develop an idea about how the value can be realized, build the legitimacy and support for launching that effort, and build the operational capacity to get it done. But simple logic doesn't mean simple practice. In fact, meeting the logical demands of the strategic triangle requires gathering and sharing extensive information, dealing with disagreements about facts and values, and applying creative ideas and constructive negotiations to make progress.

The Calgary team discovered, as did many other teams, that using the strategic triangle at the outset increased, rather than reduced, the number of contentious issues the group faced. At the same time, the tool had usefully surfaced a large number of hidden and unspoken differences within the group about the problem. While they remained hopeful after the first meeting, they worried that the group might not be able to get past their different perceptions of the problem and effective methods for improving it. The group suffered friction. Some differences, including what to focus on, whom to include on the team, and how to engage with their respective organizations, seemed hard to overcome.

The Calgary team wondered how they could begin to solve the problems of addiction and mental illness in their community if they weren't able to solve their own problems in working together. To successfully design an action plan for Calgary that would rise to the challenge Mayor Nenshi had set, they needed to become a more productive team and overcome the barriers to engaging in constructive collaboration. The triangle may have laid bare contentious issues, but it also clarified where the group needed to make progress.

BARRIERS TO COLLABORATION

The struggle to develop an actionable collaborative strategy can sink an effort before it even gets started. Groups attempting to develop a shared diagnosis of a problem and a clear path forward often feel as though they are making little progress and wasting time. Participants sense that the collaboration is stagnating, but they cannot pinpoint the cause. Conversations sometimes even cause the situation to deteriorate.

Naming the barriers and preparing for them can help prevent collaborative failure. Across the 30 efforts we studied, we observed 15 common barriers to cross-boundary collaboration. We explain each within the context of our Calgary case study.

- Two barriers are associated with misalignment on public value:
- *Disagreement on what the problem is* | The Calgary team knew the mayor's mandate regarding substance abuse, but they were unsure just how many underlying factors and related

problems—such as homelessness, mental illness, and unemployment—they were supposed to include in the scope of their work.

- *Disagreement on the outcomes* | The team members in Calgary also had varying definitions of success, which ranged from improving awareness of the problem to coordinating the delivery of services to improving mental health.

Two barriers concern misalignment on legitimacy and support:

- *Struggle to get on board the parties who lend legitimacy* | When the city of Calgary started thinking about support, the team soon realized that they were not sure whether they had buy-in from the community, let alone political or financial support from their authorizing environment.
- *Securing the required resources from each party* | While assessing who their allies were, the Calgary team realized that the misalignment of strategies amounted to an overall misallocation of resources. The city's entire social sector was working hard but failing to make progress collectively. Yet asking parties to contribute more of their already maxed-out capacities was difficult.

We observed five barriers associated with misalignment on operational capacity:

- *Disagreement about how to accomplish the objective* | This was a dual challenge for the team. They needed to figure out how to assemble the capacity to make progress as a team to come up with a plan. They had knowledge and expertise but little time and no budget to take on more work. Even more daunting was the challenge to reimagine the capacity necessary to implement the plan and enable the extended network of organizations to work together.
- *Struggle to devise a workable plan* | Given the time constraints, the members of the team were not clear on when they would have the space to develop an action plan and who should be included in these conversations. As for the capacity needed for the extended network to execute the plan, they needed many more conversations with the organizations involved to figure out how they would work together.
- *Problems holding parties accountable* | Even if a team agrees on a plan, this does not guarantee that members will follow it. Some Calgary participants suspected that holding everyone accountable for doing their part in the absence of an action plan would be difficult. Would everyone on the team follow through, despite the fact that they had not yet fleshed out a plan? Secondly, would the extended network of organizations buy into the plan and actually deliver on their promises?
- *Disagreement about how to understand and measure progress* | In collaborative teams, some members may think that the collaboration is advancing, while others may see no progress at all. Close and her team needed to make sure they aligned on their definition of success before they could think about what progress could look like and how to measure it.
- *Problems with learning and adjusting the plan* | Having an action plan is the beginning, not the end. As plans get implemented, teams need to learn and adjust. The Calgary team was aware of this fact and invested intentionally in an iterative process with fast-pilot projects designed to teach them.

Finally, six barriers existed at the level of the coalition. As teams strive to align the elements of the strategic triangle, they have to overcome obstacles to becoming effective:

- *A lack of the right people* | When the Calgary team started thinking about their coalition, they knew that the current members were competent and had the necessary expertise, but then they started questioning if they had enough of the right people. They wondered whether they themselves or others should represent their organizations on the team, and whether they should bring other stakeholders on board.
- *A lack of trust* | When the members of the Calgary team first met, they had sufficient mutual trust to start working together. As they confronted their differences together, trust gradually increased. They recognized the ability of everyone in the team to both contribute and learn from one another.
- *A lack of clear communication channels* | Newly formed, diverse teams need to establish working processes, meeting schedules, and ways to communicate that work for all. The Calgary team found that the best way to meet was in person on Saturdays.
- *Disagreement on how to make decisions* | At the beginning of the process, Calgary team members were not sure if they even had the authority to make decisions.
- *Disagreement on the division of tasks and responsibilities* | Without an action plan and a clear sense of who would do what, team members had difficulty defining roles and dividing tasks and responsibilities among themselves.
- *Inadequate structures that encourage accountability* | Finally, the different members were not sure if they had the authority to set up the structures to make sure all parties would actually do what they agreed to do.

The Calgary group's experience captures the dynamics we observed in the cross-boundary teams from all 30 cities. Each grappled with a complex cross-boundary issue—from overhauling a transit system to creating an inclusive economic growth strategy, reducing youth unemployment, or delivering universal access to out-of-school programs.

After identifying these 15 common barriers, we set out to devise tools specific to their locations on the strategic triangle in order to help teams diagnose and find solutions to their own challenges.

USING DIAGNOSTIC TOOLS

The tools we developed and present here enable teams to describe and diagnose their own collaborative process and engage in reflective discussions, during which different perspectives arise. Working closely with these teams has allowed us to develop, test, and refine two practical tools that work together and build upon each other. The first is a modified version of the strategic triangle, altered specifically for collaborations: the strategic triangle for collaborative solutions. The barrier prioritization tool then helps the teams to identify and prioritize the obstacles they may encounter as they pursue that approach. Through an iterative process, cross-boundary teams identify, discuss, and work to resolve specific barriers that inhibit them from making progress. We do not claim that these facilitation tools provide easy answers. Rather, they generate the questions necessary to identify and resolve problems and to avoid common pitfalls.

THE STRATEGIC TRIANGLE FOR COLLABORATIVE SOLUTIONS

By mapping the most frequently observed barriers to collaboration onto the strategic triangle, we turned the framework into a purpose-built diagnostic device called the strategic triangle for collaborative solutions. (See “The Strategic Triangle for Collaborative Solutions,” below.) Teams use this tool to outline the tasks that every collaboration must accomplish. Note that the 15 tasks shown in this figure pair with the 15 common barriers we described above. They are not the only tasks collaborations face, but we believe they are the most crucial to forming a collaborative effort. The suggested sequence of tasks reflects an ideal scenario in which parties start with a blank slate and have control over the design of their effort.

Let us start with the “public value” portion. As the Calgary team grappled with multiple definitions and identified their points of misalignment, they were able to articulate a clearer definition of their public value: creating hope and strengthening support for people, families, and communities living with mental health issues and/or addiction. They also came to an agreement on how to start defining success: reduction of stigmas and an increase in education and health.

Next, let us consider “legitimacy and support.” In order to prioritize their efforts and gather the support and resources they needed, the Calgary team discussed the possibility of making a community consultation process one of their first steps.

Finally, when it came to “operational capacity,” the team thought that the most important need might be additional funding. Soon, however, they realized that money was necessary but not sufficient: Information; expertise; and access to clients, communities, communication channels, facilities, and mobile units were all part of operational capacity. Figuring out how to configure and deploy these resources efficiently was an even more challenging question. Doing so required reverse-engineering a robust work plan, from the desired outcomes to the existing, fragmented operational system.

The strategic triangle for collaborative solutions is designed to achieve alignment among the different dimensions. Is everything in

sync, or is something missing? For instance, the collaboration might have a public value proposition, but it may lack the operational capacity to produce results. Or maybe crucial stakeholders are all on board with how to operate, but they disagree on whether people’s needs are being met and whether the public value proposition needs more work. The strategic triangle for collaborative solutions may not make the collaborative work easier, but it promises to make the coalition more effective in the long term. The framework is supposed to be dynamic; revisiting the exercise will help the team to continuously adjust their approach and learn as they navigate a changing environment.

THE BARRIER PRIORITIZATION TOOL

Whereas the strategic triangle for collaborative solutions tool helps to outline a team’s basic tasks and approach, the barrier prioritization tool enables teams to surface lingering issues, prioritize barriers to address, and align around their work. After all, not everyone may see the challenges the same way or give the same weight to a particular barrier. Some team members may struggle with the challenge of reconciling various problem definitions, while others may have a difficult time trusting others. Some teams struggle with obtaining support from their organizations, while others find it difficult to get organized as a group and divide roles and responsibilities. These challenges can manifest concurrently, they can change over time, and they can have a different impact on different members. Therefore, making the challenges explicit and nominating them for discussion is helpful. Through a process of ranking and discussion, teams can work through them.

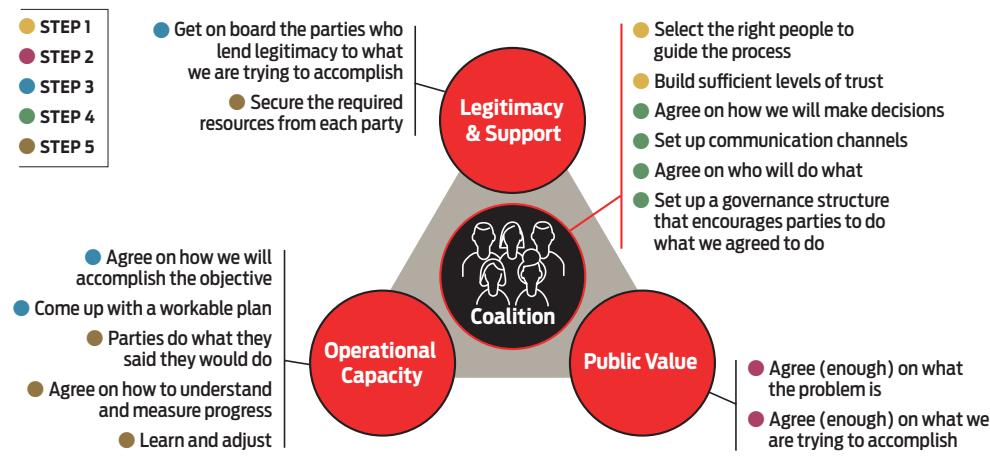
Ranking | We asked each member to consider the 15 collaborative barriers discussed above and to rank them from most to least challenging. We made the process anonymous to gather candid information from participants. We developed both in-person and online versions of this ranking exercise. Once everyone ranked the challenges, a facilitator collected the individual information and aggregated the data in a single graph that showed the most and least challenging barriers, according to the number of team members who ranked them at the top or the bottom of the list.

Discussion | Sharing the ranking results with a team usually triggers discussions among the members of the coalition. In short, the tensions that some have felt but have not named or confronted are on display. Pinpointing the top barriers can elicit some of the most difficult, yet most important, conversations. Furthermore, visualizations of the most and least challenging barriers explicitly depict the team members’ different perceptions.

Observations that this tool reveals spark important conversations within a team. They surface hidden concerns without making them personal, because the voting is anonymous and the data are presented in a larger context of issues. The exercise also normalizes the

The Strategic Triangle for Collaborative Solutions

This tool outlines the tasks that every collaboration must accomplish. The suggested sequence reflects a scenario where parties start with a blank slate and have control over the effort's design.



group's challenges: By codifying barriers, the tool indicates that they are typical for cross-boundary collaborations. Barriers are simply part of the work, not an indication of dysfunction. The exercise helps to identify the group's most pressing issues and acknowledges that not everyone finds the same barriers equally challenging.

Discussing barriers also helps the group to build trust and confidence that they can overcome them, and it validates the team's experience: They are not the only ones struggling; their challenges are a common, if not inevitable, part of the work. Setting some rules for the discussion can be helpful, including requiring that participants ask open questions about the position of others, rather than advocating for their own point of view. Some of the guiding questions that we use to facilitate these conversations are: What was unexpected or interesting about these results? What confirmed your perspective?

ACTIONABLE LESSONS

After we hosted discussions in New York City, the Calgary team established biweekly meetings, beginning in February 2019, to work on the barriers they had identified. The team also decided to open the conversation to include more stakeholders. They created a forum to share their definition of the problem, yet their proposed course of action, and gather feedback from public officials and community leaders. This approach helped them to sharpen their public value proposition, identify barriers, and build support at the same time. In the months that followed, they decided to focus on continuing to build the best coalition that could develop a community-wide strategy. In May 2019, the coalition launched a community listening project to understand and identify gaps in social services, and they convened more than 80 philanthropists to identify ways to work together.

Having strengthened the coalition and articulated their collaborative solution, they secured support and resources to turn ideas into action. In 2019, the city council approved CA\$3 million (US\$2.4 million) for projects designed to promote mental health and prevent addiction through early and/or targeted interventions. In addition, the council approved CA\$1 million (US\$787,000) for fast-pilot projects to find new solutions to mental health and addiction challenges. Different community organizations added CA\$275,000 (US\$217,000) to this effort, which allowed funding for 31 projects in two rounds during 2020. These ventures included mental health tool kits for youth, interpreters for immigrant families to support emotional wellness, stigma-reduction campaigns through peer workers, and a community-wellness desk at the Calgary Public Library.

Through this process, the team grew stronger and their understanding of the problem and of what worked (and what didn't) deepened. The lessons from the pilots became the foundation for the Community Action on Mental Health and Addiction strategy, a comprehensive policy agenda with deep integration of social services, which comprises the city of Calgary, together with the community organizations. The team will present to the city council in 2021.

When the 2020 pandemic hit, municipal and provincial emergency response services helped establish a COVID-19 support strategy, which includes a centralized, 24-7 hotline via phone, text, and online chat that connects Calgarians to mental health support. The Community Action on Mental Health and Addiction reinforced these efforts by funding 14 fast-pilot projects to test new ideas for addressing mental health and addiction needs in the community. The projects

were selected and funded through the Community Investment Table comprised of six local funders, including the city of Calgary. Partners reconvened within two months, recognizing that pandemic response activities related to mental health and addiction should not take place in isolation from longer-term planning and action.

The Calgary team successfully overcame the initial disorientation and barriers to collaboration. But members agree that more needs to be done. The pandemic, physical distancing measures, the recession, and the civil unrest of 2020 have only increased mental illness and substance abuse in many places around the world, including Calgary. But the city is better prepared than ever before to mitigate these problems. With a clear theory of change, a governance framework, a stronger coalition, a new budget for programming, an ongoing process for learning and adjusting, and a website to share updates about their work, the team has come a long way.

Cross-boundary collaborations are hard not just because social problems are large and pressing but also because participants often see problems differently. In fact, the collaborators often don't perceive how they are misaligned in both their understanding of problems and their efforts to solve them. Diversity of perspective can be a source of great strength for a collaboration, but only if they can bring sources of misalignment to the surface, discuss them, and work through them. The analytic tools we have presented in this article aim to assist in that process. By doing so, they can help teams to identify, diagnose, and overcome the barriers standing in the way of collaborative solutions and, we hope, pave the way to improve—and save—lives. ■

Notes

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