



Applying Boundary Spanning Leadership Principles to Overdose Data to Action Efforts

- **Alyssa Merski**, Senior Analyst, Social and Behavioral Health, ASTHO
- **Alice Schenall**, Director, Cross Sector Leadership and Facilitation, ASTHO

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Table of Contents

Introduction to Boundary Spanning Leadership 1

Leadership in Overdose Prevention 2

Resources 3

Appendix A: BSL Preparation Worksheet..... 4

Appendix B: Boundary Spanning Challenge Questions..... 6

Appendix C: BSL Five Common Boundaries 7

The Overdose Data to Action (OD2A) cooperative agreement provides funding to 90 health departments under two programs — OD2A in States and OD2A: LOCAL — to decrease drug overdoses and related harms. OD2A principal investigators (PIs) need to navigate complex leadership challenges when implementing overdose prevention and surveillance strategies, such as working with many different partners and managing their teams to bring data to action. Since 2021, ASTHO has been training OD2A program leaders in Boundary Spanning Leadership (BSL) to address these challenges. This program convened OD2A PIs to celebrate successes, identify challenges, and share ideas through peer exchange, leadership training, and leadership coaching.

Introduction to Boundary Spanning Leadership

BSL training builds “capacity to establish direction, alignment, and commitment across boundaries in service of a higher vision or goal” (Ernst and Chrobot-Mason, 2010; Ernst and Yip, 2009). Direction, alignment, and commitment (DAC) are three key outcomes that contribute to effective leadership. Formal leadership (i.e., organizational chart) is an important part of an organization’s success; however, all members of the team with the ability to create DAC are leaders. According to the Center for Creative Leadership, cultivating leadership is a [social process](#) that involves individuals working together to achieve results, creating DAC.

DAC is a coordinated process that results from individuals, teams, and organizations working together:

- **Direction** is strong when everyone agrees on priorities and is moving in the same direction.
- **Alignment** includes good coordination, and everyone understands their roles and responsibilities. Deadlines are met and there is no duplication of effort when alignment is strong.
- **Commitment** is strong when everyone is succeeding and there is trust, authentic relationships, and shared responsibility.

The BSL model addresses challenges (individual and organizational) unique to the public health workforce and their partners. There are five common boundaries (vertical, horizontal, stakeholder, demographic, and geographic) present in any organization, team, or project. One or more of the boundary types is prominent in the boundary-spanning challenge. Common boundary-spanning challenges in an OD2A program may include:

- Building and managing cross-cutting teams to improve timeliness of overdose data that prevention programs use for action.
- Addressing social, economic, and political issues that affect populations highly impacted by overdose (e.g., people experiencing homelessness).
- Acting as a bridge between agency leadership and the OD2A surveillance and programmatic teams.

BSL starts with managing boundaries, then forging common ground, and finally discovering new frontiers. In practice this looks like: 1) uncovering the differences of each group member or organization represented, 2) building trust and community, and 3) integrating differences to form an interdependent team to develop new solutions. ASTHO has customized its training with OD2A PIs based on a BSL challenge in the jurisdiction’s OD2A work, goals of the team, and time investment. [Trainings are split up into three one-hour sessions](#) that allow for concept introduction and practical application.

“As a scientist, I am constantly building upon technical skills all the time, but I have never had effective trainings on management, communication, and leadership. This program allowed me to focus on specific skills and teach me things I had never learned before. My work will be significantly better because of this. I cannot tell you how important it has been to be able to network with the others as well.”

Leadership in Overdose Prevention

OD2A leaders are faced with boundaries that can inhibit overdose surveillance and prevention activities without proper navigation. For example, partnership with community organizations to reduce overdose may not be effective without first exploring differences between the state health agency and community organization goals and working to build trust. Throughout OD2A BSL trainings, OD2A leaders have demonstrated many ways they bridge these boundaries and apply DAC in their overdose surveillance and prevention work.

OD2A leaders may need to span boundaries between departments within the agencies in which they work



(horizontal), between hierarchical levels within the organization (vertical), with external partners like community-based organizations (stakeholder), with diverse cultures, demographics, and populations with which they work like people who use drugs (demographic), and across rural/urban regions, states, or localities (geographic). Collaborating across these boundaries ensures strengthened team relationships, exchange of perspectives, expertise, and experience, and alignment of vision and strategy to improve program impact. For example, BSL can support OD2A leaders in getting critical health agency leadership buy-in for programs while also including the voices of people with lived and living experience with drug use in the planning, implementation, and evaluation stages of prevention programs.

“When we met together one on one, we did an overview of how we’re structured; and [jurisdictions] are obviously very different, so we had different challenges and different successes, so we were able to share those. But what was really interesting is some of the same issues came up for both of us, so it was great to be able to problem solve with each other as well as give each other some advice on how to deal with key stakeholders in your community. We focused on specific strategies under the Overdose Data to Action grant that each of us were struggling with and brought some of our partners together, so some of my staff got together with some of her staff to talk about the local partnership piece of the Overdose Data to Action grant. So that was really great, to collaborate together on that.”

Resources

BSL tools and takeaways improved OD2A PIs' capacity to more efficiently and effectively respond to the overdose crisis in their jurisdictions. Please see below for additional resources on BSL training and the DAC framework.

- [Applying Leadership Skills to OD2A: Lessons Learned from ASTHO's ODSA Workforce Development Program](#) by ASTHO
- [Overdose Data to Action PI Leadership Mentorship Program: Applying Leadership Skills to OD2A](#) by ASTHO
- [DAC Assessment](#) by the Center for Creative Leadership: Conducting a DAC assessment is the first step in discovering the strength of the team and partners. It is helpful to gain understanding on where to start or what needs the most work. There are five questions for each section (3) with the highest score of sixty. DAC is not static in nature; therefore, checking for DAC when there is a change and at milestones in the work is necessary.

The following appendices are additional BSL materials provided by ASTHO to help participants prepare to most effectively participate in BSL workshops and trainings.

Appendix A: BSL Preparation Worksheet

In preparation of your Boundary Spanning Leadership workshop, we would like your team to consider the following questions. Your answers to these questions will set the stage for meaningful engagement in this meeting and will also provide important information for the project's needs assessment, which will in turn allow us to provide technical assistance activities to meet the needs of those participating. This meeting will be the first convening and will be focused on:

- Grounding and clarifying the definitions of leadership and boundary spanning.
- A discussion about direction, alignment, and commitment to set the stage for future work.
- Addressing the five major types of Boundary Spanning Leadership.
- An overview of the importance of cross-sector work to accomplish outcomes that one unit, department, or agency would not be able to accomplish on its own.

If you have any questions about this worksheet, please contact ASTHO's Leadership team at LeadershipDevelopment@astho.org. The Leadership and Development team is excited to work on this initiative with your team!

1. Why did your team want to be a part of this initiative? What about this work resonates with you and your team

2. At the end of this work together, what would success look and feel like for your team?

3. At the end of this work together, what would success look and feel like for your team?

4. What assets (internal/external) does your organization, team, or unit have that will help you achieve your project goals?

5. What barriers (internal/external) do you anticipate facing as you engage in this work?

6. What would you like to learn from others in this process? How would you like to engage with them?


7. What type(s) of technical assistance and resources do you feel would benefit your team as you engage in this work?



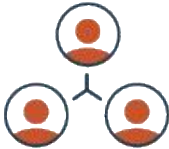


Appendix B: Boundary Spanning Challenge Questions

As you prepare for the Boundary Spanning Leadership training experience in public health, take a moment to identify current challenges or opportunities in your work. There will be opportunities to practice new behaviors and apply new skills to become a stronger leader when navigating boundaries. Throughout the training, you will revisit the challenges and opportunities identified, discuss them with fellow participants, and identify the next steps to address the identified challenges or opportunities. This pre-work will allow you an opportunity to identify the right approach for you to work on throughout your development process.

- What do you hope to accomplish by boosting your ability to work across boundaries to increase cross-cutting collaboration in overdose prevention and surveillance work?
- What is a challenge you face working across boundaries with potential and current partners (internal and external)?
- What would be different about you (or how you show up in your role) if you could better work across boundaries?
- Why is boundary spanning important for overdose prevention and surveillance work success?

Appendix C: BSL Five Common Boundaries



Five Types of Boundaries		
Vertical		<p>Leading across levels, ranks, seniority, authority, power</p> <p>Common Terms: span of control, hierarchy chart, seniority, top-down/bottom-up, superior/subordinate, exempt/nonexempt, cascade through the ranks</p>
Horizontal		<p>Leading across functions, units, peers, expertise</p> <p>Common Terms: division of labor, task differentiation, silos, stovepipes, turf battles, navigating the matrix, front office/back office, revenue center/cost center, legacy organizations, functions, units, peers</p>
Stakeholder		<p>Leading at the interchange of an organization and its external partners, e.g., alliances, networks, value chains, vendors, customers, shareholders, advocacy groups, governments, regulators, and communities</p> <p>Common Terms: constituents, networks, walled-off, iron curtain, closed doors, corporate-centric, not-our-business, insider/outsider, cross sector, corporate social responsibility</p>
Demographic		<p>Leading between diverse groups, including the full range of human diversity from gender and race to education and ideology</p> <p>Common Terms: heterogeneity, multicultural, mosaic, glass ceilings, generation gaps, intolerance, diversity-divides, ideological battles, personality differences, culture clashes</p>
Geographic		<p>Leading across distance, locations, cultures, regions, markets</p> <p>Common Terms: Regions, Markets, East/West, native/foreigner, global/local, HQ/field, mothership/satellite, language differences, virtual teams, geographically-dispersed teams</p>