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Never doubt that a small group of thoughtful, committed citizens can change the world. Indeed, it is the only thing that ever has.

Margaret Mead

Partnership Information

There is strength in numbers. By building collaborative partnerships and maintaining these, you'll strengthen and complement your family planning program. Community and professional partners can advocate for your organization's goals while contributing their own contacts, skills, talents and assets. Pooling resources with other organizations working towards the same, or similar goals can also help broaden the impact while accessing new audiences. In addition, partnerships can be a significant part of fundraising. Partnerships can assist with marketing and promoting your services.

This section provides information about establishing and maintaining partnerships, tools and tips on developing collaborative partnerships within your community, and resources to facilitate your understanding of partnerships.

Partnership Continuum Characteristics

Partnerships can range from informal minimal work between two organizations to very formal contractual arrangements with exchange of funds, and everything in between. There is sometimes an evolution with specific partners that grows into an active relationship of exchange and support.

The continuum often starts with coordination, progresses to cooperation, then collaboration and results in partnerships. Each and every level of a partnership is important and worth pursuing. You will likely work with organizations in each stage.

Coordination → Cooperation → Collaboration → Partnership

Coordination

Being at the table is the first step, and making the initial contact may be up to the family planning program. At this level, organizations are learning about the services and clients served by the other organizations. They are also learning about motivation for participating in a partnership. There is a lot of independence. Self interests are defined, as well as what resources are available. Coordination may include an exchange of information and materials.

Cooperation

Usually cooperation among organizations brings increased understanding of a target audience to reach and understanding of motivations to participate in an alliance. There might be a minimal agreement such as referral of clients as circumstances indicate. The organizations may still be defining their roles and contribution. There is usually a greater appreciation of resources and skills that the partnership can bring. Strategies start to emerge with other organizations. This is considered a very exciting time for growing partnerships.

Collaboration

This is often referred to as the “our” stage of a partnership continuum. There is increased recognition of values of each organization, trust, respect, clear understanding of benefits for each partner, and innovative ideas are presented to meet a common problem. There can be challenges, but they are usually well worth the effort to benefit a group of clients or the community. This is beyond referrals when organizations work together on a specific project to reach clients, provide education, or develop a marketing campaign. Often collaborative relationships start to put plans in writing.

Partnership

This is often characterized with “we want more”. There is of course a high level of trust and communication. Roles and responsibilities are well defined and developed. There is a feeling of “us” and not two or more organizations working together. There might be shared space and staff, shared authority and decision making, plans and agreements are in writing, and there is a vision. Challenges continue especially in the area of funding streams and support.

Source: Lou Colwell and Kate Willey

Implementation

Implementation is the only way to success. If partnerships do nothing, then nothing will be gained. Consider these:

- Be a model
- Challenge people
- Develop structure and process
- Keep people focused
- Once momentum starts, keep it going
- Celebrate successes even if small

- Be careful of getting stuck in planning only
- Think early in the process about sustainability and capacity building
- Don't waste your time on partnerships that do nothing, move on

Examples of Region VIII Family Planning Partnerships

Some examples of existing partnerships include:

1. The Youth and Family Services Boy's Health Program, a partnership between the South Dakota Department of Health and Youth and Family Services of Rapid City, South Dakota, targets boys ages 8-16 and focuses on two primary activities: education utilizing Baby Think-it-Over and Wise Guys curriculum and Health Care Advocacy. These activities are designed to increase knowledge of human sexuality and the consequences of sexual activity, to improve pregnancy prevention, and to provide clinical intervention and treatment services. A 24 hour hot line is maintained to address children's and families' needs for information or counseling.
2. The Regional Office established a partnership with the American Indian Higher Education Consortium to develop nursing curricula that addresses the Healthy People 2010 objectives pertaining to public health infrastructure, essential public health services and reproductive health. This consortium represents tribal colleges. The Regional Office has worked directly with selective Tribal Colleges and Universities' Nursing Programs in Montana and South Dakota.
3. In Wyoming, the partnerships between the Young Fathers Program of the Wind River Reservation and the Wyoming Health Council was designed to stabilize access to family planning and reproductive health care services to underserved women and men on the reservation. The project's initial efforts on the Wind River Indian Reservation were expanded to include other rural populations in Wyoming.
4. The North Dakota family planning program partnered with a Head Start program to provide male reproductive information and referrals for pertinent health screening and services based on individual needs. In addition, the program collaborated with high schools and colleges to advertise, market and refer students to a monthly evening male clinic.
5. The City Safe Coalition is a partnership formed in Utah with ten community agencies including Planned Parenthood Association of Utah. The purpose of this coalition is to coordinate resources, provide quality training for outreach workers and to address current community needs, matching participating agencies strengths and practices.

Types of Partnerships

There is a wide range of partnership models. Two of the most common are

1. Issue-focused
2. Community-building focus

Issue-focused usually addresses one problem or a set of related issues. Community-building attempts to develop a critical mass of people to create long term community changes that impact the overall health and welfare of people. For example, the Healthy Communities effort is considered capacity building at the community level. There are advantages and disadvantages of both efforts.

Definition of Partnerships

The term "partnership", as well as related terms such as collaboration, coalition, networks, collaborations, task group, work groups, cooperation and others, can be used to describe a wide variety of relationships and structures. One of the most common ways of looking at partnerships is by identifying their stages of development and the main activities associated with each phase. These are some very general definitions; however, know that terms are used widely to describe groups. There are no set definitions used across communities.

- Partnerships are often categorized according to the products: planning, services, community actions and community changes.
- Coalitions have been categorized by membership characteristics - grassroots volunteers, professionals or community-based, combinations of professionals and grassroots leaders. Coalitions have also been typed according to their reason for formation, function, stages of development and organizational structures.
- Networks are often loosely coupled groups of organizations that provide services to a particular client population and come together for a specific purpose.

Successful Partnership:

- Good timing & clear need
- Strong involvement
- Broad-based involvement
- Credibility and openness in the process
- Commitment at a high-level with some visible leaders
- Support and resources
- Establish trust
- Strong process
- Interim successes

Factors that Influence Partnership Success

Membership

- Mutual respect and trust
- Broad representation
- Open and able to compromise

Process

- Have leadership, decision making and problem solving processes in place
- Flexibility
- Adaptability
- Clear roles and responsibilities

Communication

- Open and frequent
- Formal and informal

Purpose

- Attainable objectives

Resources

- Support and funds

Elements of Successful Partnerships

By transcending traditional boundaries and thinking, family planning grantees and clinics with the desire to increase the number of clients served can establish a partnership model that is best suited to their organization and community. From coalition building to donating services, from shared decision-making to jointly submitting grant applications, from longstanding collaborations to creating new alliances, successful partnerships germinate from these common seeds:

- A Shared Purpose

Carefully consider the compatibility of the purpose and goals of the partnering organizations, the value-added by partnering and expectations around each organization's participation. Make these clear in the partnership. Examine how each organization defines the partnership. Discuss your professional ethics. Developing a partnership is not unlike developing a personal relationship. Choose your partner with forethought and mutual understanding.

- Willingness to Collaborate Equals Flexibility

Once partnership participants have been identified, it's important that the process be transparent, reflecting the nature of the partnering organization, appreciating the structures already in place, and the development of new structures the partnership requires. The following efforts will help in creating a new structure:

- Staff need to be aware of their own clinic or organizational systems, management structures and work-styles. By understanding their own organization, they are better able to help themselves and their partners appreciate and understand the value and expertise they bring to the partnership.
- Organizational charts, mission statements, job descriptions and other materials should be exchanged between partnering organizations, allowing all organizations to better understand each others' goals and objectives, as well as the time and effort that goes into each other's jobs.
- A broadly defined structure often works best, providing guidance while permitting partners to make periodic adjustments, assess effectiveness, and allow for creativity and learning. Periodically review the partnership in relationship to where it's headed and what it will take to get there.

- Complementary Strengths

All partners are accountable, and it's necessary to award equal opportunity and participation for all involved. Holding a preliminary information-sharing meeting for all participating staff is recommended. Expectations, roles and responsibilities, and available resources can be clarified. Put it in writing.

- Agreed Upon Boundaries

Thinking through and negotiating differing work-styles, organizations and management structures can be challenges faced by organizations attempting collaboration. A simple, written memorandum of understanding (MOU) may be helpful in articulating a partnership agreement.

The Fastest Way to End a Partnership

Don't have the right people involved – they are not authorized to make decisions

Continue to revisit the same issues – no progress

Don't set ground rules for process

Involve too many people early on so the process slows

Don't build trust, cooperation or agreement

Negotiating a Partnership Agreement

To ensure that key stakeholders get what they need from a partnership, partners must come to the negotiation table with a sincere interest in working together and drawing from one another's strengths. Clinic staff/ management should clearly articulate what they can bring to the partnership, as well as understand what their partners offer.

Negotiating is a skill that is practiced, but a craft in which few individuals excel. The following techniques can help advance partnership negotiations and produce desired results.

Ten Points for Successful Negotiations

- 1. Honor the relationship.** The negotiation process involves partners you may work with over many years. If, in addition to the process of negotiating, your priorities include developing the relationship with your partners—for example, developing honest communication and trust—it can be easier to know when bending on a particular point may yield short-term gains but long-term costs.
- 2. Create a negotiation environment that encourages innovation.** Partners expand partnership options by engaging in brainstorming techniques and thinking "outside the box." If both partners can respond to new ideas and be open to the unexpected, they will find unlimited opportunities to take a fresh look at their practices and beliefs about serving their clients.
- 3. Be realistic and fair.** Partners are more likely to follow up on their commitments and less likely to circumvent the negotiation process if they feel the agreement is fair. Sometimes a neutral, external facilitator (e.g., a technical assistance provider) can help to ensure that the negotiations are realistic and fair to all. Partners should *always* consult with their programs' legal and financial advisors before finalizing the agreement.
- 4. Recognize that each partnership is unique.** Each partnership needs to be structured to meet the needs of the community and those involved. Although you may know of an interesting and successful partnership in a nearby community, the partnership you are designing need not, and most likely *should* not, be the same.
- 5. Engage in active listening.** Focus on what others say, both on their actual words and the underlying meaning. This will help you understand the interests upon which agreement can be based. When your response makes it clear that you've really been listening, your partners, too, may be more prepared to listen. Active listening can produce better, more long-lasting relationships.

6. **Know your bottom line.** We all enter negotiations knowing what we ideally want. Thinking through alternatives to the ideal outcome, however, allows you to understand your points of flexibility. Be clear about fallback positions and their consequences *before* you start to negotiate. Also, evaluate your partners' options beforehand. In negotiation, it is important to think several moves in advance and anticipate your partners' needs.
7. **Know the difference between "positions" and "interests."** When you focus on your motivation for partnering and your potential partners' motivation, then you are looking at *interests*. When you get bogged down in achieving a particular goal, then you are distracted by *positions*. Interests form the building blocks of lasting agreements.
8. **Come prepared to commit resources.** Any request to take on greater responsibility must be accompanied by an offer of resources. Approach this issue with an earnest commitment to supporting the goals and the needed change. Resources can take the form of funding, staff, materials, supplies, transportation, and facilities, often in combination. An adequate commitment of funds and other resources demonstrates your commitment to, and full support of the partnership.
9. **Take a fresh look at practices and standards.** Use the negotiation process to address areas that need improvement, such as increased outreach activities, staff development activities, etc. Challenge yourself to examine existing practice: Is this truly the practice that needs to be adopted by all, or is there a new way to meet standards? Set short-term, realistic goals, yet keep sight of where the partnership wants to be.
10. **Allow sufficient time for partners to work out details.** Remember that the negotiation process is not a one-time meeting that results in a partnership agreement. Partners often need several meetings to develop an agreement that reflects everyone's needs and capacities and provides sufficient detail to ensure success and enhanced reproductive health services.

Last but not least

Partnership agreements should be put in writing, and reviewed annually. The agreement should contain sufficient detail to guide the partnership and serve as a mechanism by which partners assess the fulfillment of their commitments and contribution.

As a legal document, the agreement protects all partners' best interests. To limit the number of pages in the partnership agreement, many partnership programs include an addendum that describes how the partnership conducts business. This addendum might specify who does what, when, how, with whom, and for what purpose. It may also contain specific outcome goals and a plan to measure achievement.

Source: Website of QUILT (Quality in Linking Together, Early Education Partnerships):
<http://www.quilt.org>

Partnership Tools

Checklist Tool – Actions Steps for Early Partner Development:

- ❑ Define goals and expected outcomes for the partnership and project
- ❑ Define organizational contributions and limitations
- ❑ Identify a process for communicating and exchanging ideas
- ❑ Define project-related costs and clarify financial responsibilities for each organization
- ❑ Create an overview of the project
- ❑ Clarify how partners will be recognized in the media, programming and materials
- ❑ Create a timeline for deadlines and deliverables
- ❑ Where applicable, identify a project manager, contact persons within organizations, and assign roles and responsibilities
- ❑ Ensure buy-in of all participants

Reality Quiz

Adapted from Community Initiatives, Inc., Facilitating Community Change (2000)

Consider the dynamics of your organization and community. What are the issues you want to address and to do so would mean partnering with other organizations. Take a few minutes to answer these questions, and add other questions you think of. Share this with others. Consider why partnering makes sense.

| For your community, the dynamics are: | True | False |
|--|-------------|--------------|
| There are fewer public dollars available to address issues. | | |
| Health problems and solutions are increasingly becoming the responsibility of our local community. Meaning, it is up to us to take the lead. | | |
| Collaboration and interdependence will be more important in addressing these issues. | | |
| New strategies and tools are needed to develop plans and to work together to address health issues. | | |
| Community involvement is dependent on a few organizations. | | |
| Our community is increasingly becoming diverse, ethnically, economically and racially. | | |
| | | |

If you answered yes to most of these, establishing partnerships to reach a target audience and to address a specific health issue may be a strategy for progress.

Readiness Quiz

Adapted from Community Initiatives, Inc., Facilitating Community Change (2000)

These are only sample questions and do not reflect all the questions that can be asked.

Individual questions – assess your own readiness for partnering

- I am willing to role model the principles and values behind partnering.
- I am open to learning new skills and behaviors such as decision-making skills, teamwork, and others.
- I will listen to others and work toward partnering communications.
- I am open to people who have ideas that I might not agree with.
- I am willing to check my own agenda and to do what is best for the partnership.

Organizational questions

- We are ready to identify common goals and objectives.
- We have a strong group of people to bring to this partnership.
- We understand what we can bring to this partnership.
- We agree to be a partner and to learn our roles and responsibilities.
- We agree to come with a sense of humor.

A Checklist for Developing a Partnership Agreement

Family planning clinics can use this checklist to assist them in developing a comprehensive agreement that clearly addresses each partner's roles and responsibilities and many of the elements needed for the partnership to run smoothly. While agreements can and should be reviewed and revised over time, a strong agreement forged early in the partnership lays the foundation for a strong and sustainable collaboration.

A partnership agreement contains critical information and clarifying details. Agreements include some standard legal sections, but the language used often sets the tone for a "partnership spirit." Included is a list of specifics that partners might include in a written agreement, although not every item needs to be addressed. Agreements vary, reflecting the uniqueness of the partnership.

It is recommended that legal council be involved in reviewing agreements.

The **checklist** consists of the following five sections:

- I. General Information
- II. Partnership Services
- III. Fiscal/ Resources
- IV. Systems
 - a. Planning and Decision-Making
 - b. Communications
 - c. Oversight
 - d. Record-keeping and Documentation
- V. General Administrative Elements

Source: Website of QUILT (Quality in Linking Together, Early Education Partnerships):
<http://www.quilt.org>

A Checklist for Developing a Partnership Agreement

| | Not Yet Addressed | Under Discussion | Finalized | Action Steps |
|--|-------------------|------------------|-----------|--------------|
| 1. General Information (often introductory) | | | | |
| General statement of the agreement's purpose | | | | |
| Partner's affiliation and legal status | | | | |
| Contractual Period | | | | |
| Contract amendments, renewal, and termination procedures | | | | |
| Role of each partner's decision-making bodies in the contractual development and approval process | | | | |
| Compliance with local, state, and federal regulations and policies | | | | |
| Conflict of interest statements and prohibited activities | | | | |
| Signatures of key parties and date of signing (usually at the end of the document) | | | | |
| 2. Partnership Services | | | | |
| Number of clients served; hours, days, weeks of operation | | | | |
| Location of services | | | | |
| Each partner's role in service delivery | | | | |
| Staff assigned to support the partnership; which entity/partner employs and supervises which staff | | | | |
| Responsibilities of each partner's staff | | | | |
| Staff schedules | | | | |
| Supervision procedures | | | | |
| Staff qualification requirements | | | | |
| Professional development responsibilities (in-service, training, college courses) | | | | |
| Staff selection procedures | | | | |
| Annual performance appraisal procedures | | | | |
| Provisions for substitutes | | | | |

| | Not Yet Addressed | Under Discussion | Finalized | Action Steps |
|---|-------------------|------------------|-----------|--------------|
| 3. Fiscal/Resources | | | | |
| Funding and resource commitment of each partner | | | | |
| Funding/resources accessed and by which partner | | | | |
| Designated responsibilities for: facilities/space, maintenance, repairs, food service, and supplies and equipment (who will retain ownership of equipment when/if the agreement ends) | | | | |
| Non-federal share/inkind services | | | | |
| 4. Systems | | | | |
| A. Planning and Decision-Making | | | | |
| Role of each entity's decision-making bodies in planning and decision making | | | | |
| Policy Council representation and elections | | | | |
| Community assessment process | | | | |
| Collaborative, inclusive strategies involving partners' staffs and the community | | | | |
| Items needing prior approval (items a partner reserves the right to approve) | | | | |
| B. Communications | | | | |
| Type, frequency of meetings; meeting participants | | | | |
| Type and frequency of reports | | | | |
| Information exchange (training calendars, personnel policies, position openings, etc.) | | | | |
| Work with other agencies and responsibility of each partner | | | | |
| Use of technology, i.e., shared databases for tracking, e-mail communication, etc. | | | | |
| Protocols for information sharing | | | | |
| Communications | | | | |
| Dispute resolution procedures | | | | |

| | Not Yet Addressed | Under Discussion | Finalized | Action Steps |
|---|-------------------|------------------|-----------|--------------|
| C. Oversight | | | | |
| Notification procedures/follow-up on local, state, and federal monitoring/assessment | | | | |
| Ongoing observation of partnership operations, review of records, written feedback, follow-up | | | | |
| Annual program self assessments and other reviews | | | | |
| Improvement initiatives (partners' obligations to each other when the partnership is not progressing as envisioned) | | | | |
| D. Record-keeping and Documentation | | | | |
| Recruitment, enrollment application, and intake | | | | |
| Storage of records and access | | | | |
| Procedures for recording/tracking of services and follow-up | | | | |
| Transfer of information, confidentiality | | | | |
| 5. General Administrative Elements | | | | |
| Designated contact person for each organization involved | | | | |
| Travel policies | | | | |
| Liability/insurance | | | | |
| Use of partners' names (how partners will publicize the services sponsored by the partnership) | | | | |

Memorandum of Understanding (MOU) with Partners Checklist

An MOU could include clarifying statements indicating:

- ❑ The responsibilities of each organization
- ❑ The names of principal contacts and organizations involved
- ❑ Rights and liabilities
- ❑ The duration of the partnership
- ❑ How a partner can extract itself from the agreement

Partnership Readiness - 4 Points

1. Acknowledge changed climate
2. Communicate internally and externally
3. Get data – the facts
4. Clear on core values

Potential Partners

This is a list of potential public, private and voluntary sector partners to consider for family planning. Remember, it is not about the number of partners you have, rather more about quality of the relationship, value added, and the benefits the partnership brings to your organization and your clients, and in reaching new clients.

Health

Community Health Centers
Neighborhood Health Clinics
Private Family Practice Physicians
Prevention Research Centers
Health Departments
Hospitals
Health Maintenance Organizations
Medical Societies
Nurse Associations
Primary Care Associations
Substance abuse agencies
Mental Health Agencies
Area Health Education Centers
Social Workers
Select Populations

Youth/Teen Centers
Girls/Boys Clubs
Parks and Recreation Centers
Migrant worker groups
Day Shelters/ Soup Kitchens
Disabled Citizens' Alliances
Minority and Gay/ Lesbian
Organizations
Street Outreach Programs

Education

Parent-Teacher Organizations
Public Schools – Elementary,
Secondary
Colleges and Universities
Health Educators and Administrators
Coaches
School Counselors

Business

Private Business
Chamber of Commerce
Insurance Companies
Pharmaceutical Companies
Health and Nutrition Stores

Voluntary Groups

Faith Communities

Multicultural Health and Community
Centers
Battered Women's Shelters

Civic Groups
Teen Groups
Social Activist Groups

Consumers as Partners

Forms of consumer involvement

| | |
|---------------------------|--|
| Active participant | Current client |
| Worker | Volunteer |
| Learner | Apprentice, intern – can be part of the succession plan for staff & board members |
| Organizational leadership | Advisory position representing fundraising, advises on decisions, involved in planning |
| Community leadership | Advocate, educator, speaker |

Essential components of a consumer involvement program:

- ❑ They know the community
- ❑ Involvement of non-traditional participants
- ❑ Consumers and providers as partners
- ❑ Make useful roles for consumers (serve on the Information & Education Review Committee)
- ❑ Represent diversity

How to involve consumers

- ❑ Getting the word out
Publish article about consumer involvement and experiences, newsletters, local newspapers
- ❑ Use the consumers to recruit others
- ❑ Focus groups to provide feedback on services and review materials

Consumers can help with

- Getting the word out
- Applying the word (review ads, material)
- Changing the word (assist staff with service decisions)
- Spreading the word (peer educators)

Partnership Resources

Community Initiatives, Inc., Boulder, Colorado
<http://www.communityinitiatives.com/home.html>

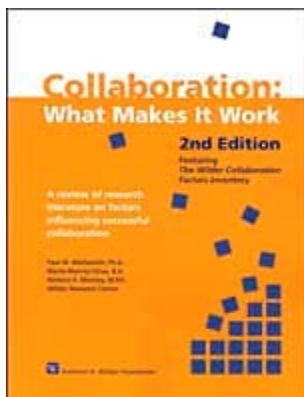


Community Initiatives helps organizations, corporations and community collaborations shape change and accelerate results for creating healthy and sustainable communities wherever people live, work and play.



QUILT is a national training and technical assistance project funded by the federal Head Start and Child Care Bureaus.
<http://www.quilt.org>

Amherst H. Wilder Foundation <http://www.wilder.org/index.html>



What makes the difference between your collaboration's failure or success? *Collaboration: What Makes It Work, Second Edition* answers this question with an up-to-date and in-depth review of collaboration research. This new edition also includes *The Wilder Collaboration Factors Inventory*.

Work Group Evaluation Handbook: Evaluating and Supporting Community Initiatives for Health and Development from the Schiefelbusch Institute, Lawrence, KS (1995)
913-864-0533 <http://www.lsi.ku.edu/lsi/>

The **Asset-Based Community Development Institute** (ABCD), established in 1995 by the Community Development Program at Northwestern University's Institute for Policy Research, is built upon three decades of community development research.

<http://www.northwestern.edu/ipr/abcd.html>



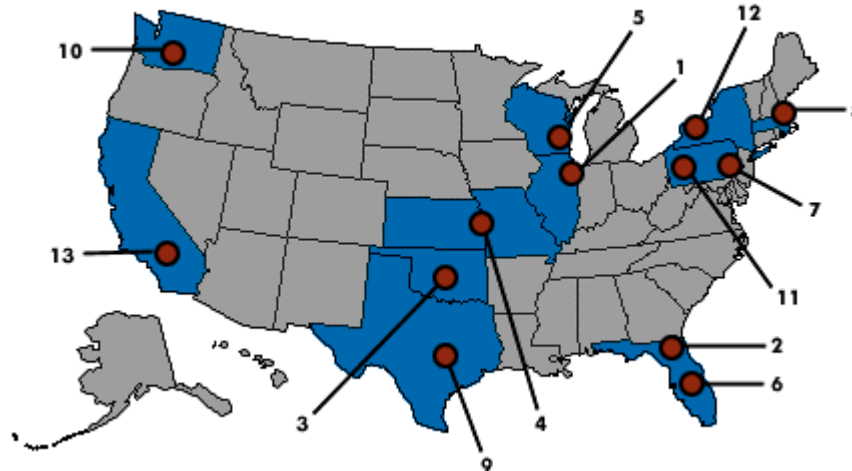
Healthy Communities

<http://www.hospitalconnect.com/healthycommunities/usa/index.html>



Public-Private Partnerships for Public Health (Harvard Series on Population and International Health), by Michael Reich (2002)

Teenage Pregnancy: Community Partnerships



<http://www.cdc.gov/nccdphp/drh/tpartner.htm>

Family Planning Collaborative Partnerships – Region VIII

<http://www.region8familyplanning.org/fpcolpart.htm>

JSI Research & Training Institute, Inc. - Denver



Region VIII Family Planning Training Project

JSI developed a survey tool that was completed by the Title X-funded family planning agencies in each state. In this survey, these agencies identified the organizations with whom they collaborate to provide services, and the reasons for the collaboration. In addition, they identified those organizations with whom they would like to collaborate but currently do not (and the reasons, real and/or surmised, for the lack of collaboration). The goal of this effort is to understand at what level the collaborations are taking place: frequency, amount, formality and importance of the collaborative partnership.

The following conclusions can be drawn from a preliminary analysis of the collaborative partnerships data: 1) Collaboration efforts are taking place in the region; 2) such efforts are taking place with a wide variety of partners; and 3) there are a few specific partner types with whom little collaboration is taking place, including faith communities, the Native American community, male-focused programs, media organizations and correctional facilities.