COLLABORATORY COMMITMENT DERIVED FROM PROFESSIONALS' EXPERIENCES WITH COOPERATION ACROSS SERVICE-LEVELS

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Abstract. *The services of the sectors of health and education have become more specialized. To prevent services from appearing fractured, professionals must work together and coordinate their help. This study deals with what professionals have experienced as positive for the collaboration. Seven informants, four from the municipal level and three from the specialist level, have been interviewed about what create collaborative commitment in their help to people affected with mental disability and mental disorders. The findings show that four factors inclusive their sub-attributes contribute positively: (1) The professionals are committed to prosocial attitudes, like respect, humility, openness, trust/confidence. (2) They prioritize user-focus which means that what benefits the user is number one to-do. (3) They commit themselves to certain dialogically prosocial communicative and relation-building actions, e.g., listening/audibleness, giving feedback and praise, advising, negotiate joint decisions. (4) They are stimulated by internal motivation like learning pleasure and increased understanding and reflection of knowledge combined with a job-arena characterized by facilitating human relationships, communication availability and mutual accommodation, and an encouraging, commendable, and facilitating management. These findings are consistent with what other collaborative research has pointed out as quality-enhancing. Based on the findings a theoretical model of collaboratory commitment is constructed.*
Keywords: Collaboration, communication, facilitators, mental disability, mental disorders, prosocial attitudes, service-levels.

Introduction

During the last decades the services of the health sector have increasingly become more specialized. Along with this development new diagnoses have been described, not least a diversity of syndromes. People affected with mental disability often experiences comorbidity with other diagnoses, like syndromes and mental disorders. Thus, they need help from several professionals, both locally, regionally, and nationally. To a certain extent the same affects special needs education which has established competence-centers and educated specialists. Children and youth affected with "the double diagnosis" mental disability and mental disorders need help from specialized health and educational services at the same time. To prevent the user from feeling the services too fractured, good collaboration is required. The knowledge of what contributes to collaborative quality and what makes professionals passionate about coordinating services to

users and students with comorbid conditions is still limited. The purpose of this study is to gain insight into professionals' positive experiences with collaboration across service levels, which in turn can be used as motivation for future efforts and quality of collaboration, in the health-, social- and education sectors.

At the University of Agder, several researchers have in recent years been concerned with the general meaning of the collaboration concept (Grelland, Botnen Eide, Kristiansen, Sævareid, & Aasland, 2014; Melby & Bachke, 2021). The former research group lingered on the philosophy of collaboration. Melby & Bachke discussed the core content of the collaboration and concluded that it consisted of two factors. The first is that cooperation must have a binding and mutually valid "we". The second relates to service providers' ability to achieve ownership to common goals.

Other researchers have more specifically examined the collaboration of professionals on services for people diagnosed with both mental disability and mental disorders. Andersen, Rosenvinge, & Bachke (2019) studied cooperation between employees at the same housing supply for residents with this double diagnosis. The informants were challenged to relate positive collaborative experiences. They reported that these efforts promoted cooperation: The staff showed attitudes like trust/safety, openness, respect, reflexivity, and mutual helpfulness. Moreover, the organizational structure was characterized by clear goals, enough time, good management and interdisciplinarity, and a culture that creates a sense of belonging, inclusion, and open communication with good feedback. Bachke, Melby, & Nilsen (2019) investigated collaboration between the mental health sections and the housing service in a sample of municipalities. They found that collaboration was promoted by certain attitudes like communicative openness, honesty, audibility, heartiness, and action-oriented willingness to help. The professionals should also show a clear user-first prioritization. In addition, the management should combine stable, predictable, and measurable organizational structure and flexible use of resources. Elliott & Bachke (2018) looked at cooperation between next-of-kin and professionals. They found that well-functional collaboration had these attributes: Open dialogues, attentive listening, and showing sincere mutual respect.

Holen-Rabbersvik (2019) sheds light on experiences of a more negative character, as hinted at in the partial title of her PhD: "coping with wickedness". The PhD includes three sub-studies. In paper 1 she made a Delphi-study that included 19 experts employed by municipalities. She found that collaboration was inhibited by "a fight culture" (i.e., collaboration is tagged by competition), complex management, and change resistance. In paper 2 she had 20 employees linked to intercommunal health services and their collaborative partners as her sources of knowledge. She found that the quality of the collaboration was throttled by complex communication- and info-sharing systems (IT-system not user-friendly), too many actors with weak IT-skills, privacy, excessive confidentiality,

and consciousness. In paper 3, multiple case study is used, and 17 informants from intercommunal services yielded within the health- and care-sector are involved with their co-operative partners. The study reveals that collaboration is hindered by managerial lack of support, municipal inequalities, geographical distances, and work solitude.

Holen-Rabbersvik (2019) also performs a secondary analysis of the findings in the three sub-studies. It shows challenging barriers in the planning of intercommunal cooperation. The barriers consisted in competitive culture, complex management, and change resistance. In the implementation of the collaboration, the dominant challenges are those inhibitive factors revealed in paper 2 and 3.

The research described above has a methodical bias. All the studies used qualitative methods with relatively few informants. Thus, to argue for generalizability of the results is hard. However, the findings of the various sub-studies point to similar factors as supportive of collaboration: qualities of employees' attitudes, the culture of the workplace and management's agile use of the organizational structure. If this is lacking, Holen-Rabbersvik shows that cooperation is hampered.

Other Norwegian and international research points to similar collaborative promotive factors:

- Positive attitudes (San-Martin Rodriguez, D'Amour, Ferrada-Videla, & Beaulieu, 2005; Torgauten, 2015; Karam, Brault, Van Durme, & Macq, 2018).
- User focus prioritized (Brattrud & Granerud, 2011; Karam et al., 2018; Stokken & Hunnes, 2019; Bachke et al., 2019).
- Smooth contact/communication forms, good information flow, and dialogue (D'Amour, Goulet, Labadie, Martin-Rodriguez, & Pineault, 2008; Brattrud & Granerud, 2011; Elstad, Steen & Larsen, 2013; Elstad, Antonsen, Tillerli, & Storli, 2017; Karam et al., 2018).
- Familiarity with and knowledge of each other's competence, functions, and roles (D'Amour et al., 2008; Brattud & Granerud, 2011; Elstad, Steen & Larsen, 2013; Torgauten, 2015; Elstad et al., 2017; Karam et al., 2018).
- Adaptable management and clear organizational structure (D'Amour et al., 2008; Elstad et al., 2013; Elstad et al., 2017).

Research question and conceptual clarifications

However, few of these studies are based on first-hand experiences of employees involved in collaboration across service levels. To fill this lack of research this research question was selected: Collaboration between the municipal and specialist health service-levels to assist people with both intellectual

disabilities and mental disorders, what do employees find creating collaborative commitment?

The diagnostic concept intellectual disabilities are defined according to the code of ICD 10, F 70-79 (WHO, 1993a). Likewise, mental disorders fetch their content from the ICD's clinical description and diagnostic guidelines (WHO, 1993b).

The municipal health service is a collective term for all health services the municipalities are responsible for operating. In Norway the municipality has an obligation of providing the necessary health and care services to everyone who is staying in its borders (Store Norske Leksikon, 2011).

The specialist health service includes both public and private hospitals, mental health care, specialized drug treatment, ambulant services (Statistisk Sentralbyrå, 2022). In this study informants are mostly employed at the departments of habilitation services, one for adult users and one for children and youth.

In this context the essential meaning of commitment is the attitude of someone who works very hard to do or support something (Mariam Webster, 2022). In other words the person shows willingness to give time and energy to collaborative activities.

Method

Inspired by Malterud (2017) who recommends use of qualitative methods when it comes to study subject-fields where former research is scarce, it was decided to do interviews. This method also fits the research question.

Selection of informants

To be a valid informant the professionals should fulfil these criteria: (a) They must have direct work-related experience with people affected by the double-diagnosis. (b) The co-operation with another service level should have been going on over time. (c) They had to have good collaborative experiences.

To recruit adequate informants was challenging. By means of "the snowball method" and extended time seven interviewees agreed to participate: One male and two females from the specialist-level, and four women from the municipality-level. Their age varied from 27 to 67 years. Educationally, everyone had a bachelor's degree. Five were trained social educators, one clinical social worker, and one a mixed degree. All but one, had further education within subjects like mental health work, psychiatry, counselling, drug addiction, etc. The three informants from the specialist level had previous work-experiences from the municipality-level.

The interview guide and carrying out the interviews

A narrative interview-approach with a semi-structured interview guide was used (Kvale & Brinkmann, 2015). To tune in the informants topically, the interview started by introducing a case-story about professionals who burned for cooperation. The case was followed by topically relevant open-ended questions.

To prepare the informants they received the interview-guide some days before the conversation. The interviews were carried out at the informants' workplace in a sheltered context, and a recorder was used. Before ending the interview to strengthen the content validity, a summary of what the interviewee had related as his/her answer to the research question was mirrored. The duration of the interviews varied between 35 and 65 minutes. Shortly afterwards the ending of an interview it was transcribed, and the recorded talk was deleted.

Data analyses

Inspired by Giorgi (1985) and Malterud (2017) Systematic Text Condensation was used to analyze the transcription. It consists of four steps. Step one is to read though the text to get a first impression of important findings. The second step is to identify meaningful devices. In step three and four these devices were abstracted (the researcher's interpretations) and underpinned with concrete quotes (the informants' statements). These analytically qualitative processes lead to construction of four main findings.

In addition, a quantitative content analysis was applied to look for a possible substantial finding. This analysis showed that the quotes were distributed approximately equally between informants from the two service levels. Furthermore, it turned out that the same applies to the distribution of quotes between the four main findings. The consequence is thus that the study does not reveal a single factor that has an overshadowing significance for good cooperation.

Reliability, validity and generalizability

The reliability of a qualitative research is an issue of discussion. Some maintains that it is not a relevant issue at all. Others, like Dalen (2004), accepts reliability as important. She claims that it can be strengthened by the measures described in table 1.

*Table 1 **Dalen's reliability measures and how they were attended to** (Dalen, 2004)*

Dalen's recommended measures	How the measures were attended to
Use more researchers	Two master-students assisted in the complete research process
Get confirmation from others	The research-report has been informally read and commented on by research-colleagues
Use technical aids when rendering	Used voice recorder
Distinguish between specific descriptions and interpretations	This is highlighted in the way the findings are presented
Explicit description of the study's context, participants, and methodology	Maintained through transparent descriptions in the methodology section

Another measure applied is use of project diary (Polit & Beck, 2004). It helped the researchers to remember when, where and why they assessed various options and what governed the decisions during data collection as well as the data analyses. All in all, these measures indicate. that the reliability of this study is satisfactory.

Coming to internal validity it also relates to the transparency of the study's methodology. It is maintained by the measures described above. However, the validity can be strengthened b other measures, too. Firstly, concept-validity must be maintained. In this project the concepts collaboration and commitment are particularly important. To give the concepts the same meaning for both researchers and informants, they were explained at the start of the interviews. Secondly, to validate the researchers' interpretations of the informants' statements, particularly those applied in the research-report, member-checking was applied (Polit & Beck, 2014). Specifically, the researchers' interpretation of what the informants meant when they used the impersonal pronoun one, was checked. Did they refer to singular I or plural we?

External validity deals with generalizability of the findings. A sample of seven interviewees is too small to allow generalizing. However, if the findings in one qualitative study corresponds with findings in other qualitative studies with a similar topicality, it can be argued that the findings to a certain extent are generalizable (Malterud, 2017).

Research ethics

Common research-ethical considerations are attended to: Written informed consent including the option of withdrawal from participation during the research process, confidentiality and anonymization of both individuals and municipalities. The research project is approved by the Norwegian Centre for Research Data, cf. reference number 202696, and by the Ethical Committee of The Faculty of Health and Sport, University of Agder, reference number 19/08657.

The voice recordings of interviews were deleted immediately after the transcript was completed. The transcript was stored on a separate memory stick.

Findings

The findings are divided into four main categories. Totally 474 utterances are classified.

The first category relates to attitudes. The informants talk of attitudes in 79 statements, and they are quite evenly distributed among employees at the municipal-level (N = 36) and those informants belonging to the specialized level (N = 43). They speak of such attitudes in three ways. Firstly, as a responsibility they have themselves to show certain attitudes which they have experienced promote collaboration (N = 38). It means that I personally expose them. Respect is one attitude pointed to, cf. this citation*:* "I … show respect by listening and understanding." Humility is another one: "… to be humble I believe will be helpful to attain much". In addition, trust/confidence ("I really trust his/her professional arguments …") and openness ("I was honest and open …") are described. Secondly, they point to some of the same attitudes exposed by their partners (N = 17): "The way they meet me (with respect)"; and "No top-down approach in the way they assist us …" (humility). Thirdly, collaboration is characterized by all the involved personnel show these attitudes (N = 24). It means that an implied we-ownership to the same constructive attitudes is established among the professionals involved in the cooperation: "It is a way of playing with the ball that creates a feeling of respect for all the involved …"

Showing respect, humility, openness, trust/confidence can be named *prosocial attitudes.* All the informants refer to them, and relate them to the three perspectives of I, you and we. It seems like the collaborators identify these attitudes as an essential foundation of the commitment.

The second is prioritization of user-focus. The informants mentioned it in 48 statements. It means that the professionals seek the benefit of the patient/client/pupil as highly important and recognizes it as number one to-do. Thus, when it has become a habit pattern, we can say it is an underlying attitude that prompts collaborative activity. Informants express this point of view by various statements. Here are some examples: "The main reason is of course the consideration of the user"; "The user is the most important thing in my job"; "Someone has to stand on for the user"; "One must find the best solution for this particular user."

The third category spoken of is the necessity of actions, often carried out with zeal when it comes to commitment. Totally 165 statements belong to this category, and they are distributed with 83 utterances from municipality-informants and 82 from specialist-level informants. Here are some examples:

- "I can't be so bombastic, but rather be responsive to other people's advice."
- "I will listen, but also suggest solutions …"
- "They have often asked questions or mirrored us so that we get a new perspective ..., think a little new."
- "They discuss issues, they listen, they are open to accepting something new, and they guide."

The quotes refer to communicative skills like listening/audibleness, giving feedback and praise, giving and receiving advice, negotiate joint decisions, inquire into how things are going, and generally look for how to leverage each other's competitiveness. Such communication makes a trustworthy working-relationship. In next turn it generates joint decisions about professional actions that exploit the available competence and that clarify who does what, cf. these citations:

- "... to take advantage of each other, the competence that exists."
- "No decision was made over anyone's head."
- "... we become clear about what needs to be done and who should do it."

To a large extent, the citations refer to dialogically prosocial communicative and relation-building actions. The quotes show what the informants themselves do (the I responsibility mentioned 38 times) and what the others make of constructive communicative actions (the you responsibility uttered in 94 statements), and how it creates a common "we" behind the vocational actions the collaboration aims to implement (the we-position identified in 33 statements). In other words, well-functional collaboration seems to require participants who not only share positive attitudes, but also master and use constructive communication skills to decide jointly what is wise to do.

The fourth category is about the benefits and the facilitators of a well-functional cross-level co-operation (N = 182, out of which 51 citations are stated by specialist-level informants, and 131 come from municipality interviewees). One beneficial outcome is learning and acquisition of new knowledge: "… fun to learn, understand more and reflect"; "For me to gain more knowledge"; and "It provides opportunities to learn". Particularly the municipality informants related to this and the next one (N = 33 out of 37). Commitment was strengthened by motivational pushes to continue a challenging work: "My commitment increased because I saw a change, and that it's useful. The progress derived extra motivation, generated by strengthening the positive emotional bonds within the collaborating team (mentioned in 63 statements): "It made us proud of each other"; We lift all the players up by talking each other up ". Furthermore, it allows you to get to know each other safely, which in turn simplifies contacting each other and increases communication availability (N = 46 utterances), cf.: "… make unpretentious phones... simply seamless, … and to be very accommodating."

Such statements suggest that the relationships between the collaborators are optimized from being title and professional-oriented to becoming more personal and human-oriented. Informants described this as such: "It's about human encounters, and it's better to respond when a human being meets me and not a title or education." Lastly, the importance of facilitating, solution-oriented and commendable management was expressed (N = 36 statements): "We have openness to coming earlier or are granted time for collaborative meetings"; The others talk well of their partners of the other level and boast of them. Thereby our picture of them is changed to a positive image".

To sum up, both the individual and the collaborative team get into positive processes consisting of learning pleasure and other motivating and relational emotions that simplify communication and make the working community less rigid and more human. In other words, positive circles arise within the collaboration. These act as internal motivators that benefit and facilitate the common responsibility for providing the user with customized services.

Discussion

The finding related to attitudes shows that they are perceived as valid for all the actors involved. Moreover, it seems that they necessarily must be present in a mutual way and thus be an expression of the fact that the collaborators have a common ownership and understanding of their presence in the cooperation. This interpretation gains support from the research of Melby & Bachke (2021) who claims that good cooperation must have a binding and mutually valid "we" as one of the core elements. Another interpretation is that these four attitudes, not least because of the reciprocity aspect, creates a sense of equality among the collaborators. Relational equality is elevated as an ideal in professional service to people who need help, e.g., relief work (Stokken & Hunnes, 2019), mental health work (Karlsson & Borg, 2015) and educational guidance (Lauvås & Handal, 2014).

Positive attitudes between the partners have also been pointed out as important for the quality of collaboration in a lot of research (San-Martin Rodriguez et al., 2005; Torgauten, 2015; Karam et al., 2018; Andersen et al., 2019; Bachke et al., 2019). This study reveals some attitudes of importance and underscores that all the involved collaborators must commit themselves to them. Therefore, it might be reasonable to claim that prosocial attitudes are not only basic, but also an underlying and necessary component of the collaboratory commitment.

The citations emphasize that the user's well-being becomes the common goal of the collaborators. Thus, the mutually valid "we" is strengthened by the ownership of user-focus priority as a common goal for all the involved in collaboration. To achieve ownership of common goals is the second quality mark

that Melby & Bachke (2021) has pointed out as the core of well-functioning collaboration. The informants' statements support this opinion. Furthermore, Bachke et al. (2019) claim that prioritizing the user can be the key factor to collaborative success. The claim is supported by the quotes and is further reinforced by the informants talking with commitment about the common user focus. In addition, other researchers also support the importance of prioritization of user in the co-working activities (Brattrud & Granerud, 2011; Karam et al., 2018; Stokken & Hunnes 2019). The importance of common goals is also underlined by several (San Martin-Rodriguez et al., 2005; D'Amour et al., 2008; Andersen et al., 2019).

Experience shows that it is not always easy to establish common goals. However, Aasland (2014) argues that understanding user's needs, and thereby putting the user in focus, makes it easier for the partners to agree on the goal. The informants of this study support Aasland's claim through statements like these: "It helped when there was more focus on everyone getting a better understanding of the user"; and "... how they experience the patient... that everyone in a way is helped to see it".

To summarize this study points out that user-focus facilitates collaboration and is helpful to gain common understanding of the user which in next turn makes it easier to agree on common goals. It seems like the three key concepts, user-focus – common understanding – common goals, mutually interact and create processes that lead to "starlike" collaborative quality and commitment, see figure 1.
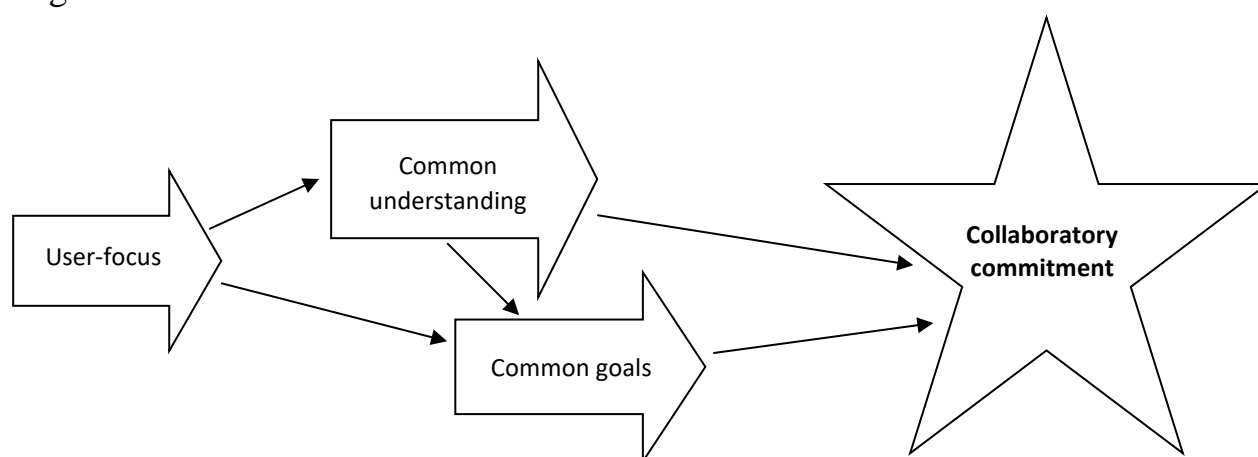

Figure 1 **How user-focus helps the collaborators to attain common understanding and goals, which in next turn creates collaboratory commitment** (made by author)

The third finding describes the necessity of certain actions, namely dialogical prosocial ways of communication, and relation-building ways of being. The informants also emphasized that this acting component of collaboratory commitment must be expressed by myself, the other and by the team (= I-, you-

and we-responsibility). This finding adds support to the collaboratory core-theory of Melby & Bachke (2021) by emphasizing that an overall "we" is important in good examples of collaborative quality. One must not only feel for it (as an emotional component of an attitude), but one must let the attitude translate into action, and thereby express the commitment.

The importance of dialogical communication between the partners and constructive utilization of their respective competencies is also supported by other's collaborative research (D'Amour et al., 2008; Brattrud & Granerud, 2011; Elstad, Steen & Larsen, 2013; Elstad, Antonsen, Tillerli & Storli, 2017; Karam et al., 2018).

When it comes to facilitators and benefits of collaboratory commitment the finding receives support from similar collaborative research. For instance, Stokken & Hunnes (2019) underscores how interprofessional cooperation provides opportunities to learn from each other, discuss subjects and stimulate professional growth. The role "good feelings" play in. establishing and maintaining emotional ties between the partners has been pointed out in similar collaborative settings. Bordin (1983) claims that positive emotions make it easy to like, care about and trust each other. In connection with the concept of "labor alliance" in a therapeutic and/or guidance context Reichelt & Rønnestad (1999) highlights the importance of positive likes between participants. According to Grelland (2014), describing exactly how emotions contribute is difficult. But they create "a presence" that brings the collaboration to life. Thereby, participants experience a human gain and joy in the collaboration itself which in turn lubricates relations and communication. The informants use expressions such as becoming available to each other in unpretentious and seamless ways. Relationships that have a culture of making it easy to communicate with each other are probably a main characteristic of good cooperation. Other studies point out the same (San-Martin- Rodriguez et al., 2005; Elliot & Bachke, 2016; Karam et al., 2018; Andersen et al., 2019).

In addition, the informants expressed that they were dependent on a positive management. Good routines could easily be combined with flexibility: Fixed office time is plotted in the internship. However, there is openness to get to work a few hours early, or to drop the office to other urgent chores." They also emphasized emphasize the importance of encouraging and commendable comments from the leaders: "I'm glad you're doing it. You're so good at it. I've heard that from others, too." Such statements indicate that successful collaboration depends on a management which shows encouraging, commendable and flexible attitudes towards those employees in charge of cases requiring joint efforts across service levels. It seems to be a must that the managements act as motivational facilitators and persistent stimulator.

The importance of managements' facilitating manners is also pointed to by other researchers (D'Amour et al., 2008; Elstad et al., 2013; Elstad et al., 2017;

Andersen et al., 2019; Bachke et al., 2019). Such facilitating manners are a necessary foundation for co-operation generally because they create an adaptable and flexible culture which allow more unorthodox actions and improvisations that provide agility in the interactions. This study shows that this applies to cross-level collaboration too. The opposite, co-operative failure is an outcome of lack of managerial support (Holen-Rabbersvik, 2019).

Closing remarks

The research question's core statement is: What do employees find creating collaborative commitment? Through the analyses of the interview-transcription four elements are identified. Moreover, all the informants mentioned them. This means that the elements are vital for positive collaboration generally, and not dependent of which service-level the informants belong to. This sample-internal generalizability might also apply to other collaborative settings and actors because other qualitative collaborative research has pointed to the same conditions. External validity, and generalizability is subsequently to a certain extent restrained.

The quantitative analysis of the citations reveals that no single factor has an overshadowing significance for good cooperation. This means you cannot just emphasize one or two factors. Most likely, collaborative commitment is the result of a complex mutual interaction between the four factors. Essentially, they are intertwined as feelings, thoughts, motoric movements/skills, and environmental stimulators are parts of most of the professional helping work. To simplify, one can claim that communicative commitment consists of an emotional source, the prosocial attitudes; a perspective of thinking, the idea of putting the user first; a set of professional skills, prosocial communication; and a contextual management facilitating collaborative processes. Together the four elements create a good circle that will provide internal rewards for the collaborators and benefit them and the user at the same time.

Figure 2 outlines a theoretical model that suggests possible connections between the four factors. Hopefully, it might help professionals to remember what promotes cross-level collaboration, and thereby optimizing their future collaborative efforts. In this way the model might have practical implications. Furthermore, it might serve educational purposes. Firstly, it can be applied in the teaching of communication-courses included in the curriculum of bachelor-/master-programs like social work, social education, nursing, teaching and special needs education. Secondly, it can be used as a tool to raise the students' awareness of the importance of collaborative commitment during their practicums. Thirdly, the model can be applied in colleague guidance.
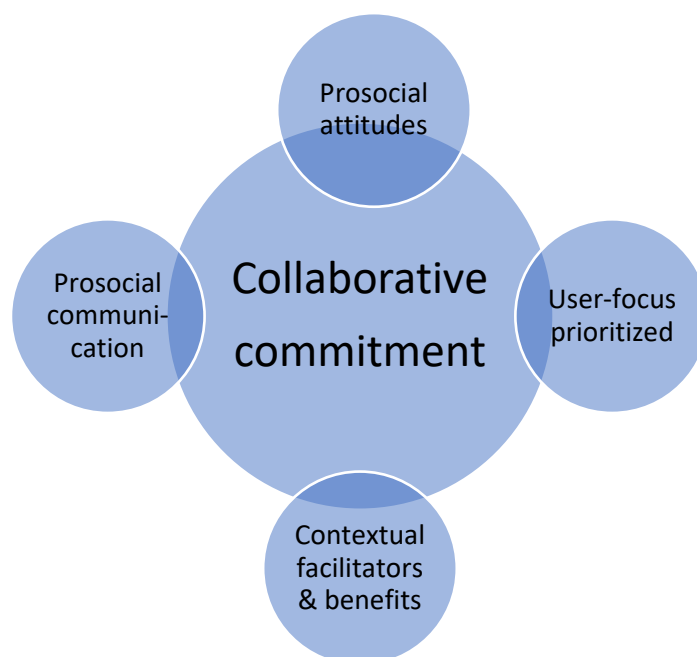
*Figure 2 **A theoretical model of collaborative commitment, based on the findings of the study** (made by author)*

How the four factors interact the informants do not explain. Nor do they say anything about whether one factor is developed first, or whether the factors emerge in a parallel way? One can imagine that there are double pointing arrows between all the four small circles, signalizing that they are mutually working together to create collaborative commitment (the big central circle).

The model must be considered as a preliminary picture of mutually stimulating conditions constituting and enabling such commitment. Even though the model is not yet sufficiently underpinned by research, it can be useful, stimulating further collaborative research. For instance, it can act as a tool for implementing action research projects. Moreover, it can serve as a theoretical starting point for further collaborative research where its validity is verified using other research methods, or replication-like approaches. Such research might lead to more secure knowledge about how to create cooperativeness within cross-level teams.

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