

Massachusetts Department of Public Health

Coalition Engagement Principles Document

The Massachusetts Department of Public Health (MDPH) engages in a variety of ways with communities, including coalitions, task forces, advisory committees, and more. This document is intended to provide guidance specifically on coalitions.

Twenty years ago, MDPH launched the Community Health Network Area (CHNA) initiative as its primary venue for community engagement and collaboration, primarily through obligating organizations that contract with MDPH to provide services to participate in their local CHNA. While many CHNA's currently remain viable coalitions, other types of strong coalitions exist across the Commonwealth, such as Voices for a Healthier Southcoast, Tobacco Free Mass, Partners for a Healthier Community, and the Conference of Boston Teaching Hospitals Domestic Violence Council.

MDPH encourages its grantees and community partners to participate in coalitions and provides support and technical assistance around coalition engagement. MDPH believes that coalitions are an effective way to improve public health and reduce health disparities. Accordingly, MDPH wishes to provide guidance to grantees and community partners around the importance of coalition engagement and the way MDPH defines coalitions.

Why MDPH encourages its grantees and community partners to engage in coalitions

The importance of community collaboration for public health improvement is reflected in the national public health accreditation standards developed by the Public Health Accreditation Board (PHAB). Accredited health departments are now required to “engage with the community in identifying and addressing health problems through collaborative processes.” (PHAB, 2014)

MDPH encourages its grantees and community partners to engage in coalitions because they amplify resources, outcomes, and power for public health and reducing health disparities. Coalitions provide a forum for partners to exchange information, harmonize activities, share resources, and enhance capacity. (A.T. Himmelman, 2002)

MDPH now seeks to be flexible in its approach to community engagement and making decisions about the type of community collaboration and coalition engagement it expects from its vendors. MDPH seeks to empower communities and organizations to make their own choices about what is most needed to achieve their goals. MDPH does, however, wish to have some shared language across MDPH and its vendors regarding community collaboration and coalition engagement. And, because some funding contracts require participation in coalitions, MDPH wants to describe minimum requirements for community coalitions.

Definition of “Coalition”

Broadly defined, a coalition is “an alliance for combined action” (Websters Dictionary). Coalitions can be formal or informal, can be focused on a big mission goal or a smaller, specific policy or programmatic goal, and can be called by many different names (e.g. collaborative, partnership, alliance). MDPH recognizes a range of coalition types and does not seek to be overly prescriptive with its grantees and communities about the types of coalitions in which they are involved. MDPH fully recognizes that every coalition is unique, that communities should be empowered to determine their own needs and how best to meet them, and that sometimes the “non-ideal coalition” is quicker, easier, and adequate to get the job done. However, there are several qualities that MDPH believes must be in place for something to be considered a coalition. Additionally, MDPH believes that there is a framework for strong, highly functioning, sustainable coalitions which groups can and should strive to achieve. MDPH seeks to describe the qualities that should be in place for all coalitions and will, therefore, serve as MDPH’s definition of a “coalition”, as well as the qualities that many coalitions will wish to strive towards. MDPH staff seeks to provide guidance and support to its grantees and community partners as they participate in coalitions.

MDPH considers a coalition to be a group that meets the following minimum requirements:

- Statement of purpose and shared activities;
- Shared vision including a focus on reducing health disparities and promoting health equity;
- Consistent with MDPH’s priorities and/or the State Health Improvement Plan (SHIP);
- Participation from key stakeholders;
- Effective utilization of data to inform goal and activity selection, implementation, and evaluation;
- Defined leadership, e.g. a lead organization or lead volunteer structure;
- Membership that is reflective of the community;
- Defined structure for strategic planning and decision-making; and
- Defined coalition member roles.

A literature review uncovered additional characteristics as beneficial for coalitions in order to increase their effectiveness and sustainability. These include:

- Operating guidelines that promote transparency and trust;
- Effective governance structure for strategic planning, decision-making, and conflict resolution;
- Active participation and involvement in the coalition and in its governance from populations most impacted by the issue being addressed;
- Coalition membership that is diverse in racial/ethnic make-up;
- Coalition membership that is diverse in terms of types of organizations;
- Coalition membership that is reflective of the key stakeholders who are invested in the goals of the group;
- Clearly established and endorsed communications structure and process;
- Continuous recruitment and effective on-boarding process for new members;

- A realistic plan for fiscal sustainability; and
- Effective utilization of assets, including funding, staff and volunteers, and connections with the community and key decision-makers.

Other Definitions

- Advisory committee: a group of individuals or organizations that advises and/or provides oversight to a program, an institution, etc.
- Broad-based coalition: a coalition that is formed to work on a broad agenda of mutually beneficial goals, often in a specific community or geographic region
- Commission: a group of individuals appointed by official bodies
- Community: a group of people living in close proximity; a municipality; a group of individuals that share certain characteristics
- Community engagement: the process in which members of a community work together collaboratively, across sectors and populations, for the collective benefit or improvement of the community
- Grassroots constituents: individuals that live in a community and participate in an advocacy or program initiative as a volunteer advocate or participant
- Health disparities: inequalities that exist when members of certain population groups do not benefit from the same health status as other groups
- Health equity: attainment of the highest level of health for all people
- Key stakeholder: an individual or an organization that has a vested stake or interest in a program or policy initiative, e.g. it will impact them directly
- Lead agency: an organization that serves as the “home” for a coalition and provides fiscal oversight and staffing for the coalition
- Policy: a local, state, federal, or organizational regulation or law
- Program: an initiative that engages individuals and/or organizations in a set of activities designed to educate and/or promote healthy behaviors
- Single issue coalition: a coalition that is formed to address a specific health problem or opportunity, such as tobacco policy or obesity prevention
- Task force: a group of individuals and/or organizations that come together to accomplish a specific series of short-term activities