The Need for Public System Collaboration

Population Health Sciences

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As a new researcher at PolicyLab, I feel particularly excited to examine ways to enhance child and adolescent health outcomes and contribute to the evidence base for multi-system collaboration across Pennsylvania. Having previously worked on this issue, I am specifically interested in identifying ways in which school systems and public health departments are currently or can work together to deliver basic preventive health services to youth. But, before we can begin this work, it is essential to understand the existing landscape of inter-agency collaboration.

Collaboration across systems occurs when programs in one system impact outcomes in a different well-being domain (such as health programs in schools) and/or when two or more independent systems share information and work together to deliver services. Since youth are influenced by and develop in the context of their families, providers and communities, it has become critically important to work across the spectrum of public systems such as schools, health care services and child welfare to create interventions that effectively improve child health and overall well-being.

Health care providers are also attuned to this need, especially for children in disadvantaged communities where individuals and families are already involved in multiple disparate service systems. A planned multi-system approach benefits from the strengths of each individual system and has the added advantage of addressing intergenerational risk factors. This can be particularly effective for prevention and early intervention strategies for youth. My colleagues at PolicyLab have already been investigating novel cross-system interventions to address food insecurity, coordinate asthma care between pediatricians and schools and encourage collaboration between clinical facilities and Women, Infants, and Children (WIC) centers to aid breastfeeding.

However, as it stands today, many of these systems are inherently siloed due to an inability to share information easily across agencies. This can be because of legal limitations and/or confidentiality and privacy issues. These barriers are particularly troublesome for the most vulnerable families; this fragmented approach often addresses only their most visible needs, without establishing a comprehensive understanding of the root cause. When individuals and/or families are involved in multiple systems, there can be duplication of services with little communication around risk factors, service plans and outcomes across the systems. As public agencies at all levels are faced with diminishing funding streams, it's increasingly important to manage available resources in order to maximize returns.

Moreover, a multi-system approach can leverage the strengths of each individual system to develop an efficient and comprehensive process to achieve desired health outcomes. The value of this cross-system approach has been well documented in reports by the Substance Abuse and Mental Health Services Administration (SAMHSA) and the Administration for Children and Families (ACF). Additionally, there are several exisiting examples of collaborations across service systems that have demonstrated improved well-being outcomes including Wraparound Milwaukee in Milwaukee, Wisconsin, Uniting for Youth in King County, Washington, and Healthcare Hotspotting in Camden, New Jersey.

In our own backyard, the Pennsylvania Department of Health Office of Health Equity has organized the Pennsylvania Interagency Health Equity Team (PIHET). Through a collaboration of 12 state agencies, PIHET is convening Pennsylvania leaders to end health disparities by building capacity for equitable policies and programs, cultivating strategic partnerships and sharing relevant models for action. Established in February, PIHET replicates the Federal Interagency Health Equity Team and has developed the infrastructure necessary to share data and establish collaborative projects. The goal is for these collaborations to lead to multi-system interventions, ensure equitable policies and programs and reduce redundancies. PolicyLab's Dr. Tiffani Johnson is on the advisory panel for PIHET and contributes her research expertise on health equity issues including, for example, the impact of implicit racial biases on the health care of children.

As policymakers at all levels of government are recognizing and exploring the benefits of multi-system approaches to providing services more efficiently while achieving positive outcomes, I hope that our research can begin to identify opportunities for and lessen the barriers to successful multi-system implementation. The need is even greater in the current environment that is resource-challenged, and where the health and well-being of vulnerable populations is at risk.