



Herding cats and other epic challenges: Creating meaningful stakeholder engagement in community mental health research



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ARTICLE INFO

Keywords:

Clinical research
Global health
Community mental health
Project management
Population health
Public health
Stakeholder engagement
Stakeholder management

ABSTRACT

Stakeholder-centered approaches, that restrict patient barriers to clinical community mental health research, affect outcomes. It is suggested that a restructuring of clinical research organizational behavior and attitudes may overcome this problem. It is further advocated that consultation with an engagement of study patient stakeholders encourages their interest in the study, and is essential for successful research. This editorial considers the concept of stakeholder participation and management in the clinical research environment. It further offers practical suggestions for fostering meaningful stakeholder engagement.

1. A new way of thinking about participants in community mental health research

A revolution in organizational management and decision making has recently taken place in U.S. healthcare. Increasingly, this has involved the importation of a new set of principles from theories of business management. These principles are based on revised attitudes toward program beneficiaries, which emphasize the importance of their inclusion in program creation and administration. These beneficiaries have been referred to as the “stakeholders” in the organization’s activities. Freeman has defined a stakeholder as, ‘any group or individual who can affect or is affected by the achievement of the organization’s objectives’ (Edward, 1984). Accordingly, this includes almost any individual or group of individuals with an interest in the project’s outcome, and/or an ability to exert a positive or negative influence on the project’s result. The process of proactively incorporating the ideas and input from stakeholders has been termed “stakeholder engagement” (Goodman and Sanders Thompson, 2017). Furthermore, stakeholders are interconnected, so that the satisfaction of one stakeholder may well depend on the satisfaction of others. This reflects a growing attitude that organizations not only have an ethical obligation to involve the

participation of program beneficiaries in their decision making but that in so doing their overall organizational effectiveness will be enhanced. It has been noted that traditional models of research, which view study subjects as passive targets of program development, may produce research interpretations that are poorly aligned with the information needs of real-world decision-makers. An important reason for this is that participation by patients who are the targets of research interest has been repeatedly shown to uncover health issues which are known to the patients themselves, but which are not addressed in the original research or program proposals. Stakeholder engagement is thus differentiated from the one-way communication processes that seek to influence groups to agree with a decision that has already been made.

2. Decision making in program development

Community mental health researchers are often faced with questions about the choices that must be made by patients. Research can similarly be focused on assisting the process of program development. In either instance, the underlying motivation remains the same: healthcare professionals are interested in improving healthcare delivery, in finding out what dysfunctionalities exist, and in improving the

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outcomes of proposed changes. It is, therefore, essential that research and program processes are assisted by those who are most directly affected by the proposals, i.e., the patients themselves.

3. Stakeholder engagement in clinical research

Several lines of evidence suggest that stakeholder engagement would potentially increase the research and policy relevance to that of healthcare, help with the goal setting for improving or redesigning healthcare delivery, drive the quality and safety of patient care, and thereby reduce disparities in the healthcare access and outcomes, and improve opportunities for achieving community and policy impacts (Khodyakov et al., 2017). Stakeholder engagement is intended to help research administrators fully realize the benefits of applying community and patient interest in hospital programs, and to ensure that program accomplishments benefit those who are most directly affected. Well-managed projects create long-term economic gain, uphold social values, and help to uncover interaction effects among stakeholders, thus ensuring that taxpayers' money is appropriately spent.

The stakeholder focus group is a communication medium, through which the opinions of individuals, or groups of individuals who are impacted by the research can be elicited. Focus groups provide a deeper understanding of each stakeholder's role and responsibilities, as well as promoting an overall understanding of the project requirements. Such processes likewise create an environment in which stakeholders can express their opinions, and thus feel that they have been heard.

The obligation to serve all stakeholder interests is often called *stakeholder management*. The main distinction between stakeholder management and stakeholder engagement consists of the extent to which stakeholders are involved in the decision-making processes. The process of engagement varies across research programs but is highly noticeable in complex, multidisciplinary research programs (Ashraf et al., 2015; Pepin et al., 2016). In many organizations in today's world, stakeholder engagement has replaced attempts to simply manage stakeholder relationships without involving the stakeholders themselves.

4. Suggestions for fostering meaningful stakeholder engagement in clinical research

One of the first tasks that a clinical project manager must undertake is to ask how stakeholders can make the greatest impact on the research project, or how they can best implement change which is being contemplated. Stakeholder analysis systematically gathers and analyzes both qualitative and quantitative information, in order to determine whose interest should be taken into account. The stakeholder analysis, which is customarily undertaken at an early stage of planning, is an important part of risk and reward assessment activities.

Total commitment to the aims of the specific clinical research project or to service restructuring is essential for success in stakeholder engagement. Every party must have a stake in the process and must have decision-making power. Stakeholder engagement must be present from the outset. The process of identifying and engaging stakeholders must begin well in advance; no decisions should be made before commencing stakeholder engagement on project-related issues. It is essential that the dialogue has legitimacy in influencing the decision-making process.

The process of encouraging stakeholder participation is referred to as stakeholder management. Apart from the identification of both internal and external stakeholders in terms of skills, knowledge, and expertise, the requirements of stakeholder management should include:

- determining individuals' requirements
- delineating interests and expectations
- outlining communication needs
- addressing stakeholders' issues and concerns as they occur
- maintaining a positive relationship, and communicating with

stakeholders throughout the project

- identifying influence-controlling strategies
- making sure that stakeholders are involved in the project at the required level throughout the project
- maintaining continuous interactions with the stakeholders

5. Benefits of stakeholder analysis to organizational effectiveness

Stakeholder analysis is critical in programming effectiveness. Part of the function of stakeholder analysis is to promote an understanding of stakeholders and to ensure that their expectations are being met. It is anticipated that the process of partnering with stakeholders will be more widely accepted and, as a consequence, clinical research projects will become increasingly more efficient and transparent.

There are at least two benefits of stakeholder analysis. First, the encouragement of stakeholder engagement and stakeholder management often enhances an organization's reputation, and ultimately increases its effectiveness. Additionally, stakeholders can provide reality checks, which aid in the prioritizing or re-evaluating research objectives, in identifying potentially difficult socio-political environmental issues, and in providing the means to navigate around challenges, or even overcome them. Accordingly, the experience of stakeholders is invaluable in guiding research, and in achieving program objectives, from their early stages in the laboratory to their final clinical application. Second, by increasing the acceptability of programs, stakeholders increase the likelihood of their success. Stakeholders play pivotal roles as healthcare advocates, or as healthcare ambassadors, partners and/or agents of change.

6. Limitations

A balanced assessment, however, requires recognition of the challenges of implementing a stakeholder-oriented program. Many clinical research investigators often lack a clear understanding of stakeholder management, or else they simply ignore its importance (Pandi-Perumal et al., 2015). Such knowledge deficits may encourage reactive, rather than proactive, approaches to dealing with stakeholder issues. Another issue is that there is no generic 'one size fits all' strategy for stakeholder engagement and stakeholder management, rather, the strategies and their executions depend on the local stakeholder landscape, as well as the problems that are being addressed.

There are some additional caveats that need to be recognized. A barrier to effective participation, and the subsequent consensual building process, is that the identified stakeholders may lack appropriate knowledge or skill sets, or they may believe—correctly or incorrectly—that they do not have the appropriate knowledge to contribute, and/or that the investigators have the knowledge and experience to identify it. Needs or interventions perceived as the 'best' or 'appropriate' solution in any given situation might completely differ from the views of investigators. This results in potential 'conflicts' and 'trade-offs' in terms of project objectives. Most importantly, while most of the literature emphasizes the positive benefits of engagement, it less frequently addresses the potential costs and risks associated with the adoption of a stakeholder perspective. Often these conflicts among stakeholders are simply assumed. By engaging them actively, it can often be determined that stakeholders may have various "currencies" so that managers can craft "win-win" solutions that do not require trading off the interests of one group with another.

In view of these considerations, any engagement with stakeholders must be sensitive to the rights of the parties involved, as well as to the overall harms and benefits that are the result of the managerial action. Second, it is not always apparent when there may be a conflict of interests or hidden advantages or disadvantages among key stakeholders and decision makers.

7. Conclusion

Community mental health researchers, at the outset, need to ask for patient participation in the development of research questions. Researchers need to find out the exact characteristics of study participants and to define what the nature of the research outcomes should be. The research process, furthermore, involves measuring the results of research interventions, and monitoring the progress of the research, especially in terms of whether or not it is being directed toward the initial intentions of the research. Lastly, patients, who are closely connected with the target populations of the research, can provide excellent inputs for ensuring its appropriateness and relevancy.

From a clinical standpoint, stakeholder engagement and management is pivotal to the development and deployment of community-oriented national and global health initiatives. The ultimate purpose of such engagement is the efficient use of time, money, and resources, thereby proactively and positively impacting existing and/or emerging healthcare challenges.

The clinical project manager must: (a) identify, determine, engage, evaluate, manage, and satisfy the expectations of the stakeholders; (b) understand their differing and changing priorities, expectations and interests over time; (c) understand the influence, interest, impact, power, and legitimacy of the roles of stakeholders in the project; (d) accomplish protocol strategies by utilizing communication methods as promoted by his/her superior interpersonal skills.

Implementing and disseminating stakeholder engagement practices in community mental health would improve well-being, as well as outcomes of the healthcare research system at large.

Financial disclosure

The authors have read the journal's policy and have the following potential conflicts: SRP is a stockholder and the President and Chief Executive Officer of Somnogen Canada Inc., a Canadian Corporation. He declares that he has no competing interests that might be perceived to influence the content of this article. This does not alter the authors' adherence to all the journal policies.

All remaining authors declare that they have no proprietary,

financial, professional, nor any other personal interest of any nature or kind in any product or services and/or company that could be construed or considered to be a potential conflict of interest that might have influenced the views expressed in this manuscript.

Conflict of interests and disclosure statement

No conflict of interest has been reported for this study

Acknowledgment

NIH NIHMS693631 One of the authors, MN was the recipient of a grant from NIH and would like to acknowledge their work which is pertinent to this paper.

References

- Ashraf, S., Moore, C., Gupta, V., Chowdhury, A., Azad, A.K., Singh, N., Hagan, D., Labrique, A.B., 2015. Overview of a multi-stakeholder dialogue around shared services for health: the digital health opportunity in Bangladesh. *Health Res. Policy Syst.* 9 (December 13), 74. <https://doi.org/10.1186/s12961-015-0063-2>. <https://www.ncbi.nlm.nih.gov/pubmed/26646372>.
- Edward, Freeman R., 1984. *Strategic Management: A Stakeholder Approach*. Pitman Series in Business and Public Policy, 1st ed. Pitman Publishing, Boston 275 p.
- Goodman, M.S., Sanders Thompson, V.L. Behav, 2017. *Med. Pract. Policy Res* doi: 10.1007/s13142-017-0495-z. <https://link.springer.com/article/10.1007/s13142-017-0495-z>.
- Khodyakov, D., Stockdale, S.E., Smith, N., Booth, M., Altman, L., Rubenstein, L.V., 2017. Patient engagement in the process of planning and designing outpatient care improvements at the veterans administration health-care system: findings from an online expert panel. *Health Expect.* 20 (February 1), 130–145. <https://doi.org/10.1111/hex.12444>. <https://www.ncbi.nlm.nih.gov/pubmed/26914249>.
- Pandi-Perumal, S.R., Akhter, S., Zizi, F., Jean-Louis, G., Ramasubramanian, C., Edward Freeman, R., Narasimhan, M., 2015. Project stakeholder management in the clinical research environment: how to do it right. *Front. Psychiatry* 18 (May 6), 71. <https://doi.org/10.3389/fpsy.2015.00071>. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC26042053/>.
- Pepin, R., Hoyt, J., Seifert, B., Bartels, S.J., 2016. A multi-stakeholder process to transform a community-based screening and referral program to implement evidence-based depression care. *J. Evid. Inf. Soc. Work* 13 (July-August 4), 362–372. <https://doi.org/10.1080/23761407.2015.1086712>. Epub 2016 Feb 5. PMID: 26849168. <https://www.ncbi.nlm.nih.gov/pubmed/26849168>.