

The Reflection of Partnership Context on Implementation and Process Outcomes in Cross-Sector Social Partnerships – The Case of a Local Red Cross in Portugal

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Abstract

In this article the research question is the following: how partnership context inherent to target-group problems and organizational flexibility of origin institutions is reflected on the implementation and process outcomes of partnerships? We studied three interventions directed towards active ageing and employment promotion on the unemployed with low qualifications, which integrated non-profit institutions, local public institutions, SME and an enterprise association. The local Red Cross was the convener. Based on case study methodology we analyzed sixteen semi-directed interviews of partners' representatives and the documentation of each intervention. The complex nature of the problems had implications on the implementation in terms of the diverse resources and partners involved, the collaborative and organizational levels of intervention, and in feed-backs based upon joint continuous evaluation of the actions directed towards target-groups. The flexibility of origin institutions had implications on the implementation in terms of the decision autonomy of the representatives, involvement of other members of the origin institutions in the intervention, financial and human resources limitations of partner-institution, and strategic SME integration of the social values of the non-profit institutions. The interventions which focused on feminine self-employment and active ageing co-created value due to the reformulation of goals and actions, increased partner skills for mutual benefit and increased interdependence awareness. The SME involved in the feminine self-employment intervention developed new organizational skills and social responsibility evaluation.

Keywords: cross-sector partnerships; partnership implementation; process outcomes; collaborative value creation; employment promotion; social integration

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1. Introduction

Partnerships have been created and developed because institutions of different sectors can generate more value together than working alone (Austin, 2010 ; Austin & Seitanidi, 2012a ; 2012b). The study of several forms of value co-creation is the basis for platform analyses (Selsky & Parker, 2010, 2005), involvement forms (Bowen et al., 2010), processes for value creation (Googins & Rochlin, 2000) or collaboration phases (Austin & Seitanidi, 2012a ; Selsky & Parker, 2005). Joint created value is inherent to complex social problems that need to be solved and due to which partnerships are formed and implemented. The partnerships which we studied intervened in Vila Nova de Gaia, a town in the North of Portugal which in 2013 had an unemployment rate of 17.9%, a total of 33 750 of which 58.8% were long term unemployed, 65.7% had low qualifications and 52.4% were women (Statistic National Institute, 2013). In Vila Nova de Gaia in 2011 the cover of elderly people support services was 7% (Statistic National Institute, 2012).

The Local Red Cross was the convener. We chose this institution due to its partnership experience in social integration and employment promotion, because it has shown ability to work with diverse sectors (non-profit, local public institutions, private sector) and is one of the best known and most important international institutions in terms of multidimensional social integration promotion.

The research question is the following: how is partnership context inherent to target-group problems and organizational flexibility of origin institutions reflected on implementation and process outcomes of partnerships? To analyze and discuss this question we crossed each of the context elements with implementation and process outcomes. We concluded that maturity differences between interventions can be explained by the durations of the partnerships, including previous joint working experience, respective degree of clarification in terms of distinct and complementary partners' roles, normative framework of public programs for financial support of post-professional training phases, and by co-creation of value.

Based on case study methodology we analyzed sixteen semi-directed interviews of partners' representatives and the documentation of each intervention. The article is organized in four sections: 1) literature review; 2) methodology; 3) findings; 4) discussion and conclusions.

2. Literature Review

The characteristics and roles of each type of institution are studied by the literature. Specialized skills of non-profit institutions allow value creation and sharing through integration in local networks in order to facilitate the communication between the private sector and local communities (Austin & Seitanidi, 2012a ; Brinkerhoff, 2002b ; Millar et al., 2004). Long period mobilization skills with continuing interactions, enrich collective action experience to accomplish legitimacy and trust before constituents (Austin & Seitanidi, 2012a ; Krishna, 2003). Non-profit organizations adopt business practices in order to improve the quality of the services delivered and to provide the private sector with an enriched knowledge of social problems and better ways of solving them (Austin & Seitanidi, 2012a ; 2012b). Common examples of non-profit sector added value in private sector partnerships include basic infrastructures integrated in communities, learning opportunities in the services provided which result from private sector employee's experience, or process development potential (Googins & Rochlin, 2000).

National governments provide legal and institutional background for partnerships, as well as financial and logistic resources (Brinkerhoff, 2002b), though legal background may present some lack of flexibility in its application (Waddell, 2000). The private agents' role regards financial and technical resources as well as management skills (Brinkerhoff, 2002b). Private sector added value in non-profit partnerships refers to, for example, the sharing of technical knowledge and professional management training (Googins & Rochlin, 2000). SME integration in local communities is reflected in corporate social responsibility focus (Inyang, 2013 ; Spence, 2007), mainly in strategic integration of expectations inherent to the behavior of local individuals and institutions that participate in SME partnerships (Jenkins, 2006 ; Perrini, 2006). SME legitimacy facilitates more direct and personal relations with the local community (Fuller & Tian, 2006) and the improvement of community relationships is one of the main SME drive factors (Vives, 2006).

The underlying context of partnerships takes into account problem nature and institutional background. Problem characteristics include severity, complexity and available resources (Hood et al., 1993), a social and economic crisis that generates a specific problem (Waddock, 1989), the existence of a critical community problem which is not well tackled (Trist, 1985), lack of public programs directed to less favored social groups (Gray, 1989) or diverse situational considerations (e.g. necessary resources) inherent to a social problem (Clarke & Fuller, 2010). Institutional background regards existent network stability (Hood et al., 1993 ; Waddock, 1989), financial and legal framework (Brinkerhoff, 2002b ; Waddock, 1989), convener's involvement (Gray, 1989 ; 1996 ; Waddock, 1989) or different institutional structures of potential partners in what regards to the flexibility for organizational change adequate for social problem resolution (Hood et al., 1993).

Analysis of partnership phases vary according to the main research objectives, adopted concepts and perspectives, variables studied in each phase, type and number of phases. Based upon an extensive literature review on cross-sector social partnerships, Selsky & Parker (2005) focus their attention on three phases: formation, implementation and outcomes.

In the formation phase the authors focus on previous collaboration in terms of the organization's characteristics and respective reasons for interactions (Seitanidi et al., 2010), and on factors which allow partner choice evaluation, such as, previous experience in different economic sectors, common geographic area, mutual interests and 'personal chemistry' among the top managers of partner organizations (Seitanidi & Crane, 2009). Bearing in mind a dynamic perspective, formation is not permanent, later in time some partners can join partnership and others step out (Clarke & Fuller, 2010). In this phase, the partner's perception of problem importance and the fact that there are potential benefits which exceed expected costs, is essential (Waddock, 1989). Formation also implies objective agreements (Seitanidi & Crane, 2009) and the stronger the agreement, the easier the specific objectives design (Iyer, 2003). The establishment of specific objectives is essential for implementation design as a process for fundamental consensus building (Waddock, 1989). In this process, an organization with legitimacy and authority is vital to bringing potential partners' top managers closer (Gray, 1989 ; 1996 ; Huxham, 1996 ; Waddock, 1989), in a process of experimentation and negotiation (Seitanidi & Crane, 2009) in order to reach an agreement on obligations and roles inherent to planned actions (Ring & Ven, 1994).

In the partnership formation phase, Clark & Fuller (2010) highlight plan formulation, that is to say, the partnership mission and values reflected on collaborative objectives. Plan formulation can be quick or take several years (*idem*).

In the implementation phase the partners' participation is functional and restricted to specific areas (Iyer, 2003) and results in the joint execution of programmed activities and procedures (Brinkerhoff, 2002b). Responsibility is reflected on each partner task definition (Iyer, 2003) based upon commitment execution (Ring & Ven, 1994) and on the mutual dependency inherent to mutuality (Brinkerhoff, 2002a; 2002b). Partnership operationalization leads to processes stabilization (meetings, documentation, partnership structure) and implies multiple reference points in each organization resulting in internal networks involving a large number of people (Seitanidi & Crane, 2009).

Continuous feed-backs are reflected in corrective actions, changes in activity juxtaposition and cyclical decisions, on the basis of continuous monitoring and evaluation (Clark & fuller, 2010). The establishment and maturity of partnerships constitute continuous processes which, based on feed-backs, influence strategy and programmatic developments inherent to an eventual intervention renewal or reevaluation directed to certain social needs (Selsky & Parker, 2010 ; Waddock, 1989). Partnership relations are non-hierarchical in order to favor power balance (Shaw, 2003) and imply the integration of top managers in partnership coordination to guarantee quick decision making and autonomy with respect to their origin institutions (Hood et al., 1993 ; Waddock, 1989). Clarke & Fuller (2010) and Clarke (2013) state that implementation should also be studied on an organizational level for each partner and should focus on individual organizational skills for management. Each organization keeps its autonomy and uses its skills to reach some of collaborative objectives through 'internal' implementation, that is to say, on the basis of actions which are not inter-organizational (*idem*). Implementation at organizational level is adequate for partnerships which have less details in plan formulation (Clarke & Fuller, 2010 ; Hardy et al., 2003 ; Huxham, 1996). SME partnerships imply informal and personal relations (Inyang, 2013 ; Jenkins, 2006 ; Spence & Lozano, 2000) and ethical and personal values associated with the commitment and autonomy of top managers in implementing programs and actions on corporate social responsibility (Freisleben, 2011 ; Hsu & Cheng, 2011 ; Inyang 2013 ; Jenkins, 2006 ; Spence, 2007).

Partnership process outcomes are reflected in a variable balance of formal and informal processes which in time become more informal, that is to say, they constitute 'psychology contracts' regarding non-written and implicit obligations (Iyer, 2003 ; Ring & Ven, 1994). Informality in communication (telephone, e-mail) facilitate a higher and easier information flux, an open access to all members of involved organizations (Iyer, 2003), taking advantage of the diverse information sharing channels (Shaw, 2003) and continuous dialogue (Brinkerhoff, 2002a). Partnership process outcomes are also associated to changes and adaptations that occur due to the experience of joint actions execution (Clarke & Fuller, 2010 ; Clarke, 2013). Collaborative experience allows for the development of new or enhanced skills directed to diagnosis and problem solving (Austin & Seitanidi, 2012a ; 2012b ; Gray, 1989 ; Huxham, 1996 ; Selsky & Parker, 2010 ; Trist, 1985), for interdependency awareness (Hood et al., 1993) and for reinforcement of competencies through key-resource and knowledge transfer (Austin & Seitanidi, 2012a; 2012b; Brinkerhoff, 2002a; 2002b; Hardy et al., 2003 ; Selsky & Parker, 2010 ; 2005). Outcomes in SME corporate social responsibility highlight the subjectivity of intangible benefits (Jenkins, 2006 ; Murillo & Lozano, 2006) and the feed-backs of the local communities in terms of corrective actions to increase social performance (Jamali et al., 2006). The reinforcement of shared vision and objectives is related to the success of interventions toward a social problem (Hood et al., 1993 ; Shaw, 2003).

One of the most referred outcomes by the literature is partners' trust which is associated to expressed commitment and autonomy by top managers in the partnership (Hood et al., 1993 ; Iyer, 2003 ; Ring & Ven, 1994 ; Shaw, 2003), inter-organizational flexibility (Krishna, 2003 ; Ring & Ven, 1994 ; Shaw, 2003), action continuity for medium-long term (Waddock, 1989), mutual understanding and knowledge between partners' organizations (Austin & Seitanidi, 2012a ; 2012b ; Huxham & Vangen, 1996 ; Seitanidi & Crane, 2009 ; Waddock, 1989) and the enrichment of personal relationships among individuals who participate in partnership actions (Hood et al., 1993 ; Huxham & Vagen, 1996 ; Seitanidi & Crane, 2009).

3. Methodology

Qualitative studies enable the analysis of a large spectrum of action experiences for a reduced number of individuals, based upon intensive semi-directive interviews tuned in terms of time for each interview and number of guiding questions (Patton, 2002). The case study focuses on a particular phenomenon in which several actors are involved in an action sequence and relation adjustments (Mitchell, 1983). The researcher searches for interactions inherent to phenomenon substantial characteristics and looks for patterns or latent elements which previous studies did not focus on or deepen (Berg & Lune, 2011).

We applied case study methodology based upon document analysis (activities reports, public programs applications, professional training reports, normative and financial background of public programs) and content analysis of sixteen semi-directive interviews directed to partner organizations' representatives in November and December 2013. The analytical framework is presented in table 1.

Table 1 – Analytical framework

Variables	Indicators
Partnership context	<ul style="list-style-type: none"> • Complexity and severity of target-group and individuals ' social and economic problems • Degree of flexibility of origin institutions toward partnership work • Normative framework of public programs which provide financial support to interventions • Previous experience with partner-institutions
Partnership implementation	<ul style="list-style-type: none"> • Partners' participation in terms of resource sharing and developed tasks • Partners' articulation • Feed-backs inherent to on-going evaluation • Degree of decision autonomy of partners' representatives • SME strategy for non-profit partnerships
Process outcomes	<ul style="list-style-type: none"> • Reformulation of interventions in terms of goals and actions • Facilitation /obstacles to origin institutions' absorption of new goals and actions • SME corporate social responsibility evaluation

The criteria for the choice of partner-institutions and respective interviewees were the following:

- The local Red Cross in Vila Nova de Gaia, that has partnership experience in social integration of the elderly and in employment promotion;
- Non-profit institutions, SMEs, and public institutions which, at the time of the inquiry, had at least two years of partnership experience with local Red Cross;
- Partner-institutions that participated in at least one key-task in the corresponding intervention;
- Interviewees chosen by the Local Red Cross coordinators of each intervention, who had at least two years of experience in partnership work in the corresponding intervention.

In the 'Active Ageing and Home Support' (AAHS) intervention the partners were the Local Red Cross, Junta de Freguesia (sub-municipality institution), a non-profit institution for the support of the elderly, the Local Health Center, Local Police, Regional Hospital, Firemen and Salubrity Municipal Department. The financial support came from the Social Security Cooperation Agreement for Daily Centers and Home Support Services. Our attention focused on the period between 2003 and 2011 of the intervention. The main objectives of this intervention were active ageing activities for the elderly and basic home support for people with economic, physical and mental limitations.

In the 'Professional Training for Integration in Existing Firms' (PTIEF) intervention the partners were the Local Red Cross, four SME (to assure anonymity we consider SME X, Y, W and Z) and the Local Public Employment Centre. The financial background was provided by the Human Potential Operational National Program. The intervention took place between 2009 and 2011. The key objective was professional training directed to the unemployed with low qualifications.

In the 'Feminine Self-employment' (FS) intervention the partners were the Local Red Cross, a SME, the Local Public Employment Centre and Oporto Wine Firms Association. Financial support came from the Social Development and Employment Operational National Program and from the Human Potential Operational National Program. The intervention took place between 2003 and 2011 and was directed at unemployed women with low qualifications and the main objectives were management and consultant professional training and support of created firms during the first three years.

4. Findings

In table 2 we systematize the findings of the inquiry. We consider two of the context elements of partnerships: the complex nature of problems and the flexibility of origin institutions toward partnership working. These two context elements are reflected in the intervention implementation and in the process outcomes.

Table 2 – Findings

Phases / Elements of context partnership	Problem complexity	Flexibility of origin institutions toward partnership working
Implementation	Various resources and partners involved Collaborative and organizational levels of intervention Feed-backs based upon joint on-going evaluation of the actions directed towards target-groups	Decision autonomy of representatives Intervention involvement of other members of the origin institutions Partner-institution limitations in terms of financial and human resources Strategic SME integration of non-profit institutions' social values
Process outcomes	Reformulation of actions and goals Partner skill increase for mutual benefit Increased awareness of the interdependence associated with consensus building around the critical importance of problems and interventions	SME organizational adaptation with the development of a new skill in the FS intervention SME social responsibility evaluation in the FS intervention

The complex nature of problems has implications on the implementation in terms of the various resources and partners involved, in the collaborative and organizational levels of intervention, and in the feed-backs based upon joint on-going evaluation of the actions directed towards target-groups. The process outcomes inherent to the complexity of the problems consist of reformulations of actions and goals, the increase in partner skills for mutual benefit, and increased awareness of the interdependence associated with consensus building around the critical importance of problems and interventions.

The human resources and partners involved in interventions reflect the multidimensionality of the problems. In the AAHS intervention the institutions covered the areas of social assistance (non-profit institutions and sub-municipality institution), health (Local Centre and hospital), police supervision, salubriousness (Municipality) and urgency transport (firemen). In the interventions for employment promotion the institutions involved provided information on financial microcredit programs and local employment offers (Local Public Employment Centre), supported the selection of trainees in FS intervention (Local Red Cross, Oporto Wine Firms Association and consultancy SME), provided professional training (four SME in PTIEF intervention), consultancy and initial support of newly created firms (consultancy SME) and social support directed towards unemployed women with low qualifications and with self-employment potential (Local Red Cross). In this article we are going to refer the diverse actions of each intervention in order to exemplify problem multidimensionality. The team of AAHS intervention integrated a physical trainer, psychologists, social assistants, health professionals and specialized personnel for home support. The teams for employment promotion included professional trainers of diverse areas (e.g. informatics, languages, accountancy), SME and firms association top managers and specialized employees (among other roles, some of them were also professional trainers), social assistance professionals, psychologists and specialized technicians for public employment programs.

Intervention implementation was carried out on collaborative and organizational levels. Essential elements of collaborative levels were partners' resource sharing, joint decisions on the reformulations of actions and goals based upon feed-backs, and execution of some reformulations. Implementation on organizational levels refers to the tasks which were executed separately by each partner in their origin institution, both in terms of internal resources management as well as execution of the other reformulations.

Feed-backs resulted from joint on-going evaluation of actions directed to target-groups, bearing in mind the complexity of individual needs and problem solving. In home support for the elderly, for example, each individual case implied specific actions. In some cases the actions were undertaken within the existing network, but in other cases more informal and flexible actions were needed in order to provide quick and effective specific interventions.

In the FS intervention feed-backs generated different actions to answer the following key-question: what kind of partnership organization is needed to support and develop competences of potential managers who are unemployed women with low qualifications facing family problems? In the PTIEF intervention the key question related to partnership organization was: what competencies are needed to increase the employability of the unemployed with low qualifications and with social and labor market integration problems?

We now focus our attention on outcomes inherent to problem complexity, starting with action reformulations based upon feed-back and target-group needs.

In the AAHS intervention the articulation between partners favored pragmatism, informality and mutual trust: "this is a 'bridge' that you cannot achieve easily, it is a mutual building of knowledge and trust during an extensive period of time. The outcome is an established network for articulated field intervention, where we already know how each partner works and what people we have to contact" (representative of Junta de Freguesia, sub-municipality institution). The reinforcement of the working partnership 'history' depended on specific joint action reformulation and joint problem solving regarding several intervention areas: organization of socio-cultural activities, needs evaluation of the elderly for home support or in-patient hospitalization, corresponding service delivery, systematization of reports for the Social Security Authorities for nursing home hospitalization (for elderly people that could not be alone), and criminal complaints to be sent to Public Authorities regarding domestic violence or fraud. Initially, contacts between partners were formal and problems took more time to be solved. But as the partnership experience evolved, contacts gradually became more informal and pragmatic in order to face emergencies (e.g. insanity problems). According to the Local Police representative "the more you work with the institutions, the easier it is to deal with them, we find critical situations and we phone each other to organize a quick and effective specific action. The Police cannot solve problems alone. We cannot act quickly with other institutions due to bureaucratic red tape delays". Goals reformulation took into account a higher number of elderly people with home support or integrated in a daily center.

Internal active ageing activities of non-profit institutions were diversified (theatre, cooking, painting, reading, gymnastics, singing) contributing to enrich partnership activities through the increase of useful knowledge and experience for home support and joint socio-culture activities (e.g. police street prevention). Complementary to these actions, technical teams of non-profit institutions supported by their top managers developed specific tasks directed to obtain a Social Security quality certification regarding the improvement of the food safety system, logistic resources for elderly people, and document organization for each individual.

In the PTIEF intervention task reformulation aimed at adaptation to the target-group. Professional trainers provided individual support to increase motivation and self-esteem of the trainees: "the professional trainer has to talk with each individual, act as a tutor, listen to what people have to say, and sometimes this generates changes" (representative of SME X); "on the basis of the feed-backs of the professional trainers regarding the reactions of trainees to learning, a specific intervention was planned in order to motivate the individuals" (representative of SME Y). The behavioral area was also developed in order to increase self-esteem. There were also reformulations of the teaching content: "it is possible to transmit technical knowledge in a less boring way, by being more practical and flexible, in order to reach trainees needs" (representative of SME Z). The role of the Local Red Cross was reinforced to make these reformulations more effective. All training actions took place in the Local Red Cross facilities to provide specific support for the trainees by the team of social assistants and psychologists in articulation with the partners' coordinators and with the trainers. The support focused on personal contact with each individual and was centered on motivation, self-esteem, family background and assiduity.

The nature of the FS intervention implied a reformulation of goals and tasks and the definition and execution of new tasks. The partnership between the Local Red Cross and the SME consultancy resulted in a more realistic goal in terms of the number of created firms due to the Portuguese economic recession.

The reformulation of tasks related to several actions: the support was also provided to the women's family (the husband was involved in all the phases) ; more emphasis was placed on specialized consultancy (legal advice, accounting, finance, fiscal support) to the detriment of general consultancy (firm diagnosis and introduction) "in order to provide more hours of support for each entrepreneur" (interview of the representative of the SME consultancy); corporate financial reports were provided based upon periodic visits to the recently created firms, in order to evaluate action impacts; entrepreneurs had to make a more detailed description of their business plan and the selection team included the participation of Oporto Firms Wine Association. New tasks consisted of creating an entrepreneurs' network organization (integrating entrepreneurs of previous interventions) and going on field trips (business fairs).

Another outcome inherent to problem complexity was the improvement of a partner's skill for mutual benefit. In the AAHS intervention, joint actions for active ageing and home support promoted mutual benefits in terms of a better and deeper knowledge of the target-group problems and each partners' key-tasks, as well as network stabilization and flexibility, and lead to increased mutual trust thus taking advantage of informality. In the FS intervention (that took place between 2003 and 2011, as we saw above) the understanding of the social and economic dimensions by the Local Red Cross and the SME consultancy was developed through their partnership experience which began in 1998 till 2002 in project Le Cheile (European Commission Initiative Recite II): "entrepreneurship professional training was a great learning experience, I am a social assistant and project Le Cheile helped me to change my way of doing things, I was very 'attached' to traditional social interventions. Community work can be done by creating firms and employment, I listened to a 'language' to which I was not used to, business plan, accountability, why work with some financial sources and not with others ... this implied a significant commitment to a very different way of social intervention" (representative of Local Red Cross). The interview of the SME consultancy representative reflects this kind of experience: "our firm has an entrepreneurship knowledge and experience that Red Cross did not have. And Red Cross has knowledge and experience dealing with the socially underprivileged. These interventions only make sense in a puzzle format, articulating various areas, dividing responsibilities. I am deeply involved in this partnership due to an extensive period of joint work and because I identify with Red Cross social values".

Finally, the complexity of the problems was reflected in an increased awareness of the existing interdependence and the strengthening of consensus around the critical importance of problems and interventions. These outcomes were brought upon by the joint experience of articulating tasks which permitted a better knowledge of the multidimensional needs of target-individuals during the interventions.

Looking again at table 2, the flexibility of origin institutions towards working in partnership has implications on the implementation in terms of the decision autonomy of representatives, the intervention involvement of other members of the origin institutions, the partner-institution limitations in terms of financial and human resources, and the strategic SME integration of non-profit institutions' social values. The outcomes inherent to partners' flexibility are SME organizational adaptation for new skills development and social responsibility evaluation in the FS intervention.

The autonomy of the representatives in implementing main decisions explained why hierarchical relations did not block the processes. In the execution of actions the autonomy in decision making allowed flexibility (as we saw above) on changing key-tasks (in the three interventions) and goals (FS and AAHS interventions). Organizational level implementation preserved and facilitated the autonomy of origin institutions in partnership work mainly through the reinforcement of core competences. Top managers revealed openness to the involvement of other members of their origin institutions in the interventions as referred above when we analyzed the human resources in each intervention. Participation of Local Public Employment Centre representatives however was limited by typical 'mass' attendance initiatives in a geographic area which in 2013 covered a total of 33750 unemployed people. In the AAHS intervention the Local Health Centre revealed difficulties in involving family doctors due to a high number of patients per doctor (around 1500) and had only one social assistant participating, who is responsible for a geographic area characterized by a high number of elderly people with low economic resources.

The partner-institution limitations in the areas of financial and human resources were due to the severity of the problems of the target-groups in the interventions. Origin institutions' top managers referred that time demands for the partnerships pressured professional obligations in their own organizations, which implied a higher number of extra hours dedicated to partnership interventions.

In recent years the Portuguese economic recession increased unemployment problems and the number of elderly people facing difficulties in social and economic integration and particularly in what refers to home support needs. These conditions put pressure on partners' financial and human resources. This pressure implied new applications to public financing (at a time when the Portuguese government has been cutting social programs) to guarantee partnership continuity and new sources of revenue for non-profit self-financing. SME also revealed financial difficulties and its intervention participation was entirely dependent on public funding. In the AAHS intervention the financial and human resource limitations of non-profit institutions were reflected on lack of vacancies in day centers and on scarce human resources for individuals who need 24 hour home support.

Strategic SME integration of non-profit social values was based upon individual support in professional training, after training actions and on personal/family matters. This strategic integration can be explained by two factors. The first factor is the key importance of personal and direct relationships between the Local Red Cross and SME representatives which was reflected in the alignment of social values: "Red Cross representatives have a lot of experience, they have an infinite ability to help and to give" (representative of SME W) ; "the Red Cross has social objectives to support individuals in terms of self-esteem and personal and professional satisfaction based upon a social integration plan, we share the same objectives and values" (representative of SME Z) ; "it is a crucial social cause, when I started in the Le Cheile project I was 'touched' by the social actions of the Red Cross" (representative of SME consultancy).

Second, the SME social responsibility was carried out to benefit existing firms through the development and enhancement of the competences and qualifications of current and potential employees: "as consultants where are in the markets, our social role should benefit existing employees through professional training and competence development which generate added value to their job or increased employability" (representative of SME X). The specific nature of the target-groups was associated with local employment promotion: "the mission of the Red Cross gives priority to these kind of target-groups at various levels ; through this partnership we also give priority to these target-groups and consequently we contribute to improve their conditions, qualifications and competences" (representative of SME Y) ; "it is important for us to contact with these kind of individuals, social problems do exist

and if we are faced with them we can also learn by helping” (representative of SME W) ; “our firm is increasingly integrated in a local partnership context to attend to specific social-economic needs, in a geographic area with a high unemployment rate” (representative of SME Z).

In what refers to the process outcomes, the flexibility of consultancy SME in the FS intervention was reflected on organizational adaptation and the development of new skills. The creation of a new product benefited from the partnership experience of this SME with the Local Red Cross and revealed its ability to adapt to the methodologies of non-profit institutions: “we already know the methodologies and objectives of the Red Cross. When we work with other networks (e.g. ‘antipoverty network’) we adapt to client’ needs but always based on partnership work. Non-profit institutions want ‘zero risk projects’, so we support the execution of the business projects guaranteeing economic and financial sustainability” (representative of SME consultancy). In terms of the evaluation of SME social responsibility, two SMEs of the PTIEF intervention renewed quality certification as professional training institutions. The SMEs in the PTIEF intervention however showed difficulties in systematizing reports on their social responsibility because “there are internal impacts that we cannot quantify, that are intangible” (representative of SME Y) and due to the lack of information related to the integration of trainees in the labor market. In the FS intervention, consultancy, advice and mentoring of entrepreneurs implied report systematization of the firms’ financial and economic situation and joint evaluation by the SME with the local Red Cross in terms of social learning.

4. Discussion and Conclusions

We focused on the partnership context related to target-group problems and the flexibility of origin institutions in order to discuss partnership maturity in each of the interventions. In spite of the importance of an ‘isolated’ analysis of collaboration effects (Hardy et al., 2003) it is essential to understand how problem nature and the organization of origin institutions influence partnership processes. The analysis of collaborative effects implies the integration of the implementation on an organizational level and understanding the influence of the characteristics and problems of the target-groups on the partners’ actions.

We observed that the three interventions all have the key-elements of implementations of partnership processes: diversity of human resources and partners (Brinkeroff, 2002a ; Hood et al., 1993 ; Iyer, 2003), collaborative and organizational levels of execution (Clarke & Fuller, 2010 ; Clarke, 2013), feed-backs based upon on-going evaluation (Clarke & Fuller, 2010 ; Selsky & Parker, 2010 ; Waddock, 1989), decision making autonomy of the partners' representatives (Hood et al. , 1993 ; Shaw, 2003 ; Waddock, 1989), involvement of the human resources of the origin institutions (Seitanidi & Crane, 2009), human resource and financial limitations in the origin institutions (Hood et al. 1993) also associated with the legal and financial restriction of public programs (Brinkeroff, 2002a ; Waddell, 2000) and strategic SME integration of the values of non-profit institutions (Jenkins, 2006 ; Inyang, 2013 ; Perrini, 2006). Implementation is fundamental because it constitutes the base of the execution of partnerships regardless of the reached process outcomes.

Intervention partnership maturity is associated with partnership making and is reflected on process outcomes. The institutions involved in the PTIEF intervention did not have previous partnership experience among them and process outcomes were limited to lesser deepened reformulation of some actions and to induced systematization of social responsibility through professional training quality certification on two SME. The FS and AAHS interventions however had previous partnership experience involving key-institutions before 2003 (kick-off year) (Seitanidi et al., 2010 ; Seitanidi & Crane, 2009) and presented process outcomes in terms of deep reformulations of goals and actions (Austin & Seitanidi, 2012a ; 2012b ; Clarke & Fuller, 2010) and the SME developed social responsibility evaluation (Jamali et al., 2009 ; Jenkins, 2006 ; Murillo & Lozano, 2006).

In the FS intervention, the reformulation of goals and the more developed (compared with the PTIEF intervention) joint work for base-action reformulation and creation of new activities reflected the need for on-going entrepreneurship support for the unemployed with low qualifications. In the AAHS intervention, the reformulation of goals and actions reflected the stabilization and development of the partnership network which benefited and was benefited by the development of internal activities of the non-profit institutions in terms of active ageing. These interventions generated integrative orientation for social issues (Selsky & Parker, 2010), that is, each partner' competencies were combined together to focus on individuals' social needs.

In the PTIEF intervention, on the other hand, less thorough reformulations were carried out through human resource sharing between institutions (professional trainers) and through the local Red Cross social and psychological support of trainees.

In the PTIEF intervention there was no increase in skills of the other partner for mutual benefit. On the contrary in the FS intervention the learning of the business component by the local Red Cross when supporting entrepreneurship, benefited and was benefited by the learning of the social dimension by the SME, which corresponds to a transferred resource value (Austin & Seitanidi, 2012a) or collaborative strategic effects (Hardy et al., 2003). These kind of process outcomes were also present in the AAHS intervention. Before the kick-off the core institutions (non-profit institutions, local health center and sub-municipality institution) already had knowledge and experience with elderly people. By asking for the partner's help to solve a problem or to organize a socio-cultural activity, more opportunities were created to 'exercise' already existent competencies and adaptation skills were also developed, that is to say, the partnership implied that the institutions deepened mutual knowledge on the basis of the joint work. The strengthening and greater flexibility of the network (e.g. immediate communication by mobile phone and the overcoming of red tape barriers) generated mutual benefits on the basis of each partner's skills for joint articulation.

In the FS intervention the joint learning of the social dimension enabled the SME to reveal organizational adaptation by creating a new firm product directed at non-profit institutions, which reflected a significant change bearing in mind its private consultancy core business. These type of process outcomes constitute an initial co-creation of synergetic value (Austin & Seitanidi, 2012a) based upon fundamental strategic changes in SMEs directed at non-profit institutions. In the AAHS intervention organizational adaptations did not result from working in partnership but from internal needs of the non-profit institutions (e.g. increased internal revenues, preparation for quality certification).

In the SME social responsibility implementation elements are common to the PTIEF and FE interventions, namely, SME strategic integration of the representatives' non-profit social values in terms of value alignment and employment promotion directed at target-groups with social and labor market integration problems. In terms of process outcomes however in the PTIEF intervention social responsibility evaluation was induced by external entity quality certification.

Moreover this evaluation was limited by lack of human resources, fact that prevented the evaluation of the post professional training phase which in turn raised increased difficulties in the analysis of intangible benefits (besides the labor market integration rate of trainees). In the FE intervention however the high level of the required needs for the consultancy phase (which was financed by the public program) and for counseling and, in some cases, mentoring of the entrepreneurs during the initial three years, implied the systematization of financial-economic reports in each created firm and regular contacts with entrepreneurs businesses. The entrepreneurship network (integrating entrepreneurs from the 2003-2011 partnership period) and the organization of visits (e.g. businesses fairs) allowed qualitative evaluation development, in addition to the quantitative outcomes (47 firms created since 2003 of which 37 are still in business, 116 direct employment opportunities).

Maturity differences between the PTIEF intervention and the AAHS and FS interventions can be explained by partnership duration including previous joint working experience, corresponding degree of clarification in terms of distinct and complementary partners' roles, normative framework of public programs for the financial support of the post-professional training phase, and by collaborative value creation. The AAHS and FS interventions benefited from a longer implementation time (2003-2011, compared with 2009-2011 in PTIEF intervention) and having had previous partnership experience with the key-partners that participated in the interventions. While in PTIEF interventions we observe role juxtaposition among partners, in the AAHS and FS interventions distinct and complementary clarification of roles was achieved (Austin & Seitanidi, 2012a). The normative framework of public programs which supported the PTIEF intervention did not finance the post-professional training phase which prevented the creation of partner representatives teams to support the integration of target-individuals in the labor market and did not allow for favorable conditions for different process outcomes, based upon for example the organization of company internships, professional orientation and family background of each trainee. Finally, while in the PTIEF intervention the co-creation value is 'associational' focusing on simple 'transactions' (Austin & Seitanidi, 2012a ; Selsky & Parker, 2010), in the AAHS and FS interventions we observed the co-creation of interaction value (Austin & Seitanidi, 2012a) inherent to the development of mutual trust which in turn was associated with the partners' mutual knowledge and increased joint solving problem capability.

In these interventions if institutions had developed isolated actions, the support of elderly people and the unemployed women with low qualifications would have been less effective in terms of the quality of the service delivered. Informality and pragmatism were balanced with formal requirements in order to develop 'institutionalization' (Ring & Ven, 1994) of partnership relations typically occurring with prolonged periods of time.

Further research is required to highlight the impact of partnership context on implementation and process outcomes. Specific case studies are needed to clarify the influence of socio-economic problems and flexibility of origin institutions on partnership maturity. This can be accomplished using longitudinal studies based upon questionnaires and semi-directed interviews conducted after the interventions or in an on-going basis.

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