

Procedural Collaboration and The Limits of Collaborative Governance in Public Service Delivery: Evidence From Drug Prevention Services at The Local Level

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Abstract

Background This article examines why collaboration between formal organizations often fails to produce substantive public service outcomes in complex policy contexts. Focusing on local drug prevention services in Indonesia, this article addresses a conundrum in which administrative input, outreach activities, and inter-agency coordination are increasing, while prevention outcomes remain weak. Existing collaborative governance research explains how cross-sectoral coordination is formed, but it is less clear why institutionally active collaboration may remain ineffective substantively.

Methods Using a qualitative single case study at the National Narcotics Agency in Gorontalo City, the study used interviews, focus group discussions, observations, and institutional documents to reconstruct the mechanisms linking collaboration and service performance.

Results The findings suggest that collaboration operates primarily as procedural collaboration: formal forums, agreements, and participation are present, but engagement based on principles remains limited, shared motivation is uneven, and the capacity for joint action is fragmented. As a result, collaboration results in administrative outputs rather than stable service impacts.

Conclusion This article contributes to collaborative governance theory by conceptualizing procedural collaboration as an internal constraint of collaborative governance and by extending the framework of the Collaborative Governance Regime towards service impact performance.

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Keywords

Key words: Collaborative Governance; Procedural Collaboration; Service Impact Performance; Drug Prevention Services; Collaborative Governance Regime

Introduction

Drug prevention increasingly represents a complex public governance problem that cannot be addressed through hierarchical bureaucracy or the capacity of a single institution alone. The expansion of illicit drug circulation, the interconnection between public health, education, law enforcement, family resilience, and social vulnerability transform drug prevention into a cross-sectoral governance challenge requiring sustained interaction among multiple actors. Contemporary public administration literature increasingly recognizes that wicked problems emerge when causal relations are uncertain, actors are interdependent, and solutions cannot be produced through linear administrative intervention (Head & Alford, 2015). In such conditions, governance shifts from government-centered control toward collaborative governance arrangements that rely on interaction, negotiation, and collective problem-solving across institutional boundaries (Bryson et al., 2015; Emerson & Nabatchi, 2015).

This governance complexity is particularly visible in Indonesia through the implementation of the Prevention and Eradication of Narcotics Abuse and Illicit Circulation (P4GN) program. Over the past decade, institutional authority, coordination mechanisms, regulatory support, and fiscal commitments for drug prevention have expanded significantly. Cross-sector forums involving local governments, educational institutions, health agencies, police, religious organizations, and community groups have also become increasingly institutionalized. However, multiple studies indicate that collaborative arrangements in complex public services frequently remain fragmented, administratively oriented, and weakly connected to substantive social transformation (Bryson et al., 2015; Emerson et al., 2012; Osborne et al., 2022; Sørensen & Torfing, 2021). This condition creates a persistent paradox in public governance: administrative capacity and formal coordination continue to increase, while substantive prevention outcomes remain unstable.

The paradox becomes empirically visible in the National Narcotics Agency (BNN) of Gorontalo City. In recent years, counseling programs, volunteer training, outreach activities, institutional meetings, and interagency coordination have intensified considerably. Administrative indicators such as program implementation, participant attendance, budget realization, and reporting compliance demonstrate positive trends. Nevertheless, substantive outcomes, including reductions in drug vulnerability, strengthened social resilience, increased prevention literacy, and sustainable behavioral change have not developed proportionately. This situation reflects what Osborne (2018) and Osborne et al. (2022) describe as a gap between administrative performance and service impact performance, where organizations appear administratively successful while producing limited public value within the broader service ecosystem.

Collaborative governance literature has extensively explained why cross-sector collaboration emerges and how institutional arrangements are formed. Early collaborative governance studies emphasize stakeholder inclusion, consensus-oriented dialogue, trust-building, and facilitative leadership as foundations of collaborative processes (Ansell & Gash, 2008; Bryson et al., 2015). Subsequent developments through the Collaborative Governance Regime (CGR) framework further conceptualize collaboration as a dynamic regime shaped by principled engagement, shared motivation, and capacity for joint action (Emerson et al., 2012; Emerson & Nabatchi, 2015). These studies successfully explain how collaborative structures

are institutionalized, but they remain less capable of explaining why formally active collaboration frequently fails to produce substantive public service outcomes.

The same limitation also appears in public service performance literature. Classical service quality approaches continue to prioritize administrative indicators such as reliability, responsiveness, assurance, empathy, and tangibility (Zeithaml et al., 1985). Although important, these indicators remain insufficient for preventive services that depend on long-term social transformation and cross-sectoral interaction. Public service logic increasingly emphasizes that public value is not generated solely by organizational output, but through systemic interaction between government institutions, communities, citizens, and supporting actors within public service ecosystems (Osborne, 2018; Osborne et al., 2022). Consequently, successful drug prevention cannot be measured merely through coordination intensity or program delivery, but through the ability of collaborative arrangements to generate measurable social impact and collective resilience.

This article argues that the central problem does not lie in the absence of collaboration, but in the emergence of collaboration that remains procedurally stable without becoming substantively transformative. In many public governance settings, forums, meetings, coordination systems, reporting mechanisms, and institutional participation may function regularly, yet collective problem-solving, shared ownership, adaptive learning, and integrated social transformation remain weak. Critical collaborative governance studies increasingly recognize that formal interorganizational activity does not automatically produce substantive interdependence or policy innovation (Voets et al., 2021; Sørensen & Torfing, 2021).

To answer these problems, this article uses CGR as the primary analytical lens because it allows an analysis of the quality of dialogue, trust, legitimacy, commitment, and capacity for joint action in collaborative processes (Berardo & Lubell, 2016; Bryson et al., 2015; Emerson et al., 2012; Emerson & Nabatchi, 2015). However, this article also argues that CGR needs to address to explain the conditions when collaboration is administratively active but still fails to produce service impact. This article calls this condition procedural collaboration, i.e. strong collaboration on forums, meetings, task sharing, reporting, and formal participation, but weak in building shared problem-solving, shared responsibility, shared data use, and substantive capacity for social change.

To explain this condition, this study introduces the concept of procedural collaboration. Procedural collaboration refers to a condition in which collaboration operates actively at the formal-administrative level through meetings, coordination forums, task distribution, institutional reporting, and symbolic participation, but fails to consolidate substantive collective capacity for social transformation. In this condition, dialogue becomes formalistic, trust remains uneven, commitment is fragmented, and shared responsibility does not fully develop across participating institutions. Therefore, collaboration functions more as an administrative continuum than as an adaptive governance mechanism capable of generating public value.

Conceptually, this study positions drug prevention governance as a wicked problem requiring collaborative governance arrangements because no single institution possesses sufficient authority, legitimacy, information, or operational capacity to solve the problem independently (Head & Alford, 2015; Bryson et al., 2015). Within this governance

environment, collaborative effectiveness depends on principled engagement, shared motivation, and capacity for joint action as proposed in the CGR framework (Emerson et al., 2012). However, this study argues that formal collaboration does not automatically produce substantive service outcomes because collaborative processes may become trapped within procedural logic dominated by administrative compliance and symbolic coordination.

In this mechanism, weak deliberative depth, fragmented institutional commitment, uneven operational readiness, and limited collective learning transform collaborative governance into procedural collaboration. Consequently, collaboration generates high administrative outputs, including intensive coordination, extensive reporting, increased activities, and visible institutional participation, without producing equivalent service impact performance. The resulting paradox demonstrates that collaborative governance may appear institutionally successful while simultaneously failing substantively. Thus, the central analytical relationship developed in this study can be formulated as follows: drug prevention as a wicked problem encourages formal collaboration across sectors; formal collaboration develops into procedural collaboration when principled engagement, shared motivation, and collective action capacity are not substantively consolidated; procedural collaboration subsequently produces strong administrative outputs but weak service impact performance.

Visually, this conceptual relationship can be incorporated directly at the end of the introduction as follows:

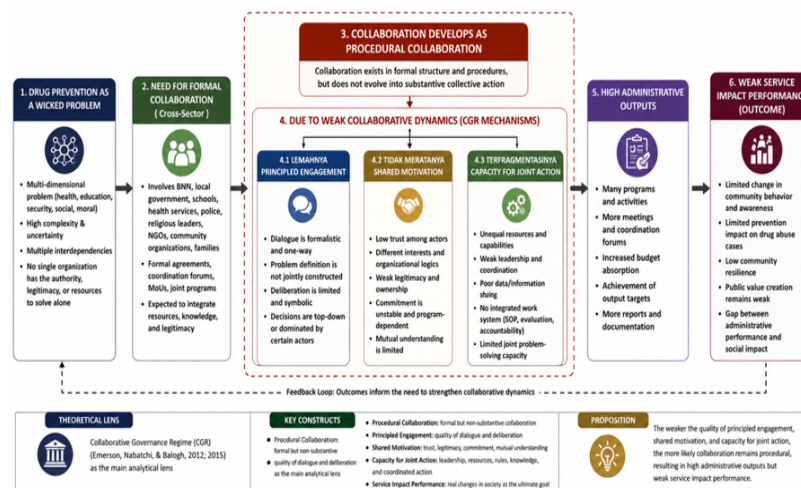


Figure 1. Conceptual Framework of Procedural Collaboration in Drug Prevention Governance
Source: Processed by researchers (2026)

Based on this framework, this article addresses the following research question: why does formally active collaboration in local drug prevention services fail to produce substantive public service outcomes? Using a qualitative single-case study at the Gorontalo City BNN, this article contributes to collaborative governance literature in two ways. First, it conceptualizes procedural collaboration as an internal boundary of collaborative governance, showing that collaborative failure may emerge from collaboration itself rather than from the absence of coordination. Second, it extends the Collaborative Governance Regime framework by linking collaborative dynamics to service impact performance, thereby shifting the evaluation of collaboration from coordination intensity toward the creation of sustainable public value and measurable social transformation.

Using a qualitative single case study on the Gorontalo City BNN, this article answers the question: why does formal collaboration in drug prevention services fail to produce substantive public service outcomes? This article makes two main contributions. First, this article introduces procedural collaboration as an internal boundary of collaborative governance, i.e. a condition when failure does not arise due to the absence of collaboration, but because collaboration stops at the procedural level. Second, this article expands on CGR by linking collaborative dynamics to service impact performance, so that collaborative success is no longer measured by the intensity of coordination, but by its capacity to generate measurable public value and social change.

The urgency of this research lies in the growing need to explain why strengthening administrative capacity and expanding formal collaboration does not necessarily result in substantive improvements in public service outcomes. In the context of drug prevention, failure to transform bureaucratic activities into changes in social behavior is not only a problem of program effectiveness, but also a problem of public governance legitimacy. When coordination forums, budgets, and institutional participation continue to increase but drug abuse remains high and social resilience remains fragile, the problems that arise are not just implementation gaps, but relational governance failures. This condition makes research on procedural collaboration important, as it provides a theoretical and practical explanation of the internal limits of collaborative governance in producing sustainable public value.

This article is organized into five main sections. The first part describes the background of the problem, empirical paradoxes, theoretical gaps, and research contributions to the literature on collaborative governance and public service performance. The second part develops a conceptual framework that includes drug prevention governance as a wicked problem, the Collaborative Governance Regime (CGR), a shift from administrative performance to service impact performance, and procedural collaboration as the main research mechanism. The third part explains the research method that uses a qualitative approach with a single-case study strategy at the Gorontalo City BNN. The fourth part presents the results of research and empirical synthesis of how procedural collaboration develops as an internal boundary of collaborative governance. The fifth part discusses the theoretical contributions of research, the development of the Procedural Collaboration Model (PCM), as well as implications for the study of collaborative governance and public services in the future.

Methods

Research Design and Philosophical Foundation

This study uses a qualitative approach with a single-case study strategy oriented to mechanism-based explanation to explain why formal collaboration in drug prevention services does not produce substantive service impact performance. The focus of the research is not to test the relationship between variables statistically, but to reconstruct the causal processes that link increased bureaucratic input, collaborative dynamics between actors, and weak public service outcomes. This approach is relevant for studies that aim to build theoretical contributions through the exploration of internal mechanisms in complex governance phenomena (Beach & Pedersen, 2019; Yin, 2018).

The single-case study design was chosen because the Gorontalo City BNN represents a critical case for the analysis of the internal boundaries of collaborative governance. This case

illustrates an important paradox: counseling budgets, activity intensity, and cross-sectoral coordination are increasing, but substantive outcomes such as reducing drug abuse and strengthening social resilience are not developing comparably. In the logic of case studies, the value of cases does not lie in statistical representations, but in their ability to uncover mechanisms that have analytical relevance for the development of theories (Yin, 2018).

Philosophically, this research is based on a constructivist-interpretive paradigm that views public governance as a relational process shaped by social interaction, negotiation of meaning, and institutional dynamics. Collaborative governance is not understood only as a formal structure between institutions, but as a process influenced by actors' perceptions, trust, legitimacy, interpretation of problems, and capacity for collective action (Creswell & Poth, 2018; Denzin & Lincoln, 2018). With this design, the analysis is directed at how principled engagement, shared motivation, and capacity for joint action develop or fail to develop in drug counseling services (Beach & Pedersen, 2019; Emerson et al., 2012).

Case Selection, Research Site, and Unit of Analysis

The Gorontalo City BNN was chosen as the main case because it analytically represents a critical case in the collaborative governance of public services, especially in drug prevention services. The selection of cases is not based on ease of access, but on its strength to explain the paradox between increased administrative capacity and weak substantive outcomes. In recent years, the Gorontalo City BNN has shown an increase in the extension budget, intensification of socialization activities, the expansion of cross-sector coordination forums, and the involvement of actors such as schools, health offices, police, religious leaders, and community members. However, substantive indicators such as reducing drug abuse, increasing public literacy, and strengthening social resilience do not develop proportionately.

In the logic of mechanism-based explanation, cases like this have high theoretical value because they allow researchers to identify causal relationships more clearly. Beach and Pedersen (2019) emphasized that research oriented towards tracing mechanisms requires cases with strong phenomena intensity, while Yin (2018) places critical cases as a means to test the limits of existing theories. In this study, the Gorontalo City BNN was used to test the internal limits of the Collaborative Governance Regime (CGR), especially when collaboration forums, formal coordination, and institutional support are available, but service results are still not optimal.

The research location is in the work area of the Gorontalo City BNN as the main node for coordinating the P4GN program at the city level. Drug counseling services involve BNN, the Education Office, the Health Office, schools, health centers, police officers, religious organizations, youth institutions, and community communities. This location shows the character of cross-sector governance, where the quality of services is determined by the relationship between actors in the preventive service network, in line with the argument of Osborne et al. (2022) about the public service ecosystem.

The unit of analysis of this research is not BNN as a single institution, but the dynamics of collaborative governance in the implementation of drug counseling services. The focus of the analysis is directed at the process of interaction between actors, the quality of principled engagement, trust and legitimacy between institutions, the capacity for joint action, and its influence on public service outcomes. Emerson et al. (2012) emphasized that collaborative governance must be understood at the regime level, not individual organizations, because

public outcomes are born from collective interaction.

Data Sources and Informant Selection

This study uses in-depth interviews, institutional documents, and contextual observations to reconstruct the mechanisms between formal collaboration, procedural collaboration, and weak service impact performance. This combination of sources is used so that the analysis rests not only on the perception of the actors, but also on verifiable administrative evidence and institutional practices. In qualitative research, source triangulation is important to improve interpretation accuracy and analytical validity (Creswell & Poth, 2018; Denzin & Lincoln, 2018).

Interviews were conducted with actors directly involved in drug counseling services and P4GN coordination. Informants were selected purposively based on strategic position, involvement in the collaborative process, and substantive knowledge of cross-sector dynamics. Informants include elements of BNN, the Education Office, the Health Office, the police, schools, religious organizations, local governments, community leaders, and other parties who play a role in the implementation of preventive services. The purposive approach is used because this research requires rich information to explain causal processes and relationships, not statistical representations (Maxwell, 2013; Yin, 2018).

The selection of informants follows the principle of information-rich cases, namely selecting actors who are able to explain how collaborative forums work, how trust and legitimacy are built, how cross-sector decisions are made, and why substantive outcomes often do not develop in proportion to administrative activities. In the context of collaborative governance, actors who understand the dynamics of interorganizational relationships are more important than large numbers of respondents (Emerson et al., 2012; Beach & Pedersen, 2019).

The documents analyzed included national and regional regulations related to P4GN, memorandums of understanding between agencies, annual work plans, BNN performance reports, reports on counseling activities, minutes of coordination meetings, program evaluation data, and other supporting documents that show patterns of inter-sector relations. Bowen (2009) asserts that document analysis allows researchers to read formal legitimacy, distribution of responsibilities, and indicators of program success administratively. Contextual observation is used to understand the day-to-day coordination practices and read the differences between formal structures and actual collaborative governance practices.

Data Collection Procedures and Operationalization of Core Concepts

Data collection is carried out in stages and iteratively. The process begins from searching institutional documents to map P4GN regulations, key actors, formal coordination patterns, and performance indicators used in program evaluation. This stage is important to understand the institutional architecture while identifying how program success is administratively defined (Bowen, 2009; Yin, 2018).

Based on the initial mapping, semi-structured interviews were conducted with actors directly involved in drug counseling services. The questions focused on the quality of inter-stakeholder dialogue, institutional trust and legitimacy, the sharing of responsibilities, the use of shared data, and the relationship between increased administrative activities and the resulting social change. This approach allows research to reconstruct the collaborative

processes that shape public service outcomes (Creswell & Poth, 2018; Maxwell, 2013).

Document analysis took place in parallel with interviews to verify informant claims and trace the relationship between formal structures and actual practices. Contextual observation complements this process by helping to read informal dynamics that are not always administratively recorded, especially in cross-sectoral coordination and interaction practices (Denzin & Lincoln, 2018). Collection and analysis are carried out simultaneously following the principle of theoretical iteration until theoretical saturation is achieved, when new information no longer changes the main analytical pattern (Charmaz, 2014).

To maintain the connection between theory and empirical analysis, the main concepts are operationalized into an analytical dimension that can be traced through field evidence. Formal collaboration is read through institutional coordination; principled engagement through the quality of deliberation; shared motivation through trust, legitimacy, and commitment; capacity for joint action through shared data, responsibilities, resources, and leadership; administrative outputs through activities, budget absorption, reporting, and compliance; Service impact performance through behavior change, preventive effectiveness, and social resilience; while procedural collaboration is positioned as the core mechanism that explains active coordination without substantive transformation.

Data Analysis Strategy

Data analysis is oriented to mechanism-based explanation to explain how collaborative governance that appears to be strong in formal still results in weak service impact performance. The main focus of the analysis is not on the identification of descriptive themes, but on the reconstruction of causal relationships that link drug prevention as a wicked problem, the expansion of formal collaboration, procedural collaboration, and the weak substantive outcomes of public services (Beach & Pedersen, 2019; Bennett & Checkel, 2015).

The analysis began by reading all interview transcripts, institutional documents, and observation notes to identify dominant patterns such as coordination forums, division of responsibilities, inter-stakeholder trust, institutional legitimacy, data integration, program evaluation, and the relationship between increased administrative activities and social change (Charmaz, 2014; Creswell & Poth, 2018). The pattern is then grouped into analytical categories related to CGR, namely principled engagement, shared motivation, and capacity for joint action, as well as two outcome categories: administrative outputs and service impact performance.

To strengthen the causal explanation, this study uses gap analysis and causal interaction mapping to trace the point of inconsistency between the formal structure of collaboration and service outcomes. This analysis explains that increased budgets, counseling activities, and coordination intensity do not automatically result in changes in community behavior because the relationship is mediated by the quality of engagement, stability of shared motivation, and the capacity of collective action that works partially.

The final stage is directed at the mechanism of reconstruction, which is to compile a causal sequence that explains how the problem of drug prevention as a wicked problem encourages formal collaboration across sectors, but the collaboration develops into a procedural collaboration due to weak principled engagement, uneven shared motivation, and fragmentation of capacity for joint action. This condition produces high administrative

outputs, but only produces weak service impact performance. All findings were continuously compared between interview data, formal documents, and field observations to distinguish the normative narrative of institutions and actual practices of collaborative governance (Bennett & Checkel, 2015; Yin, 2018).

Validity and Trustworthiness

The validity of the research is maintained through triangulation of sources, triangulation of methods, and member checking selective. Source triangulation is carried out by comparing information from actors across sectors, while method triangulation is carried out through interviews, observations, FGDs, and document analysis (Nani et al. 2025). When the actor's narrative of coordination success is not fully aligned with the outcome data or field observations, the contradiction is used as a basis for reading procedural collaboration, rather than being eliminated from the analysis. Member checking conducted on several key informants to ensure that interpretations of the trust, legitimacy, and effectiveness of counseling do not deviate from their empirical experience (Creswell & Poth, 2018; Lincoln & Guba, 1985; Maxwell, 2013).

The reliability and traceability of the analysis are maintained through trail audits, reflective memos, and systematic documentation of the coding, categorization, and synthesis processes of the mechanism. Trail audits ensure that the relationship between data, findings, and theoretical contributions can be clearly traced, while researcher reflexivity is used to control interpretive bias in reading local institutional relationships. The transferability of the research is directed at analytical generalization, i.e. showing how procedural collaboration can be used as a lens to understand the context of other public services that face a similar paradox between increased bureaucratic input and weak substantive outcomes (Charmaz, 2014; Denzin & Lincoln, 2018; Yin, 2018).

Results and Discussion

Formal Collaboration Is Institutionally Established but Substantively Uneven

The findings show that drug prevention collaboration in Gorontalo City has been institutionally established through regulations, formal coordination mechanisms, task forces, interagency agreements, and cross-sectoral participation embedded within the P4GN system (Doc-01; Doc-02; Doc-03). This institutional arrangement formally connects local governments, educational institutions, health agencies, police institutions, religious organizations, and community actors within a shared governance structure for drug prevention services. Interview evidence confirms that BNN functions as the central coordinating actor, while other institutions contribute according to their respective authority and organizational capacity. Educational institutions provide access to vulnerable groups and students, health institutions support rehabilitation and preventive education, local governments strengthen administrative and regulatory support, while security actors reinforce legal awareness and preventive control (Inter-01; Inter-02; Inter-04).

Administrative coordination is further strengthened through annual planning cycles, stakeholder forums, integrated reporting systems, field mapping, and joint implementation targets (Doc-04; Doc-05). Formally, this arrangement reflects many characteristics emphasized in collaborative governance literature, particularly stakeholder inclusion, institutional coordination, and interorganizational interaction (Ansell & Gash, 2008; Bryson et al., 2015). From an administrative perspective, collaboration therefore appears relatively

stable and operationally functional.

However, empirical evidence also demonstrates that collaboration remains substantively uneven. Participation among actors differs considerably in terms of commitment, follow-up, initiative, and long-term ownership. Some actors actively participate in planning, implementation, and evaluation, while others remain limited to symbolic attendance, formal representation, or administrative compliance (Inter-03; Inter-05). Consequently, institutional collaboration exists structurally, but the collective capacity required to generate sustained prevention outcomes has not been consolidated evenly across participating institutions.

This finding suggests that the central issue is not whether collaboration exists, but whether collaboration evolves into substantive collective action. In many collaborative arrangements, institutional formation alone is often assumed to indicate collaborative success. Yet the Gorontalo case demonstrates that formal collaboration may coexist with fragmented ownership and uneven relational engagement. This supports the argument that collaborative governance should not be evaluated merely through institutional existence, but through the depth of interdependence, shared responsibility, and adaptive collective capacity generated among actors (Emerson et al., 2012; Voets et al., 2021).

Collaborative Forums Operate Procedurally Rather than Deliberatively

The second finding concerns the nature of collaborative interaction within formal governance forums. Coordination meetings, stakeholder consultations, evaluation sessions, focus group discussions, and interagency forums operate regularly within the P4GN governance structure (Doc-04; FGD-01). These forums are formally designed to align institutional agendas, determine implementation priorities, identify vulnerable groups, and coordinate preventive responsibilities among actors. Decision-making processes are generally conducted through consultation rather than unilateral command, while institutional transparency is strengthened through reporting mechanisms, planning documents, and periodic implementation reviews (Doc-05; Inter-02).

At the procedural level, these collaborative forums appear participatory and administratively inclusive. Actors are formally invited to contribute perspectives, discuss local conditions, and coordinate preventive activities. However, empirical evidence reveals that the substantive quality of deliberation remains limited. Technical authority and strategic influence remain concentrated within coordinating institutions because of legal mandates and organizational expertise. As a result, meetings frequently function as spaces for confirming responsibilities, exchanging information, and reporting implementation progress rather than arenas for collective problem-solving or strategic policy innovation (Inter-02; Inter-03; Inter-06).

This condition demonstrates that collaborative intensity does not necessarily indicate collaborative depth. Forums may remain administratively active while still failing to generate adaptive learning, substantive negotiation, or collective ownership of prevention outcomes. Participation exists formally, but deliberative transformation remains weak. In practice, coordination is maintained more successfully than collective problem-solving.

These findings reinforce critical collaborative governance debates suggesting that formal coordination can evolve into symbolic or procedural collaboration when interaction becomes dominated by compliance logic rather than adaptive governance processes (Sørensen &

Torring, 2021; Voets et al., 2021). Ansell and Gash (2008) emphasize face-to-face dialogue and trust-building as foundations of collaboration, while Emerson et al. (2012) place principled engagement at the center of collaborative governance regimes. Yet the Gorontalo case demonstrates that principled engagement may exist procedurally without generating transformative deliberation. Consequently, collaboration remains administratively stable while substantively constrained.

Shared Motivation and Joint Action Capacity Remain Fragmented

The findings further show that the sustainability of collaboration depends not only on formal coordination, but also on the quality of trust, legitimacy, commitment, and operational readiness among participating actors. Interview and documentary evidence indicate that trust and mutual understanding are considered important because drug prevention involves sensitive social issues, vulnerable groups, and long-term behavioral intervention (Inter-01; Inter-05; Doc-06). Several informants describe prevention as a collective responsibility requiring cooperation beyond organizational boundaries.

Trust enables actors to exchange information, coordinate resources, and maintain collaboration beyond formal obligation. Nonetheless, commitment remains uneven across institutions. Some actors perceive prevention as a shared governance responsibility, while others continue to position BNN as the primary actor and their own institution merely as supporting participants (Inter-03; Inter-04). Consequently, collaborative ownership is distributed unevenly, limiting the emergence of strong collective responsibility.

A similar pattern appears in operational capacity. Formal mechanisms such as reporting systems, task forces, standard operating procedures, risk maps, and data-sharing arrangements are available administratively (Doc-04; Doc-06). However, their practical effectiveness depends heavily on personnel availability, technical competence, institutional readiness, and resource support. Some organizations respond actively and integrate preventive programs consistently, while others face staffing limitations, weak technical preparedness, and inconsistent follow-up mechanisms (Inter-02; Inter-07). This unevenness fragments collaborative action despite the existence of shared formal structures.

From the perspective of the Collaborative Governance Regime framework, this condition reflects incomplete consolidation of shared motivation and capacity for joint action (Emerson et al., 2012). Trust, legitimacy, and institutional commitment exist, but they remain unstable and unevenly distributed across actors. As a result, collaborative governance operates through fragmented relational capacity rather than fully integrated collective action.

This finding also supports broader public governance debates emphasizing that public value creation depends on the quality of interaction within service ecosystems rather than on organizational activity alone (Osborne et al., 2022). Fragmented commitment and uneven operational readiness weaken the capacity of collaboration to transform administrative coordination into sustainable social outcomes. Thus, collaborative governance failure emerges not simply from resource limitations, but from the incomplete relational consolidation of collaborative systems themselves.

Administrative Outputs Increase while Service Impact Remains Weak

One of the most significant findings of this study is the emergence of an input–outcome paradox within drug prevention governance. Administrative outputs continue to increase

substantially: counseling activities expand, participant numbers grow, interagency involvement intensifies, and reporting systems become more structured (Doc-04; Doc-07). Annual targets are clearly formulated, coordination visibility improves, and prevention services gain broader institutional reach.

Collaboration clearly strengthens program delivery. Prevention messages become easier to disseminate because schools, religious organizations, local governments, health institutions, and community actors participate collectively in outreach activities. Public campaigns gain greater legitimacy because anti-drug messages are communicated through multiple trusted social channels rather than through a single institution alone (Inter-04; Inter-05; Inter-06). From an administrative perspective, collaborative governance therefore appears increasingly productive.

However, stronger administrative delivery does not automatically generate stronger substantive outcomes. Increased activities, budget realization, participant coverage, and institutional reporting are not followed proportionately by measurable reductions in drug vulnerability, improvements in prevention literacy, sustainable behavioral transformation, or strengthened social resilience (Doc-07; Inter-02). Existing evaluation mechanisms are more capable of documenting implementation outputs than assessing long-term social transformation.

This gap becomes particularly visible in follow-up processes. Counseling and outreach activities may produce temporary awareness, but long-term prevention outcomes require continuous reinforcement, adaptive coordination, local ownership, and sustained cross-sectoral evaluation (Inter-02; Inter-07). Without these conditions, collaboration generates visible activity without stable social transformation.

This finding strengthens the argument for shifting public service evaluation from administrative performance toward service impact performance. Classical service quality approaches prioritize reliability, responsiveness, assurance, empathy, and tangibility as indicators of organizational performance (Zeithaml et al., 1985). While still relevant, such indicators remain insufficient for preventive public services that depend on long-term social change. Osborne (2018) argues that public administration must move beyond organizational output toward public value creation, while Osborne et al. (2022) further explain that public service outcomes emerge from interaction within broader service ecosystems.

Therefore, collaborative governance should not be evaluated solely by coordination intensity, administrative activity, or program implementation. Instead, its effectiveness must be assessed through its capacity to generate sustainable public value, behavioral change, social resilience, and substantive community protection.

Procedural Collaboration as the Internal Boundary of Collaborative Governance

Overall, the findings identify one central mechanism explaining why formally active collaboration produces limited substantive outcomes. Regulatory support, coordination forums, institutional participation, task allocation, and administrative systems create a relatively stable collaborative structure (Doc-01–Doc-07). Yet the same structure remains constrained by procedural engagement, fragmented ownership, uneven commitment, and weak translation of administrative activity into sustainable service impact.

This pattern demonstrates that collaborative governance may become procedurally stable without becoming substantively transformative. Forums remain active, actors remain institutionally involved, and administrative targets continue to be achieved. However, collaborative processes inconsistently generate collective learning, adaptive problem-solving, integrated ownership, or sustained social transformation (Inter-02; Inter-03; Inter-07).

This mechanism is conceptualized in this article as procedural collaboration. Procedural collaboration refers to a condition in which collaboration operates actively through meetings, reporting systems, coordination mechanisms, institutional participation, and administrative compliance, yet fails to develop substantive collective problem-solving capacity. In this condition, collaboration functions more as a procedural continuum than as an adaptive governance system capable of producing sustainable public value.

This concept extends collaborative governance theory in several ways. First, it demonstrates that collaborative failure does not necessarily emerge from the absence of coordination or weak institutional formation. Instead, failure may arise internally when collaborative systems become dominated by procedural stability without relational transformation. Second, procedural collaboration explains how collaborative governance can generate strong administrative outputs while simultaneously producing weak service impact performance.

The main theoretical contribution of this study therefore lies in repositioning service impact performance as the primary evaluative dimension of collaborative governance. Collaborative success should no longer be assessed only through coordination intensity, institutional participation, or administrative achievement, but through the extent to which collaboration generates measurable public value, sustained behavioral change, prevention literacy, and long-term social resilience.

Conclusion

This study shows that the main problem in local drug prevention services is not the lack of collaboration, but the dominance of collaboration that is still procedural and not substantive. In the case of the Gorontalo City BNN, formal collaboration is institutionally strong, supported by regulations, inter-institutional forums, regular coordination, and broad stakeholder participation. Administrative indicators such as outreach activities, participant coverage, budget absorption, and program reporting are also increasing. However, these improvements do not translate proportionately into improved service impact performance, particularly in behavioral change, prevention effectiveness, reduced drug abuse cases, and sustained social resilience.

These findings suggest that collaboration failures should not be interpreted solely as implementation problems caused by weak resources, poor coordination, or limited bureaucratic capacity. Rather, failure arises from within the collaborative process itself when principled engagement remains formalistic, shared motivation is uneven, and the capacity for joint action remains fragmented. This study conceptualizes this condition as procedural collaboration, i.e. a form of collaboration in which formal coordination exists, but the collective problem-solving capacity is not fully developed. Therefore, procedural collaboration serves as an internal boundary of collaborative governance.

Theoretically, this article contributes to the literature of Collaborative Governance Regimes by expanding its explanatory capacity from collaborative formation to collaboration failures

and service impact performance. By linking collaborative governance to service impact performance, this article shifts the evaluation of collaboration from coordination intensity to public value creation and measurable social outcomes. Further research can extend this model to other public service sectors such as poverty reduction, public health, education, environmental governance, and digital public services to examine how procedural collaboration operates under different institutional settings.

References

- Ansell, C., & Gash, A. (2008). Collaborative governance in theory and practice. *Journal of Public Administration Research and Theory*, 18(4), 543–571. <https://doi.org/10.1093/jopart/mum032>
- Beach, D., & Pedersen, R. B. (2019). *Process-tracing methods: Foundations and guidelines* (2nd ed.). University of Michigan Press.
- Bennett, A., & Checkel, J. T. (Eds.). (2015). *Process tracing: From metaphor to analytic tool*. Cambridge University Press.
- Berardo, R., & Lubell, M. (2016). Understanding what shapes a polycentric governance system. *Public Administration Review*, 76(5), 738–751. <https://doi.org/10.1111/puar.12532>
- Bowen, G. A. (2009). Document analysis as a qualitative research method. *Qualitative Research Journal*, 9(2), 27–40. <https://doi.org/10.3316/QRJ0902027>
- Bryson, J. M., Crosby, B. C., & Stone, M. M. (2015). Designing and implementing cross-sector collaborations: Needed and challenging. *Public Administration Review*, 75(5), 647–663. <https://doi.org/10.1111/puar.12432>
- Charmaz, K. (2014). *Constructing grounded theory* (2nd ed.). Sage.
- Creswell, J. W., & Poth, C. N. (2018). *Qualitative inquiry and research design: Choosing among five approaches* (4th ed.). Sage.
- Denzin, N. K., & Lincoln, Y. S. (Eds.). (2018). *The SAGE handbook of qualitative research* (5th ed.). Sage.
- Emerson, K., Nabatchi, T., & Balogh, S. (2012). An integrative framework for collaborative governance. *Journal of Public Administration Research and Theory*, 22(1), 1–29. <https://doi.org/10.1093/jopart/mur011>
- Emerson, K., & Nabatchi, T. (2015). *Collaborative governance regimes*. Georgetown University Press.
- Head, B. W., & Alford, J. (2015). Wicked problems: Implications for public policy and management. *Administration & Society*, 47(6), 711–739. <https://doi.org/10.1177/0095399713481601>
- Lincoln, Y. S., & Guba, E. G. (1985). *Naturalistic inquiry*. Sage.
- Maxwell, J. A. (2013). *Qualitative research design: An interactive approach* (3rd ed.). Sage.
- Nani, Y., Noho, Y., Tohopi, R., Badjuka, A., & Mozin, S. Y. (2025). *Public Administration Research Methods: Philosophical Review and Practical Implications*. Deepublish, CV Budi Utama.
- Osborne, S. P. (2018). From public service-dominant logic to public service logic: Are public service organizations capable of co-production and value co-creation? *Public Management Review*, 20(2), 225–231. <https://doi.org/10.1080/14719037.2017.1350461>
- Osborne, S. P., Powell, M. G. H., Cui, T., & Strokosch, K. (2022). Value creation in the public service ecosystem: An integrative framework. *Public Administration Review*, 82(4), 634–645. <https://doi.org/10.1111/puar.13474>
- Sørensen, E., & Torfing, J. (2021). Radical and disruptive answers to downstream problems in collaborative governance? *Public Management Review*, 23(11), 1590–1611. <https://doi.org/10.1080/14719037.2021.1879914>
- Voets, J., Brandsen, T., Koliba, C., & Verschuere, B. (2021). Collaborative governance. In *Oxford research encyclopedia of politics*. Oxford University Press. <https://doi.org/10.1093/acrefore/9780190228637.013.1419>
- Yin, R. K. (2018). *Case study research and applications: Design and methods* (6th ed.). Sage.

Zeithaml, V. A., Parasuraman, A., & Berry, L. L. (1985). Problems and strategies in services marketing. *Journal of Marketing*, 49(2), 33–46. <https://doi.org/10.1177/002224298504900203>

