Collaboration Gone Awry: A Struggle for Power and Control over Service Delivery in the Non-Profit Sector

A Simulation — Exploring Perspectives of Individual Collaborating Organizations

General Instructions

The case demonstrates that the ACSADV was not doing collaboration well to effectively meet the needs of those who experience sexual assault and/or domestic violence in this community. Power and politics, organizational characteristics, and heterogeneous visions and cultures made it challenging for each member organization to have an equal voice and shared understanding of the work of the committee. However, the commitment of each organization to continue to try and work together despite the challenges they face indicates that there exists opportunity to ameliorate the situation and improve collaboration in this case. At its most recent meeting, the members of the ACSADV identified that addressing the issues that were making the collaboration ineffective needed to be a focal goal at their next meeting. Your task is to start some of the hard conversations that need to happen in order to make this collaboration work and to collectively identify some practical steps that your organizations need to take to become a unified and ultimately a more effective collaboration.

This simulation was an honorable mention winner in our 2009-10 “Collaborative Public Management, Collaborative Governance, and Collaborative Problem Solving” teaching case and simulation competition. It was double-blind peer reviewed by a committee of academics and practitioners. It was written by Melissa Brazil and Eli Teram of Wilfrid Laurier University. This simulation is intended for classroom discussion and is not intended to suggest either effective or ineffective handling of the situation depicted. It is brought to you by E-PARCC, part of the Maxwell School of Syracuse University’s Collaborative Governance Initiative, a subset of the Program for the Advancement of Research on Conflict and Collaboration (PARCC). This material may be copied as many times as needed as long as the authors are given full credit for their work.
Exercise Instructions

In small groups (each is assigned the role of one of five organizational perspectives described below), imagine that you are at a meeting within your single organization to help the representative on the ACSADV prepare for the inter-organizational collaboration meeting. The items on the agenda at the upcoming collaboration meeting are:

- To have an open and honest discussion of your frustrations and challenges with regard to implementing the ACSADV initiatives.
- With your challenges and frustrations identified, you will try to negotiate new strategies to navigate through conflict more effectively in the ACSADV collaboration.

In order to prepare for this meeting, it is suggested that you review: Renade, W., & Hudson, B. (2003) Conceptual issues in inter-agency collaboration. Local Government Studies, 29(3), 32-50. You may also want to review other course readings that you think may be helpful. You will need to select one representative from your group to participate in the simulated ACSADV meeting. To prepare your representative, you will need to define your organization’s frustrations with the collaborative effort, and develop some strategies your organization would like to propose to improve the collaboration.

You may want to consider some of the questions that follow while developing your perspective and strategies for change:

1. What is the interest of your organization in the collaboration?
2. What are the interests of other organizational members of the collaboration that are likely to be raised? How will you respond to those interests?
3. Can you identify strategies or solutions to improve the collaboration that are likely to include the interests of all parties involved?
4. If you cannot come to consensus with all members, what is your minimum goal for this meeting?

You will have 45 minutes to prepare your representative for the simulated meeting of the ACSADV. The representatives for each organization will have 60 minutes to voice their frustrations and collectively determine practical steps to improve the collaboration of the ACSADV.

Detailed information about 5 of the 21 organizations making up the ACSADV initiative is provided below. Each description includes some general information about the organization’s culture, vision, characteristics, and environmental factors within the community. There is also a description of each organizational representative’s perspective about their individual participation and their agency’s role in the ACSADV.
Women’s Crisis Services

Organization Description

*Women’s Crisis Services* provides support to women who experience acute or repeated sexual assault/domestic violence. Established in the late 1970’s by a group of women seeking to put an end to violence against women, the organization’s services include: a local women’s shelter, a sexual assault centre offering group and individual therapy, a transition support program helping women to safely leave their abusive partners, and two 24-hour crisis lines offering immediate support and referrals for various women’s issues.

The vision of *Women’s Crisis Services* is largely based on feminist principles. Each woman is considered to be the expert in her life, and able to make her own decisions about the services she utilizes. Thus, the role of the organization is that of a consultant. Workers present a woman with all the choices and options available to her and she decides which organizational service(s) to access. *Women’s Crisis Services* also firmly adheres to the belief that any form of abuse (physical, emotional, financial, sexual, verbal, etc.) can never be justified. The primary goal of the worker is to empower women to make changes to end abuse and take back control of their lives from abusive partners.

The organizational culture of *Women’s Crisis Services* welcomes staff, volunteers, and clients from diverse backgrounds and unites them based on a shared goal to end violence against women. It is a culture of caring, mutual support, and belonging. Although the agency has a number of programs, all the workers know each other well and function as a cohesive group. They often spend social time with one another outside of work hours. Workers are united by a common feminist value system and practice that transcends from work to personal life. Values of social justice and anti-oppression are at the core of this shared belief system. *Women’s Crisis Services* also has a large and active volunteer program comprised of dedicated community members, many of whom have directly or indirectly accessed the organization’s services in the past. Given their positive experiences with *Women’s Crisis Services*, volunteers believe strongly in the organization’s work and are very supportive.

*Women’s Crisis Services* is a mid-sized organization. The agency has been in operation for over 30 years, and has long been the primary provider of support to women who experience sexual assault/domestic violence, making it a trusted source of safety from abuse in this community. The agency organizes and implements several initiatives including: running regular public awareness campaigns, making presentations to classes in the education system, and making poster board presentations at countless community events annually.

As a non-profit organization, *Women’s Crisis Services* obtains funds from several sources, including local community fundraisers, large local funding bodies, and the provincial government. The funding allotted to this organization fluctuates; the managers of *Women’s Crisis Services* must reapply for funds annually, and in so doing demonstrate that the services of the organization are well utilized. Funding is also affected by the economic status of the community. It is during such challenging economic times that *Women’s Crisis Services*’
involvement in the community becomes vitally important because funding bodies in the community are more likely to fund organizations that embrace collaboration.

Representative’s Perspective

You are the program manager for Women’s Crisis Services’ Transition Support Program and have been selected to sit on the ACSADV by the executive director. You are committed to the mission and mandate of the ACSADV to provide a consistent and streamlined first response to women who experience sexual assault/domestic violence, given that this parallels your organization’s existing mandate to provide women with choices and options for services. You would ideally like to see all other organizations on the committee adopt a similar approach when working with this client base to ensure that women who seek services for sexual assault/domestic violence receive effective and immediate support without being referred elsewhere. Given your expertise and experience with women’s issues, you (and several other members from your organization who sit on the protocol planning subcommittee) have been instrumental in designing the Community Response Protocol and are committed to implementing it within your agency. You firmly believe that all organizations on the ACSADV ought to share these values.

Thus, you are frustrated with the apparent lack of commitment from some of the other organizations making up the committee in this endeavor, and are working tirelessly to encourage their participation in such important initiatives. At meetings you regularly voice your own and your organization’s concern that other organizations are not participating in the ACSADV and point out those organizations who have yet to fulfill their agreed upon tasks. You cannot understand why they do not seem to recognize the value and importance of the first-response as outlined in the protocol. It is most important because your organization firmly believes that the first contact a woman makes when in an abusive relationship may be the only one she ever makes. The protocol is designed to provide that level care to clients. Most importantly, you firmly believe that domestic violence and sexual assault cannot be appropriately dealt with unless the entire community becomes involved. This protocol would be a first step in that direction.
**Family and Children’s Services**

**Organization Description**

*Family and Children’s Services* is a child protection agency whose primary role is to ensure that children in the community are safe from abuse. The organization works with families who are brought to its attention because of concerns related to poor parenting skills, risk of neglect, or the physical and emotional safety of a child. The concern of this organization is primarily for the safety of the child and not the parents. As such, the role of *Family and Children’s Services* in abusive partner relationships is to remove the child from the home and provide the mother with a referral to another agency, namely *Women’s Crisis Services*, for support to leave her abusive partner. If she chooses to leave, the organization will support her to care for her child(ren) without her partner. However, *Family and Children’s Services* workers do not have the necessary specialized skills and knowledge to provide support to the mother to help her end the abusive relationship and remove her partner from the home.

*Family and Children’s Services* is entirely government funded and mandated to provide child-focused services. Thus, the provincial government strictly regulates how the organization uses its funding toward this end. Nonetheless, managers recognize that the presence of sexual assault/domestic violence is a common reason for intervening in families to protect children in high risk cases, making *Family and Children’s Services* a key member organization on the ACSADV.

The organizational vision of *Family and Children’s Services* is rooted in the belief that all children have a basic need and right to grow and thrive. Workers feel a strong sense of responsibility to keep children safe in vulnerable communities. Workers believe that any form of abuse, even if it is not physical and/or not directed at the child, can affect that child’s ability to thrive. There is also a general belief adopted within the culture of this organization that a mother makes a choice to either leave or stay in an abusive relationship. If she chooses to stay, her poor choice makes her a bad mother. Consequently, she is also choosing to give up her child(ren).

*Family and Children’s Services*’ is hierarchically structured and has many specialized departments. Consequently, workers’ roles are fairly rigid; they are divided into child service workers, family service workers, and adoption workers. While child service workers focus on keeping the child safe, family service workers are concerned with helping parents develop necessary skills to maintain or regain custody of their children, and adoption workers connect children who have been removed from their homes to appropriate foster care. Despite working within the same organization, these three groups are influenced by heterogeneous organizational cultures simply by the nature of their different areas of focus for service. In addition, *Family and Children’s Services* has a small team of community development workers who are present in the community in neighbourhoods where a disproportionate number of child protection cases are open for investigation. They work to promote connections between families in these neighbourhoods through organizing neighbourhood events and programs so neighbours can support each other and make social connections. The organizational culture of these community development workers is embedded in the belief that by engaging neighbours to support each other, individual stress is reduced and child abuse and neglect are prevented.
Evidently, each area of the organization is designated a very specific role to play. There is often difficulty in communication within the entire organization because of the various visions inherent in different workers’ positions. Furthermore, the culture of each work location is different such that the staff members interact differently in each office. In one office the staff members break for lunch together while in another office staff members eat lunch individually in their offices over paperwork. Moreover, in the first office workers regularly use humour and conversation to stay positive throughout their challenging work day, while in the second office, workers communicate minimally. With such varied organizational cultures, one can imagine some of the potential challenges in working collaboratively within one single organization, let alone within a larger inter-organizational collaboration.

*Family and Children’s Services* is a long-standing non-profit organization whose managers work hard to make it a familiar and caring face in the community. This organization is intricately involved in countless initiatives throughout the community ranging from performing basic protection services, to working with community neighbourhood associations to promoting growth and development in impoverished areas. Despite extensive efforts to be a positive influence in the community, citizens (in particular those families with whom *Family and Children’s Services* has open cases), often distrust the organization whose workers have invaded their homes and their children’s lives.

**Representative Perspective**

You are a child protection worker with *Family and Children’s Services* who was assigned to sit on the ACSADV. You are not particularly invested in sexual assault/domestic violence issues as they relate to women because your role is to ensure that children are safe. In domestic violence cases, you feel that the most effective way to do your job is to remove children from the home until their mothers take responsibility and leave their abusive partners. While the mandate of the ACSADV is certainly related to your role, it does not align with your organization’s mandate.

You do recognize that providing a streamlined first response for women who experience sexual assault/domestic violence is an important community initiative. Yet, you are also aware that *Family and Children’s Services* is engaged in several other valuable initiatives that focus more directly on your organization’s client: the child. You attend ACSADV meetings and offer your thoughts in the decision making process because collaboration is a useful tool to improve your organization’s reputation. *Women’s Crisis Services* also put significant pressure on *Family and Children’s Services* to participate in the collaboration. However, you believe that decisions made at the ACSADV are not likely to be implemented throughout *Family and Children’s Services* for two reasons: i) the organization’s diverse culture makes it difficult to diffuse decisions across the organization, and ii) because the primary focus of your organization is on children who are not recognized in the work of the ACSADV. You would feel more inclined to participate in the ACSADV if its vision was broadened to include a focus on children.
Sexual Assault Care and Treatment Centre

Organization Description

The Sexual Assault Care and Treatment Centre (SACATC) supports women and men who experience sexual assault. The organization’s services are provided as part of the emergency services of the local hospital in this community. Any person who is a recent or past victim of sexual assault can access the SACATC. The organization completes forensic exams and offers counselling for emotional issues arising in relation to a sexual assault. The SACATC is a new organization in this community funded by the provincial government through the local hospital, and is still a relatively small organization. Thus, the SACATC is not well-known in the community or to other organizations making up the ACSADV. In fact, the agency has been dubbed the hospital’s ‘best-kept secret’ because many community members, and even hospital staff, do not even know about the services it offers. It should come as no surprise that the SACATC is struggling to make its services known to the community to maintain funding and continue to offer a valuable service. Thus far, the organization has worked hard to promote awareness of its services within the hospital itself, but has yet to reach the wider community. The SACATC hopes to use the collaboration with the ACSADV as one tool to do this.

The SACATC is in close partnership with Women’s Crisis Services since it often refers its clients to this agency for follow-up counselling services. Furthermore, the mandate of the SACATC is aligned with that of the ACSADV since it provides service primarily to women who are sexually assaulted and in many cases abused.

The culture of the SACATC is greatly influenced by its hospital setting where the client is treated as a patient seeking medical attention. Clients access the organization through the hospital’s emergency room, where they must indicate that they have been assaulted to be taken to a separate part of the hospital where the treatment centre is located. The team itself is multidisciplinary, with several nurses and a social worker. In part because the SACATC is a smaller organization, all of the staff have close personal relationships with each other and work collaboratively to deliver the best service possible to their clients. Moreover, decision making is horizontal such that it includes input from all staff. Thus there is a unique interaction between the culture and environment of a medical setting mixed with social services. Despite working in a medical model, employees are specially-trained to be sensitive to the needs and experiences of women who are sexually assaulted so as not to recreate the trauma inflicted by the assault. The SACATC has a strong belief that women are never responsible for sexual assault, and holds perpetrators accountable for their actions.

Representative Perspective

As the counsellor on the team, you are very invested in developing a consistent first response for women who experience sexual assault/domestic violence. You already have a model in place in your organization targeting sexual assault and would like to see your organization’s model expanded and implemented throughout the community so that women can go to any organization and receive immediate support and accurate referrals. You sit on the ACSADV, a position you struggled to obtain given your organization’s limited reputation, and are very involved in
implementing initiatives endorsed by the collaboration. Similarly, other SACATC staff members are also committed to supporting decisions made within the ACSADV.

Although your commitment to collaboration is unfailing, you are sometimes frustrated because you feel your voice is over-shadowed by that of other organizational representatives in committee decision making. Representatives from Women’s Crisis Services are often unwilling to listen to your input in decision making but rather push their agenda without considering other organizations in the collaboration. You become even more frustrated when you see others deferring to the expertise of Women’s Crisis Services. You feel that the entire Community Response Protocol was primarily the work of Women’s Crisis Services. You find it difficult to challenge the power held by the representatives of this organization when others in the collaboration do not appear interested in directly challenging them with you during meetings. You would ideally like to see a protocol with equal input and support from all organizations in the collaboration.
**Humane Society**

**Organization Description**

The *Humane Society* is an animal protection agency. Although the organization typically becomes involved in families for animal-related concerns, it is common knowledge within organizations who work to provide services for those who experience sexual assault/domestic violence that where animal abuse occurs, concurrent abuse of women and children is not uncommon. The *Humane Society* offers pet boarding to women who are fleeing abuse and cannot take their pets with them. Because the *Humane Society*’s mandate is focused on animal protection, the risk for abuse to humans is deferred to trained professionals from other organizations to handle.

The *Humane Society* is a small agency funded through a large local funding body. It is run primarily by volunteers. The organization works hard to be visible in the community by attending local events with poster boards and by bringing animals that are up for adoption onto radio shows to raise awareness of the needs for these animals in the community. The *Humane Society* is dependent on funding that fluctuates regularly with the economy and its ability to demonstrate that it is a viable service in the community. That said, the *Humane Society* has a good reputation where its integral role in the community to care for lost or abused animals is well recognized and supported, making it easier to maintain the organization’s funding levels.

In terms of culture, the staff and volunteers at the *Humane Society* are passionate about animal rights and treating animals with the same dignity and respect allotted to people. The organization seeks to limit suffering and encourage animals to thrive and grow. The staff and volunteers are a cohesive group dedicated to caring for and keeping animals safe.

With the exception of board governance, the staff and volunteer team is otherwise fairly horizontally structured. Animal protection workers work in partnership with volunteers to run the *Humane Society*. In fact, many of the staff and volunteers have developed close relationships with each other based on their shared concern for the safety of the animals they work with.

**Representative Perspective**

You are the executive director of the organization and opted to sit on the ACSADV when approached by *Women’s Crisis Services*. You agreed for two reasons: i) *Women’s Crisis Services* insisted that your organization is a stakeholder in the community on the issue of sexual assault/domestic violence, and ii) you are passionate about this issue as an individual. You attend regular ACSADV meetings and participate when you can. However, it seems that much of the work of the committee is only marginally relevant to your organization since the *Humane Society*’s involvement with sexual assault/domestic violence issues is largely indirect. You prefer to defer final decision-making in the collaboration to those organizations which are more invested in these issues. You see no role for your organization in developing and implementing a first response protocol since your organization does not have the expertise to support women who experience sexual assault/domestic violence. You feel this work is better suited for those with expertise in the area.
Community Mental Health Clinic

Organization Description

The Community Mental Health Clinic (CMHC) provides a range of mental health services including clinical assessment and diagnosis, psychiatric consultation, and long-term counselling, among other programs to promote positive daily living for those who have mental illnesses or other psychological or developmental challenges. The mandate of the CMHC clearly delineates that an individual must identify as having a mental illness or developmental challenge in order to receive services. Because it is a government-funded and directed organization, the CMHC’s mandate and the types of services it can provide are limited to work with clients who have developmental or mental health challenges. The CMHC is a mid-size organization and has been in the community for several years, making it well-established. Community members and organizations working in mental health know instinctively to refer clients who require services for mental health issues to CMHC.

The culture of the CMHC is infused with a firm belief in the resilience of its clients in the face of adversity. Workers recognize that clients need support but also respect their right to assert independence when possible. Paradoxically, the CMHC is embedded in a clinical setting, where a weak patient is treated by a powerful team of experts. The CMHC uses a multi-disciplinary approach for client support. One client is assigned several workers with various specializations. Given the multiple perspectives and values of team members, at times it is challenging for workers to come to a shared vision of the best treatment for the client.

Representative Perspective

You are the director of Developmental Services at the CMHC. You volunteered to sit on the ACSADV because you feel that your organization is a stakeholder in issues of sexual assault/domestic violence given that your clients are at a greater risk of being targeted for these acts. While your mandate does not directly align with that of the ACSADV, you feel that if one of your clients presents with sexual assault/domestic violence issues he/she ought to be offered immediate service rather than a referral.

However, you feel that your perspective is not recognized by other member organizations on the ACSADV. There is minimal discussion among organizations at the ACSADV meetings regarding planning around sexual assault/domestic violence services for those with psychological and developmental challenges. Organizations in the collaboration are failing to recognize the unique challenges faced by your clients’ with developmental challenges when sexual assault/domestic violence is a compounding issue. Thus, the first response protocol does not reflect your organization’s needs, decreasing its utility in your work and making it challenging to implement. In your frustration you have chosen to disregard the protocol and continue to use the existing strategies of your organization to deliver appropriate services to your clients who struggle with sexual assault/domestic violence.