Utilization of an Interorganizational Network Analysis to Evaluate the Development of Community Capacity Among a Community–Academic Partnership

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WHAT IS THE PURPOSE OF THIS STUDY?

• To use network analysis to evaluate how the Brazos Valley Health Partnership network evolved and functioned over three administrations of an interorganizational network assessment measuring the types and depth of organizational relationships.

WHAT IS THE PROBLEM?

• Rural, low-income and minority residents in Brazos Valley, TX, face great disparities in health outcomes and access to resources and services.
• These residents report significant mental health problems, troubling levels of alcohol and substance abuse, and high levels of obesity and chronic disease such as emphysema, congestive heart failure, diabetes, hypertension, and arthritis.
• Residents report significant shortages in access to health-related services that can help address these problems, including mental health and drug and alcohol abuse.
• Transportation poses a significant barrier to access to care for residents in Brazos Valley, TX, with almost half of all rural residents having to travel more than 20 miles for medical care and public transportation systems described as being unreliable and inadequate.
• Communities in Brazos Valley, TX, experience inadequate communication at all levels—between residents and service providers and between the service organizations themselves—contributing to inefficiency and dissatisfaction among clients.
• Little research exists that describes such challenges to communication and relationship building—and how communities and researchers can work in collaboration to seek solutions.

WHAT ARE THE FINDINGS?

• From 2004 to 2009, the network density increased from 29.73 percent to 39.77 percent for organizations who shared information at least monthly, exhibiting an increase in the number of organizations working in partnership over time.
• From 2004 to 2009, there was a slightly smaller increase, from 17.42 to 19.51, in the network density of jointly planning events at least monthly.
• From 2004 to 2009, the complexity of the interorganizational relationships grew, which manifested itself in increasing density of the sharing tangible resources network and the formal agreements network.
• From 2004 to 2009, the average number of relationships between organizations increased in all cases except jointly planning events and programs.
• From 2004 to 2009, there was a greater increase in complex relationships involving sharing of tangible resources than in less complex relationships involving information sharing.
• From 2004 to 2009, there was an overall strengthening of relationships between organizations.

• From 2004 to 2009, there was a significant increase in the capacity and sustainability of the health resource centers as they gained support through local city/county governments as their own entities with budgets and personnel.

WHO SHOULD CARE MOST?

• Community organization leaders hoping to strengthen communication and relationships with other organizations as a means to improving the health and well-being of residents in their communities.

• Community stakeholders interested in improving the health and well-being of residents in their communities.

• CBPR specialists and other researchers interested in addressing community health problems.

RECOMMENDATION FOR ACTION

• When working with local communities, employ research designs that have methodological flexibility, thus, permitting data collection methods to meet the interests and unique nature of the communities and contexts involved.

• To address health disparities in local communities, use a community capacity building strategy that focuses on strengthening and building interorganizational relationships.

• To develop equitable partnerships between community organizations and researchers, work to build trust, which can lead to sustained mutual benefits for all partners, including opportunities to collect additional data related to the community health development process and to build local capacity to address local health outcomes.

• To foster learning and partnership building, facilitate communication between different organizations—of community members and researchers alike—through regular meetings and interactions.