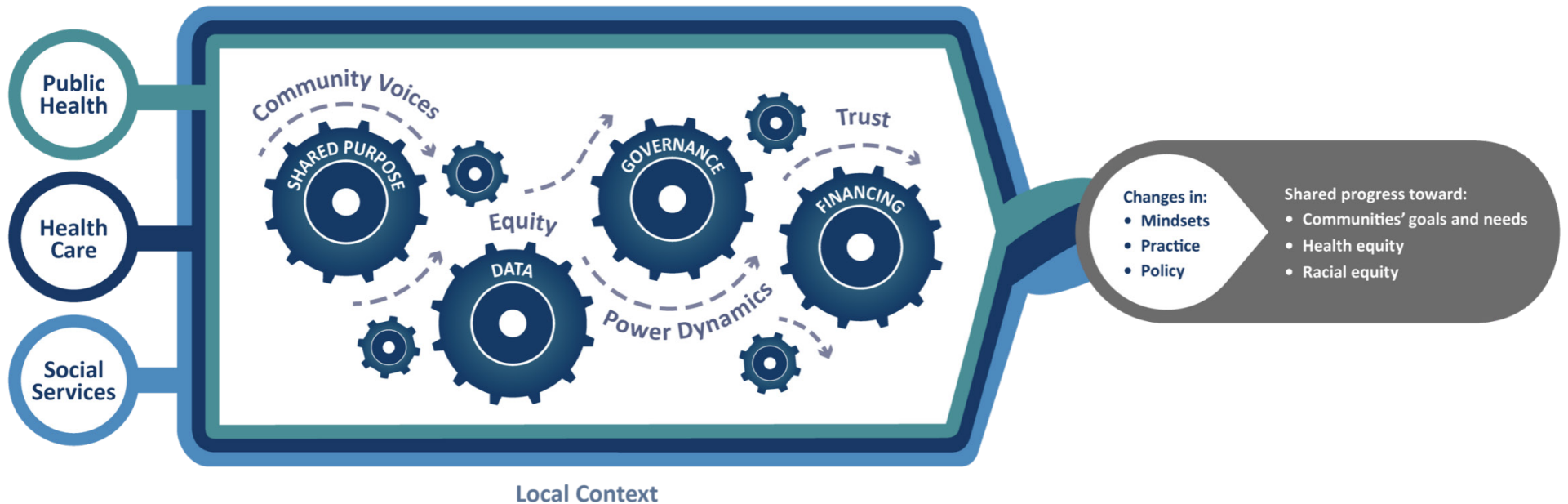


A FRAMEWORK FOR ALIGNING SECTORS

Aligning across sectors emphasizes coordination that extends beyond working together on a single project. *Aligned* systems require that sectors think and work together in fundamentally new ways to improve the health and well-being of the people and communities they serve in ways that are built to last.



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Local context: Local factors like geography, political will, socioeconomic, and community need impact aligning across sectors. Additionally, individual, organizational, and system-level factors can enable or hinder progress to align across sectors. These may include external pressures that spur a sense of urgency for sectors to align (e.g., state or federal pilot initiatives or policies, public health crises), internal factors within organizations (e.g., capacity, leadership, workforce, information infrastructure, incentives, financial management, and accountability), and softer elements impacting the ability to work together (e.g., interpersonal dynamics, past collaborative history or relationships, stakeholders' mindset, and backbone support).

ALIGNING SYSTEMS FOR HEALTH GLOSSARY

Terms in italics are defined elsewhere in this glossary.

SECTORS

Health care: The health sector includes the organizations, programs, and services that help individuals obtain access to personal health services to prevent, treat, or manage diseases and injuries, including services for physical health conditions, mental health conditions, substance abuse, and developmental disabilities. This sector includes the providers, purchasers, and payers of these services, as well as the suppliers of associated products and technologies, such as pharmaceutical products and health information technologies.

Public health: The public health sector includes the organizations, programs, and activities that work to create the conditions in which people can live healthy lives, including activities to prevent disease and injury and promote health for the population at large. This sector includes governmental public health agencies working at local, state, and federal levels. A defining feature of the public health sector is its focus on actions designed to protect and improve health at a population level, rather than purely at an individual level through delivery of personal health services.

Social services: The social services sector includes the organizations, programs, and services that work to address fundamental human needs and promote social well-being. This sector includes organizations and programs that provide education, housing, income support, employment assistance, diversity and inclusion initiatives, food assistance, transportation, legal assistance, disability support services, and criminal justice or juvenile justice services.

CORE COMPONENTS

Shared purpose: A feature of aligned systems in which sectors share a mutual understanding and commitment to a vision and priority *outcomes*.

Shared data and measurement: A feature of aligned systems that enables sectors to collectively and systematically gather, organize, and share data between entities, and the process of using this information to track progress.

Shared governance: A feature of aligned systems in which infrastructure has leadership, appropriate roles, and defined relationships.

Shared financing: A feature of aligned systems characterized by sustainable methods with appropriate incentives and shared accountability.

ADAPTIVE FACTORS

Community voices: Active community engagement ensures that community members are heard and integrated at the beginning of the design process (e.g., cocreation). Elevation of community voices in the design of and decision-making for aligning efforts is deeply entwined with building *trust* and shifting *power dynamics*.

Equity: The World Health Organization defines *equity* as “the absence of avoidable or remediable differences among groups of people, whether those groups are defined socially, economically, demographically, or geographically.” Equity encompasses both *health equity* and *racial equity* and includes both processes and outcomes. It is widely acknowledged that addressing equity is a critical goal of aligning across sectors and, ultimately, critical for improving community well-being.

Power: Aligning across sectors is challenging because of the inherent differences in dominance among sectors and between sectors and individuals. These differences in power can result from imbalances in resources, perceived value, historical practices, influence, or experience.

Trust: Both *relational trust* — earned through shared experiences and backgrounds — and *transactional trust* — earned through interactions and give-and-take — are necessary in collaborative efforts. Trust may need to be rebuilt or regularly renewed.

OUTCOMES

Short-term outcomes: The results of aligning across sectors include outcomes of short-term and long-term impact. Short-term impact may include changes to mindset (both individual and institutional), practice (including programs), and policy.

Long-term outcomes: Aligning across sectors seeks to address complex, long-entrenched challenges. While some shorter-term progress may be identified through short-term outcomes, more meaningful progress may take a generation or more to be measured. These longer-term outcomes include meeting the goals and needs of communities and the people living in them, *health equity*, and *racial equity*.

Health equity: Ensures everyone has the opportunity to be as healthy as possible. This is accomplished through elimination of disparities in health outcomes and determinants of health, as well as removal of structural barriers to achieving both (i.e., *racial equity*).

Racial equity: Involves the elimination of systemic, institutional, and individual barriers that deny equal opportunity to groups based on race or ethnicity (e.g., Black, Indigenous, Hispanic, or other people of color). It is understood that this differential treatment results in racial inequities that are deeply tied to the inability to achieve *health equity*.