BRIEF REPORT

BRIEF REPORT OF COMMUNITY OWNERSHIP OF LOCAL COALITIONS: COMMUNITY MEMBERS' PERSPECTIVES

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Although community ownership has been described as critical to the long-term effectiveness of local coalitions, a lack of consensus exists regarding what community ownership is and what exactly is being owned. This exploratory study examined community ownership of coalitions that address domestic violence from the perspective of community members who initiated and operated these coalitions. Qualitative data collection methods included interviews, observations, and archival review of coalition records. Findings expand current conceptualizations of what community ownership is and how it develops. Results may inform future research regarding how community ownership affects the effectiveness of a coalition's programs and how researchers and government agencies partner with coalitions to address health problems. © 2009 Wiley Periodicals, Inc.

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The findings and conclusions in this report are those of the author and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

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One factor described as critical to the long-term effectiveness of a community coalition's programs is community ownership (Armbuster, Gale, Brady, & Thompson, 1999; Bracht et al., 1994; Flynn, 1995; MacAllan & Narayan, 1994). However, a lack of consensus exists regarding what community ownership is and what exactly is being owned. Community ownership has been described as just community control (Armbruster et al., 1999; Flynn, 1995), as both community responsibility and capacity for addressing health concerns (Bracht et al., 1994; Broner, Franczak, Dye, & McAllister, 2001), and as not originating from within the community, but as being transferred or conveyed (Bracht et al., 1994; Flynn, 1995) from researchers to communities after grant funding ends. Different perspectives over what is being owned also exist: a coalition's programs (Bracht et al., 1994), the coalition (MacAllen & Narayan, 1994; Payne, 2001), or both the coalition and its programs (Flynn, 1995).

This exploratory study examines community members' perspectives of community ownership of a coalition based on the premise that community ownership of a coalition provides communities with a structure through which to address their concerns. (These perspectives were not included in the studies by MacAllen & Narayan, 1994, and Payne, 2001, which discussed community ownership of coalitions). As community members are instrumental in coalition sustainability, understanding their perspectives will help answer two key questions: (a) Who and what organizations do community members consider suitable to control the coalition? and (b) How is local ownership of a coalition demonstrated?

METHOD

This study was conducted in the southeastern United States. Nine individuals participated in interviews: six were members of three local coalitions that addressed domestic violence and three were state domestic violence coalition staff. Local coalition members were long-term (i.e., 5 years) or founding members of their coalitions. Local coalitions allowed observations of their meetings and review of archival materials (e.g., Meeting Minutes). Community members initiated and controlled these coalitions, which operated without paid staff. State domestic violence coalition staff members were included due to their role in providing periodic training and technical assistance to local domestic violence coalitions. The state domestic violence coalition allowed observations of their trainings to local coalitions and review of their training materials. This state coalition was a private not-for-profit agency with no formal power over the local coalitions. All names of people, places, and organizations are pseudonyms.

Data collection took place from January 2003 to June 2005. Interviews were audiotaped. Interview guides focused on how the local coalitions developed and omitted the question, "What is community ownership of a coalition?," so that community ownership perspectives were based on participants' lived experiences. The constant comparative method (Merriam, 1998) was used to develop the emic findings. Participants reviewed and agreed with the findings. An etic analysis (i.e., researcher's interpretation) of the emic findings was also conducted.

FINDINGS

Participants' (i.e., the emic) perspectives revealed three aspects of community ownership: (a) a status requirement for being considered a coalition stakeholder,

(b) stakeholders and their respective influence, and (c) how stakeholders demonstrate ownership. The status requirement for being considered a stakeholder was that a person or organization reflects the identity of current stakeholders in two areas: geography and culture. In regard to geography, these coalitions were initially organized by judicial districts, which handled felony domestic violence cases for several counties. However, a different organizing structure was needed that respected how stakeholders defined their identity:

> Politically, what we have found, people don't see themselves as part of a judicial circuit, they see themselves as part of counties. There is rivalry within the circuit. Some people won't go to a meeting in another county because they lost a football game last week in that county—forget it.

In defining their identity, stakeholders' also emphasized a shared cultural heritage that limited their ability to view Spanish-speaking Hispanics residing within the county as part of their community. Hispanics were a population to be "dealt with":

> Howard Mondale asked Chief Daniel Lumpkin to comment on how law enforcement was dealing with the Hispanic population. Chief Lumpkin stated that in the beginning most of law enforcement personnel could not speak Spanish effectively enough to communicate with them… He stated that as the Hispanic population grows, the officers were getting more able to communicate with them.

Meeting minutes over the next year did not make any reference to including Hispanic residents in coalition activities. Together, these two last excerpts suggest a hierarchy among status requirements, with sharing the cultural heritage of stakeholders being the most important.

Four coalition stakeholder groups were identified: (a) the local domestic violence program, (b) public agencies that have historically addressed domestic violence as a crime (i.e., traditional agencies), (c) organizations that have not historically addressed domestic violence as a crime or otherwise (i.e., nontraditional agencies), and (d) survivors of domestic violence. Stakeholders included individuals and, for some individuals, the organizations they represented.

Stakeholders had specific, predetermined levels of influence within the coalition for restructuring how their communities had historically addressed domestic violence, which was for individuals and organizations to support the work of the local domestic violence program, but not necessarily address domestic violence directly. As the excerpts below reflect, the local domestic violence program's influence was limited so that traditional agencies, which were responsible for the safety of county citizens, could assume a primary level of influence within the coalition and the community. Nontraditional agencies (e.g., churches, businesses) assumed a secondary level of influence so that domestic violence became everybody's business.

> If they (i.e., the local domestic violence program) set-up a coalition, it's just going to look like another aim of the shelter. What people are going to do is not have buy-in, they're going to say "Yeah, we support the shelter doing that,

> shelter's doing it." The shelter will just go ahead and do what they normally do. They will take on responsibilities for doing whatever the projects of the coalition are and not be inclusive. It's not a turf issue as much as it's an expectation of the community.
>
> We (i.e., the coalition) have tried to stay focused on—"Who do we need to educate?", "What are the police doing?", "What are the prosecutors and various agencies doing?", "What are schools doing?"—different areas. We have tried very hard to keep it focused on the community, not one agency, not on our shelter.

Survivors of domestic violence had a level of influence that allowed them to hold other stakeholders accountable for how they addressed domestic violence as this excerpt notes:

> The thing I think is as critical as any thing you can do: Involve survivors. Survivors will keep you honest. It's real hard for a group to talk about what they're doing and what their programs are with survivors being there, because they know she knows.

Survivors indirectly participated through the advocacy of victim-serving agencies. Their direct participation was desired, but complicated by issues such as tokenism as this excerpt indicates:

> Now ideally you want survivors on your coalition, but that's a hard role to put one survivor on there and say "You're going to speak for battered women." Her experience is so different …Another piece we struggle with, is how we are going to incorporate survivors as part of the coalition without putting them on the spot?

Stakeholders demonstrated their ownership of a coalition in five ways: being invested in the coalition, respecting the autonomy of other stakeholders, protecting the community from the agenda of outsiders, avoiding a reliance on money, and relying on a core group that was representative of the four stakeholder groups discussed earlier.

Both individuals and institutions were invested in the coalition. Individuals worked with other stakeholders to address domestic violence. Individual investment varied according to agency affiliation and the agency's predetermined level of influence. Agencies institutionalized the coalition's purpose by implementing policies that promoted the coalition's purpose and focusing on the needs of victims rather than on turf issues with other agencies.

Stakeholders respected the autonomy of other stakeholders as the extent of institutionalizing the coalition's purpose within an agency was at the discretion of each agency's chief executive. Stakeholders protected the community from the agendas of others from outside the community as this interview excerpt reveals:

> Some times doing this [increasing our membership] may dilute our focus a little bit to help us stick with these protocols that seem very important to the state coalition. I agree they're important, but we're not doing this to meet

> someone else's plan. We're doing it because it needs to be done… I think the leadership of our coalition does a very good job of staying in touch with "OK, what do we have to get back to? What do we have to be true to?"

Stakeholders also avoided a reliance on money for coalition work. Money was viewed as another obstacle to having domestic violence broadly addressed throughout the community. No-cost institutional acts by traditional and nontraditional agencies (e.g., adjustments to policies) were believed to have a larger impact throughout the county than a new grant that would serve only a few people each year. A new grant might also isolate responsibility for addressing domestic violence to the activities funded in much the same way that responsibility to address domestic violence had historically been viewed as belonging to the local domestic violence program. Finally, stakeholders relied on a core group of stakeholders that changed over time and included representatives from the four stakeholder groups.

The etic findings suggest that community ownership is dynamic in nature, with stakeholders, not the coalition, deciding how to institutionalize the coalition's work within their respective agencies. The etic findings also suggest that the historical (e.g., local domestic violence program having responsibility for addressing domestic violence) and community (e.g., protectionist traditions) contexts influenced how community ownership was conceptualized (i.e., who participated and how).

DISCUSSION

Broader applicability of these findings is limited due to the small sample size; the unique history and culture of the communities involved; and the unique history of addressing domestic violence. However, both the emic and etic findings expand current perspectives of community ownership of a coalition by suggesting that how participation is structured (i.e., who gets to participate and how) determines how local control is manifested and by noting the influence of historical and community contexts. Refinement of these findings requires more research regarding how stakeholders of coalitions that address other health problems define community ownership of a coalition. Future research is also needed regarding the relationship between community ownership and the effectiveness of a coalition's programs.

These findings suggest that researchers and government agencies, when seeking to partner with coalitions, may need to engage stakeholders in a dialogue that explores (a) how stakeholders define community ownership of their coalition, (b) how historical and community contexts influence how community ownership is defined, and (c) what paths to partnership stakeholders consider appropriate. These dialogues may lead to partnerships that enhance community ownership of the coalition and the effectiveness of the coalition's programs.

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