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A COLLABORATION GUIDEBOOK

American Cancer Society National Advisory Group on Collaboration with Organizations

MAY 2000
SECOND EDITION
Collaboration is a mutually beneficial and well-defined relationship entered into by individuals and organizations to achieve results they are more likely to achieve together than alone. Effective partnerships with other organizations are desirable for maximizing resources to achieve the Mission 2000 goals in our changing environment. Working productively with others is both a science and an art, requiring skills and understanding. We embrace the principles of collaboration as vital to our future success.
Acknowledgments

The American Cancer Society National Advisory Group on Collaboration with Organizations is indebted to the National Ad Hoc Committee on Cancer and Women and the National Ad Hoc Field Advisory Council on Breast Cancer Issues for their work in the area of collaboration and coalition building which was used in the development of the first edition of this guidebook.

We would also like to acknowledge consultants Beth B. Rosenthal, MS, Michael Baizeman, PhD, Arthur Turovh Himmelman, and Strategic Health Concepts’ Karin Hohman and Tom Kean, as their respective work has contributed substantially to this document. In particular, Ms. Rosenthal has been extremely helpful in developing materials and worksheets especially for the American Cancer Society, which have made this enhanced second edition possible.

There are two outstanding publications on collaboration published by the Amherst H. Wilder Foundation in St. Paul, Minnesota, which were used extensively in the original drafting of this document. They are Collaboration: What Makes It Work, by Paul Mattessich, PhD, and Barbara Monsey, MPH, and the Collaboration Handbook: Creating, Sustaining, and Enjoying the Journey, by Michael Winer and Karen Ray. The Wilder Foundation has allowed reproduction of the worksheets included in Section III of this guidebook from the Collaboration Handbook.
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I.

SETTING THE STAGE FOR COLLABORATION
Is collaboration and coalition building worth the effort and resources expended? Under what conditions should collaboration take place? Should we be involved in more collaborative efforts or fewer? What can we do to be more effective in our collaborative efforts? These are important questions.

Whether it be fundraising, advocacy, school health education, cancer research, or prevention and early detection programs for the underserved, the reality is that it will likely take the collaborative efforts of people and organizations with different skills and strengths to create innovative solutions for the complex problems we face. Most organizations and individuals generally recognize that if services are to be improved, critical gaps in information and knowledge filled, and unnecessary duplication eliminated, we must cooperate with others in productive ways. The future of the American Cancer Society's (ACS) organizational effectiveness depends on the fruits of collaboration -- both internally and externally. As a first step, we must be open to examining the benefits and limits of collaboration. Then we must be willing to go beyond this examination of collaboration to the task of acquiring the skills and techniques necessary for effective partnerships and coalition-building.

Unfortunately, though the term is used broadly, collaboration is one of the most poorly understood and least appreciated human and organizational behaviors. What is not generally recognized, or at least articulated, is that most people are not very good at collaborating as individuals within organizations, much less between organizations. Do the words hidden agenda, turf, resistant, competition, loss of identity, jealousy, protectiveness, sabotage, fear, incompetent, power play, or paranoia ever enter your thoughts when working with others? Working with others, no matter with whom or what you are doing, has challenges. While the enthusiasm and rhetoric for collaborating and working with others is high within the American Cancer Society, history has shown that most people and organizations have a difficult time setting aside their turf issues, their power struggles, their hidden agendas, and their perceived levels of status.

Working productively with others is both a science and an art. This guidebook provides no quick fixes, but offers new perspectives and ideas about a very powerful and empowering aspect of human relationships -- collaboration. As with most things involving human relationships and group dynamics, you will have to write part of the book yourself as you go along.
What is Collaboration?

In its simplest meaning, collaboration is a means, a process, a particular form of working with others. One does not simply collaborate; always, one collaborates with others for a specific purpose at hand. To collaborate because it is "good" or because you are told you must is senseless and should be resisted. Collaboration, in itself, is never the object or goal.

Collaborative work is work between and among individuals, and thus is like a team, committee, task force, or other face-to-face small groups. But it is both like and unlike these small groups when it is community-based and undertaken by volunteers and staff representing their respective agencies, groups, and institutions. It is in individuals acting as agents for their organizations that collaborative work becomes complex, often conflictive, and always political. As political, collaborative work is about power, control, negotiation, and agreement. When these individuals interact as agents, their organizations are interacting. Effective joint activity depends on clarity about the issues of authority, responsibility, and rights of the agents who speak on behalf of the collaborating entities.

Collaboration is the process by which several organizations or individuals make a formal, sustained commitment to work together to accomplish a common mission.

Collaborative work is always political, with diverse stakeholders bringing their own meanings, expectations, roles, and power.

There are many ways in which organizations, groups, and individuals work together, from information sharing, to joint information release, to program coordination and training, to informal coalition involvement to formal, long-term collaborations. How you define or categorize a relationship depends on the degree and formality of involvement with each other. In the definitions which follow here, Beth B. Rosenthal, MS, trainer and consultant, defines collaboration and distinguishes it from its neighbors, i.e., partnerships, coalitions, and the rest. These practical usages should help you begin to distinguish types of collaborations based on the degree of involvement and commitment a collaboration requires. Consultant Arthur Turovh Himmelman's definition of roles and design guide, included in Section II of this guidebook, also provides practical and wise counsel. As you use his step-by-step approach, continuously ask yourself if this particular structured process of working together is best for the purpose at hand.
Collaboration implies a structure by which partners decide how to plan and act together. True collaborative work is co-creative in that what is done is created by a group, and the structure and process and outcomes belong to all-as-one. It implies a sense of community in which members see themselves as complementary and mutually supportive contributors to the whole and not primarily as competitors. This relates directly to the powerful issue of individual agency versus group recognition, publicity, "ownership," and funding.
WAYS OF WORKING TOGETHER

Beth B. Rosenthal, MS

Organizations and individuals can work together in many ways. Here is one continuum from least to greatest involvement, in terms of time, turf, and trust. *

<table>
<thead>
<tr>
<th>WAYS OF WORKING</th>
<th>EXAMPLES</th>
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<tbody>
<tr>
<td>Networking: <em>exchanging information for mutual benefit</em></td>
<td>ACS is part of a network of breast cancer organizations in Atlanta. These organizations share information, put each other on their respective mailing lists for newsletters, press releases, and events.</td>
</tr>
<tr>
<td>Coordinating: <em>exchanging information and altering activities for mutual benefit and to achieve a common purpose</em></td>
<td>ACS and the Susan G. Komen Foundation share information about their activities and agree to schedule their respective breast cancer conferences at different times during the year and to focus on different aspects of the disease in order to provide the most benefit to the community members who attend. Hospitals and survivor organizations endorse ACS programs, such as <em>Reach to Recovery</em>, and facilitate contact between volunteer visitors and women with breast cancer.</td>
</tr>
<tr>
<td>Cooperating: <em>exchanging information, altering activities, sharing resources for mutual benefit and to achieve a common purpose</em></td>
<td>ACS organizes projects, such as <em>Relay for Life</em> or <em>Making Strides Against Breast Cancer</em>, with the help of interested corporations. ACS assumes responsibility for designing the event and providing public education materials on the issue; corporations contribute funds or goods or recruit participants. Outcomes include increasing awareness about cancer control issues, raising funds for cancer-related causes, and attaining visibility and positive publicity for the participating organizations. In 1997, ACS, the National Cancer Institute, and the Centers for Disease Control and Prevention co-sponsored a leadership conference on prostate cancer in the African American community. Groups such as 100 Black Men of America, Inc., were invited to participate and help to publicize the event. The conference involved some contribution from each sponsor and participating organization. In all other respects, the co-sponsors remained independent and autonomous.</td>
</tr>
</tbody>
</table>
| Collaborating: *Exchanging information, altering activities, sharing resources, and enhancing the capacity of another for mutual benefit and to achieve a common purpose.* | Different models of collaboration include:  
  - Strategic Partnerships  
  - Service Integration Efforts  
  - Comprehensive Collaborations  
  - Conflict Resolution Collaborations  
  The balance of this paper describes these collaboration models. |

* Arthur T. Himmelman, consultant, describes the continuum of working together to include Networking, Coordinating, Cooperating and Collaborating, and provides the definitions used on this page.
WAYS OF WORKING TOGETHER

COLLABORATION

Collaboration is the process by which several organizations or individuals make a formal, sustained commitment to work together to accomplish a common mission.

- American Cancer Society

CHARACTERISTICS OF COLLABORATION

• shared creation: joint action for mutual benefit
• interdependence and reciprocity
• mutual authority and accountability
• shared responsibility, risks, resources, and rewards
• inherent conflict and dynamic tensions
MODELS OF COLLABORATION

Model 1: STRATEGIC PARTNERSHIPS

Organizations collaborate to develop a project where each partner makes a distinct contribution based upon their unique capacity, expertise, or resources. Like combining music and lyrics, or software and hardware, each component enhances and extends the value of the other. Joining efforts with the other partners adds value to what each organization can do on its own. Ideally the collaboration produces a strategic advantage for all participants. Partners create a visible link between their organizations and a product that reflects their joint venture. There is no intermediary body coordinating the work of the partners. While their respective tasks are quite different, partners each share responsibility, ownership of the results and products, and liability for any problems.

Distinct features of strategic partnerships:
- creates new products, projects, markets, value
- consists of organizations with distinct resources and capacities, often operating in separate arenas
- is limited to those actively providing distinct components

- Let's Talk About It is a community-based prostate health awareness and education program for African-American men delivered collaboratively by the American Cancer Society (ACS) and 100 Black Men of America (100 BMA). The goal of this program is to provide the target population with current, accurate, and reliable information on prostate cancer screening and treatment options. Men are encouraged to have conversations with their own physicians about prostate cancer and whether or not screening is right for them. Each partner provides distinct components of the effort: ACS designed the educational materials, maintains a toll-free telephone number and web site providing clinical and resource information, and raises funds to support the project. 100 BMA provides access to African-American community organizations, communities of faith, and workplaces. Both partners design training and presentations, provide volunteers to run local programs, participate in joint evaluations, and obtain media access and resources.

- Look Good…Feel Better is a joint program effort of The American Cancer Society (ACS), The Cosmetic, Toiletry, and Fragrance Association (CTFA) Foundation, and the National Cosmetology Association (NCA). This program helps women undergoing cancer treatment to learn to cope with the appearance-related side effects of chemotherapy and radiation treatments by teaching them techniques to restore their appearance through the use of makeup, wigs, scarves, and other accessories. Look Good…Feel Better takes place in group sessions in hospitals, comprehensive cancer centers, and other community settings, or in one-on-one consultations offered by participating salons. ACS is responsible for national program administration and local program implementation and maintains a toll-free number. NCA recruits and certifies local cosmetology volunteers for the program and provides cosmetology education in hair, makeup, and skincare. CTFA coordinates cosmetics and skin care product donations by CTFA member companies, and it manages a public relations effort for the program. All printed program materials carry the logos of all three partners.
Model 2: SERVICE INTEGRATION EFFORTS

Collaboration can occur between several or many organizations, in order to streamline systems, consolidate resources, save costs, increase service options, or broaden access. Collaboration creates a linkage structure that connects existing efforts. Like organizing a potluck supper, this model reduces fragmentation and duplication of effort, ensuring that the full range of services is available. Different approaches to service integration focus on populations, providers, programs, systems, organizations, or policies.

Community-wide collaborations coordinate existing independent services for a shared population within a community. Case management efforts plan, integrate, and track disparate services for individual clients.

Service providers doing similar work might share training or personnel to enhance knowledge or unify protocols. At the administrative level, related systems may be consolidated or streamlined.

In multi-level collaborations, service providers, funders, government agencies, university or institutional resource people, relevant networks, and policy groups addressing the same issue can unite to create or transform systems.

Distinct Features of Service Integration Collaborations:

- Partners provide similar or complementary services or program pieces that will be more effective if unified.
- Each partner plays a unique role in a larger, shared system; partners are replaceable if their function can be transferred or the scope of services is altered.

- The BEST Program for Women, begun by ACS in Franklin County, Ohio, is a collaboration between ACS, the Columbus Health Department, the Columbus Race for the Cure (CRFTC), the YWCA ENCORE Plus program, nine hospitals, and neighborhood health centers. Breast Education, Screening, and Treatment (BEST) began in September 1992, as an effort to integrate two similar mammography programs targeting the same low-income minority population. A telephone hotline was established to send callers to the appropriate program; additional services of transportation, child care, and Pap smears were developed; CRFTC helps fund the program with race proceeds, and local hospitals provide services free of charge to BEST participants.

- The American Cancer Society's Heartland Division Department of Outreach collaborated with the Indian Health Service Hospital in Lawton, Oklahoma, to create Medicine Circle: Native People Caring for Each Other, which received funding through ACS's Navigator Project in 1999. Tribal elders from each of the seven principal tribes completed surveys for ACS to determine cancer control priorities. The Medicine Circle project provided a Native American ACS staff person to collaborate with each tribe's Community Health Representative (CHR) to conduct cancer survivorship outreach and develop resources, education, and services in a 10-county area surrounding Lawton. Part of this effort was to recruit volunteers for ACS patient issues programs including Road to Recovery, Reach, and Man to Man. This is an example of a service integration effort, in that the ACS programs and network of CHRs and nutrition sites for each tribe already existed and sought to expand their services by linking programs and inservice training related to survivorship. The collaboration enabled tribal programs to increase their repertoire, and ACS educational materials and programs reach a larger audience.
Model 3: COMPREHENSIVE COLLABORATIONS

Collaborative efforts can unite disparate organizations, institutions, and sectors to create more comprehensive approaches for planning, advocacy, and resource creation. Members are drawn from geographic, functional, or interest communities. Strategies include systematic planning and program development with the goal of building local capacity or social action or policy or legislative changes which produce benefits or resources for many people. Some social action collaborations are organized as coalitions of relevant stakeholder groups who work together to influence external change targets. Comprehensive collaborations are characterized by a large and diverse membership, intentional inclusion of different perspectives and constituencies, a large degree of member autonomy, and the presence of some centralized organizing or coordinating body. By including diverse types of participants, comprehensive collaborations attain greater power, vision, and reach.

Distinct Features of Comprehensive Collaborations:

- They mobilize joint effort around an issue that affects all participants, but is bigger than any one group can address alone.
- They structure multiple activities within one collaboration and allow for fluidity in involvement.

- ACS is a member of the Michigan Cancer Consortium, which collaborates to achieve priority cancer control initiatives for the state. The structure consists of 35 Michigan organizations with nine permanent members. This effort began in 1987. By 1996, it had secured $37 million in federal grant money, developed and disseminated breast cancer treatment options, professional guidelines for reducing breast cancer and cervical cancer mortality, developed the Tobacco-Free Michigan 2000 Action Plan, held a prostate cancer consensus conference, and proposed policies for mammography quality assurance. In 1996 it took on the Michigan Cancer Control Initiative, focusing on 10 priorities, each with its own action plan, i.e., breast, cervical, colorectal, prostate cancer, youth and adult smoking, end-of-life referrals, clinical trials.

- ACS works collaboratively on breast, colorectal, lung, prostate, and other cancers. These efforts are often multi-party collaborations representing all relevant resource people and stakeholders engaged with the particular cancer site. These collaborations might include survivors, community representatives of those at risk, service providers, corporate sponsors -- a full range of people specifically selected to reflect diverse views of a common terrain. One example is the Breast Cancer Act Coalition, of the Arkansas ACS Division. This coalition hoped to pass state legislation to impose a 2.5 cent per pack tax on cigarettes other tobacco products, to generate funds for breast cancer screening for underserved women. Participants include ACS, the Hospital Association, the Medical Society, the Nursing Association and other health care provider organizations, as well as consumer groups such as AARP and Area Agencies on Aging.
Model 4: CONFLICT RESOLUTION COLLABORATIONS

This type of collaboration is formed when multiple viewpoints are needed to adequately reflect the complexity of a problem or bring sufficient resources for its solution. In this model, the participants are all directly affected by the same issue, but differ in terms of how it is to be handled. The collaboration entails creating a climate for open dialogue among all perspectives, which encourages the involved parties to try to meet each other’s needs while addressing their own self-interest. At best, this model transforms adversarial interaction -- what might be a win-lose situation -- into one with an all-gain outcome. Participants share their visions to develop a collective interpretation of their common reality and to arrive at a suitable course of action.

Distinct Features of Conflict Resolution Collaborations:

- Partners are organizations with an ongoing relationship which disagree about some shared condition or issue, and seek common ground, or at minimum, a way to coexist.
- This model does not seek agreement or integration. Rather it attempts to understand and respect differences in order to find solutions that will be acceptable to different stakeholders.

- ACS participates in the Southern Tobacco Communities Project, a collaboration between tobacco growers and health advocates, which began as a dialogue to discern common ground, and evolved into an effort to achieve legislative initiatives. With external funding and skilled mediators as facilitators, this collaboration works on sustaining the viability of the farmers and their families as well as promoting safe and healthy communities by decreasing youth access to tobacco products. Their original goals included trust-building and more sensitive communication, as well as problem-solving and mutual understanding.

- The National Dialogue on Cancer is a collaboration of more than 60 national leaders within the cancer community, elected officials, and others representing the public, private, and nonprofit sectors. Their mission is to determine how to eradicate cancer as a major public health problem in this country at the earliest possible time. This collaboration utilizes group meetings, a web site, and newsletter to share information, ideas, and challenges between and among the partners. The partners share what they are doing in the cancer field and seek to identify gaps and opportunities which individual members will work to address within their respective organizations and on a collaborative basis.
## COMPARISON OF DIFFERENT COLLABORATION MODELS

The choice of a suitable collaboration approach depends largely upon the purpose, composition, timetable, and resources available for your collaboration. This chart distinguishes some practical differences among the four models of collaboration.

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<tr>
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<tr>
<td><strong>Types of Collaborations</strong></td>
<td>• Partnerships, joint ventures, public-private initiatives</td>
<td>• Service linkages, networks, or consortia</td>
<td>• Community-wide partnerships, coalitions</td>
<td>• Negotiating teams, debates or dialogues, mediation efforts</td>
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</table>
| **Conditions for Formation (When to use this model)** | • Proactive effort to realize a shared vision  
• Seize a special opportunity  
• Partners realize the potential advantages of working together and combining resources  
• Partners are willing to work closely together and join identities and share risks in order to create a joint effort | • Often initiated by an outside party -- sometimes mandated by funding source  
• Need to streamline systems and consolidate or re-organize resources for greater efficiency  
• Need to save costs by reducing duplication  
• Need to support collaboration members to focus on what they do best  
• Need to unify approaches and protocols | • Issue is identified by the community itself  
• Achieving goal requires a broad and diverse collective effort  
• Proactive -- as in community empowerment, or desire to achieve a legislative or policy win  
• Reactive/defensive need for mobilization around a common threat  
• Partners are willing to live with ambiguity around goals until collective decisions are made | • Interests of differing stakeholders become intertwined and need to be reconciled  
• Need to collaborate is sometimes recognized by neutral third parties  
• Conflicting parties need to find a way to coexist |
| **Purpose /Goal** | • Create new products or services by combining different elements  
• Organizational self-interest and pragmatism  
• Innovation  
• Produce tangible products | • Integrate or unify systems or services to distinct populations or areas  
• Consolidate efforts and reduce costs | • Mobilize a broad base for advocacy  
• Create more comprehensive approaches for planning and community building  
• Address an issue that affects all participants and is bigger than any one group can handle alone.  
• Advance the collective good of the participants and their constituents | • Learn about and understand divergent positions or perspectives that each define part of the problem  
• Agree to solve shared problems and find common ground  
• Choose a collective course of action |
| **Size** | • Small – usually no more than 3 or 5 partners | • May include large numbers | • Large - unlimited | • Small numbers of negotiators representing any size classes of interest groups |

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| **Partners**    | • Only those organizations or individuals who provide distinct pieces of the collaborative project  
• Partners must each make a specific contribution to create the effort, and continue to play an essential role  
• Partners are usually organizations with different capacities or markets | • Organizations or government agencies providing existing services or systems that are linked  
• Partnership is limited to specific services or programs within a shared system  
• Partners are usually organizations targeting similar markets or providing complementary or similar programs | • Diverse types of organizations, institutions, and sectors, and sometimes individuals who are each part of a geographic, functional, or interest community  
• Partners represent diverse components of a system or perspectives on an issue | • Parties with an ongoing, often adversarial relationship, who have a stake in working things out  
• Parties who are all directly affected by the same issue, but differ in terms of how it should be handled |
| **Other involved parties** | • Sometimes involve customers or contacts of each partner, as resources or widening market for the joint effort | • Usually affects external clients or consumers who utilize collaboration’s services | • Sometimes involve an outside target of change that will be more responsive to a collaboration | • Often involve a mediator or neutral facilitator |
| **Processes**   | • Limited attention to collaboration processes  
• Autonomous leadership  
• Shared decision-making around project design, parameters, and implementation  
• Interdependent systems for joint effort  
• Written or legal contract | • Lateral coordination and voluntary cooperation  
• Interorganizational relations are somewhat static and routine, following defined protocols  
• Centralized communication to partners around shared tasks, processes, and results  
• Evaluation measures impact and cost effectiveness | • Attention to process is essential for collaboration sustainability  
• Integration of diverse views informs all processes and decisions  
• Interorganizational relations are dynamic and interactive  
• Inclusive input and consensus  
• Reciprocity, bargaining, trade-offs  
• Evaluation measures impact and suggests improvements | • Ground rules, active listening, agree to disagree  
• Representation of all relevant parties and positions  
• Joint ownership of decisions, agreements, solutions |
| **Necessary Resources** | • Unique contributions of each partner  
• Sometimes requires venture capital | • Shared internal communication and coordination  
• Shared technology (if used)  
• Centralized staff or volunteers  
• Collaboration publicity and outreach to clients  
• Systems for managing and tracking the flow of clients through different agencies | • Centralized staff or volunteers  
• Shared internal communication mechanisms, e.g., listservs, phone chains, etc.  
• Tools for community organizing, mobilization, and education | • Shared mediators (if used) |
### COMPARISON OF DIFFERENT COLLABORATION MODELS (continued)

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</table>
| **Benefits to Partners and Clients** | - Creativity, financial profit, market advantage  
- Distinct desired outcomes for each partner  
- New resources/programs | - Reduce duplication, expand service reach, streamline administration  
- Diversify options and service range for clients  
- Expand referral networks that benefit all partners  
- Broaden awareness of relevant resources | - Social change, advocacy wins  
- More comprehensive understanding and interventions  
- More power and influence  
- Legislative victories, solid plans, or programs  
- Community empowerment and competence | - Multiple viewpoints adequately reflect the complexity of the problem or bring sufficient resources for its solution  
- Negotiated settlement provides a better result than any other alternative (e.g., going to court)  
- Avoid impasse |
| **Duration** | - Tied to project life - short term or long term | - Usually long-term system change/procedure | - Usually long term, expanding, and extending to incorporate discrete or shorter term initiatives | - Until problem is resolved or agreement reached or solution is identified  
- May convert to a different type of collaboration/organization |
| **Structure** | - Direct connection between partners; no intermediary structure  
- Some realignment of internal processes and resources, in order to incorporate work with the other partner(s) | - Usually requires some centralized mechanism for linkage, coordination, and monitoring of workflow, skills, and relationships | - Generally involves a central coordinating or governance structure as the hub of a larger membership engaged in diverse tasks  
- Usually allows for different levels of membership and flexible membership requirements | - Disputing parties with a mediator  
- Negotiating teams |
| **Activities** | - Outsourcing or combining technologies or other resources  
- Producing new products, joint projects, and special initiatives  
- Combining products of one partner and markets of another | - Sharing or linking staff, resources, worksites, services, administration, procedures, joint training, or systems improvements | - Planning, community organizing, advocacy, community and program development, public education, capacity-building | - Debate, dialogue, forums, visioning sessions |
| **Organizational / Collaboration Identity** | - Merged or visibly linked, as sponsors or producers  
- Often entails creation of entirely new program or project effort with a separate identity | - Linked but distinct identities, as part of a network or service group  
- Some alteration of internal procedures may be needed | - Optional identity link; usually no change in existing programs, but agreement to participate together in a larger effort  
- Option to sign on or decline participation to a specific position or action step within the life of the collaboration | - No change in identity; each party retains complete autonomy  
- Outlook or perspective may be altered as a result of collaborative dialogue |
## COMPARISON OF DIFFERENT COLLABORATION MODELS (continued)

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<tbody>
<tr>
<td>Commitment</td>
<td>• Risks, rewards, and responsibilities are equally shared</td>
<td>• Ongoing commitment to participate, to deliver expected services, and to follow shared procedures</td>
<td>• Shared issue of concern is the central coordinating point, connecting diverse stakeholders.</td>
<td>• Commitment to share own perspective and to listen to other positions</td>
</tr>
<tr>
<td></td>
<td>• High intensity commitment</td>
<td>• Low intensity of commitment: partners may be replaced by similar service providers</td>
<td>• Intensity of commitment varies according to level of participation</td>
<td>• No commitment to other partners</td>
</tr>
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<td></td>
<td>• Contracting or legal requirements for the shared ventures are often necessary</td>
<td>• Individual organizational procedures may be altered in line with shared effort (e.g., making reporting formats consistent)</td>
<td>• Expectations of mutual accountability around shared goals and activities</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Participation of each partner is essential to the logic and viability of the collaboration</td>
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<tr>
<td>Advantages</td>
<td>• Ability to utilize technologies, resources, products, consumers, expertise of another organization to add value to existing products and approaches</td>
<td>• Reduce fragmentation and duplication of effort</td>
<td>• Develops holistic approaches to shared concerns and domains</td>
<td>• Transforms adversarial interaction -- what might be a win-lose situation -- into one with an all-gain outcome</td>
</tr>
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<td></td>
<td>• Enables each organization to focus on and contribute what they do best</td>
<td>• Increase access to services</td>
<td>• Creates a larger entity that helps members approach bigger targets and projects</td>
<td>• Helps find new meaning and larger view of complex issues</td>
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<tr>
<td></td>
<td>• Synergy produces unanticipated positive results</td>
<td>• Increase resources and options for existing clients</td>
<td>• Can develop inclusive solutions and approaches that incorporate concerns and resources of diverse stakeholders</td>
<td></td>
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<tr>
<td>Potential Problems (prepare to avoid or address these)</td>
<td>• Violation of acceptable practice</td>
<td>• Integrate efforts around multi-problem cases</td>
<td>• Failure to include important stakeholders</td>
<td>• Inability to respect or accept other positions and perspectives as legitimate</td>
</tr>
<tr>
<td></td>
<td>• Abuse or exploitation of another's contribution</td>
<td>• Enables each organization to focus on and contribute what they do best</td>
<td>• Loss of representation and accountability to base of constituents</td>
<td>• Immutable positions</td>
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<td>• Loss of turf and control</td>
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<td>• Failure to arrive at or honor group consensus on goals and activities</td>
<td>• Private deal-making that does not include competing agendas</td>
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<td>• Compromise of credibility</td>
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<td>• Collaborative effort diverts organizational resources</td>
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<td>• Clash of organizational cultures and expectations impedes collaboration</td>
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<td>• Some members may fail to abide by the collaboration's collective decision-making process</td>
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<td>• Loss of unique identity or brand</td>
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American Cancer Society
Why Collaborate?

Many people and organizations do not want to collaborate for what they perceive are very valid reasons. Among the many reasons are:

- Devoting time to collaboration takes away time from other more immediate objectives and I don't have the time to waste.
- If we share in decision-making, we will lose autonomy, lose visibility, and eventually lose funds.
- Why side with the "competitors?" We will have to work so hard at overcoming their poor image, besides they are hard to work with.
- The leadership of those groups lack direction and are basically incompetent. We can do it better ourselves.
- When we get involved with other groups, we aren't properly recognized and appreciated.
- Our high staff and volunteer turnover makes collaboration so difficult because there is no continuity.
- We inevitably have to do all the work.

All of these reasons are real and actually can happen. However, in and of themselves, they are not good enough reasons not to collaborate. The cost of not collaborating effectively is really too high. More people will go unserved, more resources expended than necessary, and most importantly, more problems left unresolved. If the American Cancer Society wants to respond better to the growing and changing needs of the constituents and communities it serves, then effective collaboration, both internally and externally, must be a high priority.

Of course, collaboration is not the answer for every situation. However, if your solo effort lacks the clout, resources, or solutions needed to produce the desired results, then it is time to consider collaborating in some manner.
What is the ACS’s Commitment to Collaboration?

American Cancer Society 2015 Challenge Goals

The American Cancer Society Board of Directors has set forth very aggressive challenge goals for the year 2015. In setting these goals, ACS recognizes that reaching them will require many effective collaborative efforts between organizations with an interest in cancer control and prevention. Collaboration is crucial to progress towards the 2015 Challenge Goals.

2015 Challenge Goals:

- 50% reduction in age-adjusted cancer mortality by the year 2015
- 25% reduction in cancer incidence by the year 2015
- Measurable improvement in the quality of life (physical, psychological, social, and spiritual) from the time of diagnosis and for the balance of life for all cancer survivors by the year 2015

American Cancer Society Nationwide Objectives

In November 1999, the Board of Directors approved Nationwide Objectives related to the 2015 Challenge Goals. Collaboration is one of the cross-cutting issues that make up four overarching principles for the achievement of our Nationwide Objectives. The concept of collaboration is more than a recommendation; it is a principal that must be embraced to achieve our goals.

**Principle #4 - Collaboration**

Efforts should be increased at all levels of the American Cancer Society for working with other organizations and agencies to achieve our common cancer control goals and objectives.
American Cancer Society Blue Ribbon Recommendations On Collaboration

In November 1997, the Blue Ribbon Advisory Group on Community Cancer Control released its recommendations for future cancer control activities. These recommendations addressed significant changes in the way ACS does business, including an emphasis on effective collaboration to achieve our goals.

**Recommendation:** The American Cancer Society should increase efforts at all levels for working with other organizations and agencies to achieve our common cancer control goals.

The American Cancer Society should:

- Create guidelines to use in identifying partners and coalitions with whom collaboration would be most effective and guidelines for negotiating those partnerships and coalitions.
- Design and implement a practical skill-building training program so that both staff and volunteers collaborate with others more effectively.
- Evaluate the success of collaborative efforts toward achieving specific cancer control outcomes. This is a responsibility for all levels of the Society.

**Rationale:** The reality is that no major cancer control issue, no major gains in reaching established cancer control goals, and no comprehensive cancer control intervention can be addressed by the American Cancer Society alone. This means that partnerships and collaborations, particularly with systems and hard-to-reach populations, are increasingly important for the American Cancer Society.
Collaboration and ACS: We Must Walk the Talk
American Cancer Society, Inc. ~ March 1999

Are we, the staff and volunteer leaders of the largest public cancer organization in the world, willing to commit to collaboration with others in order to achieve our mission?

Effective collaboration is an organizational value and business strategy that is dependent on the commitment by the organization’s leadership and decision makers. If collaboration is to be fully embraced by the American Cancer Society, it is imperative that the staff and volunteer leadership consider it a necessary means to an end in order to further the organization’s mission and goals.

The Need for Collaboration in the American Cancer Society

The American Cancer Society has set forth ambitious national cancer-related goals for the year 2015. So challenging are these goals that it is virtually impossible for ACS to reach the goals working as an independent organization. In addition, an aggressive course of direction for cancer control efforts and a set of specific actions that complement the 2015 goals have been identified by the ACS Blue Ribbon Advisory Group on Community Cancer Control. In its deliberations, the Blue Ribbon Group acknowledged that cancer control issues across our nation are so broad in scope, depth, and complexity that no one organization could possibly have all the skills and resources to effectively or efficiently address these issues. Therefore the Group identified collaboration with others as a guiding principle that should be institutionalized in all levels of the American Cancer Society. We must realize that in order for the year 2015 goals and cancer control agenda to succeed, we must work effectively with other organizations through partnerships, coordination, and collaboration.

Fortunately, there is no lack of intelligent, committed, and passionate individuals and organizations devoted to the cancer problem at the national, state, and local levels. Each has its own resources and skills which they actively apply toward advocacy and program efforts, as well as research initiatives. ACS must leverage its resources and skills (such as volunteer and staff activity, and financial resources) in ways that strive to not duplicate other organization’s efforts, but rather support, facilitate, and enhance existing efforts wherever possible. ACS has the opportunity and obligation to engage in collaborative efforts resulting in more effective, efficient use of donor time and money. This in turn will ultimately result in decreasing the burden of cancer on the nation.

What the American Cancer Society Brings to the Collaboration Table

American Cancer Society
A necessary characteristic of a collaborative partner is the willingness and ability to see its own assets and shortcomings. Over the past year, participants at ACS-sponsored collaboration meetings identified collaborative strengths as well as the most salient challenges to collaboration as they relate to the American Cancer Society.

**ACS Collaborative Strengths**

ACS has the following unique strengths that can be applied in collaborative activities, resulting in far-reaching and powerful efforts:

- A clearly stated mission and goals that are worthy of national interest and action.
- A large, caring, and passionate volunteer and staff force throughout the nation.
- A publicly recognized and credible name.
- Comparatively strong monetary and other resources to bring to bear on the cancer problem.
- An overall intellectual commitment throughout the organization to collaboration.
- Volunteers and staff nationwide who recognize the critical importance of collaboration, and who are working to develop strategies to address it.
ACS Challenges to Collaboration

For any organization, including the American Cancer Society, the challenges to collaborating are not insignificant. In addition, the American Cancer Society has the following unique challenges that it must recognize and address if it is to represent itself and function as a collaborating organization:

- Although the concept of collaboration is generally accepted by ACS, the commitment by individuals at all levels of the organization to stand behind collaboration as a value and operational strategy is inconsistent.
- ACS does not have a strong collaborative reputation within the cancer field.
- ACS needs to enhance collaborative skills and capacities among its volunteers and staff.
- ACS is the largest and oldest private cancer organization with significant financial and staff and volunteer resources. These facts can “overpower” other agencies resulting in mistrust, competitiveness, and turfism.
- Some ACS individuals view and treat other cancer organizations only as competitors, rather than potential collaborators.
- Within ACS, there are fears that increasing collaborative efforts with other organizations can result in a loss of ACS identity and a decline in revenue.

Taking Action to Ensure ACS is a Collaborative Organization

Making changes within the ACS poses unique challenges. ACS is an organization whose history and traditional values are at times in conflict with the current need to commit to collaboration. ACS’s multiple agendas (fundraising, cancer control programs, advocacy, and research) can create internal and external conflict. We must identify and address these conflicts so that the ACS mission and goals remain in the forefront of the decision-making process. ACS volunteer and staff leaders can pave the way to change. A clear sustained commitment by ACS leadership, along with the development of innovative approaches to collaboration, can significantly alter the culture of this organization.

A commitment to collaboration means working in new ways, both within the organization and with others. It means integrating collaborative efforts into the daily operations of the organization. It means reexamining current skills, roles, and relationships and changing them if necessary. It means committing resources to initiate, support, and enhance collaborative efforts.
**A Call for Action**

If the American Cancer Society is to become a collaborative organization, a consistent, clear, strong commitment must be visible for all those within the organization as well as those outside it. This commitment should be visible in the communications of leaders, in the actions of volunteers and staff, and in the allocation of resources. Collaborative opportunities should be reflected in decision making, strategies, and daily operations in every department and every community of the organization. Making the commitment to collaboration as an organizational value and business strategy legitimizes the process of collaboration as well as holding the organization accountable to being collaborative.

We must as an organization, and as individuals in positions of leadership in the organization, acknowledge, accept, and appreciate that we are not alone in the fight against cancer, and that alone we cannot do all that needs to be done. It is through working with others that we will achieve our highest goals for reducing the burden of cancer.
American Cancer Society, Inc.
Philosophy, Principles, and Guidelines for Collaboration


**Philosophy**
Collaboration is a mutually beneficial and well-defined relationship entered into by individuals and organizations to achieve results they are more likely to achieve together than alone. Effective partnerships with other organizations are desirable for maximizing resources to achieve the Mission 2000 goals in our changing environment. Working productively with others is both a science and an art, requiring skills and understanding. We embrace the principles of collaboration as vital to our future success.

**Principles**
We participate in collaborative relationships which:

- Are consistent with our cancer control mission.
- Are faithful to the established values and ethical standards of the American Cancer Society.
- Reflect respect for the diversity of our collaborative partners.

**Guidelines**
The American Cancer Society will:

- Provide training in collaboration skills to volunteers and staff.
- Explore thoroughly the appropriateness of each opportunity for collaboration.
- Consider the ethics, values, and missions of our potential partners.
- Weigh potential gains against the required investment.
- Define the level and depth of commitment required.
- Obtain commitment at appropriate levels of our organization.
- Recognize and prepare for potential barriers to effective collaboration.
- Clarify and resolve conflicts of interest and overlapping interests.
- Seek to facilitate rather than control the process.
- Assess the long-term implications of a collaborative partnership.
- Reserve the right to decline, modify, or disengage when appropriate.
Thinking About Collaborating in the Community: Some Questions to Consider

1. When I sit at my Division/Unit and look at what needs to be done, I begin to consider: Who is "out there" who could work on this with me?

2. When I am sitting in my office, am I confident that every group in the community who might have an interest in cancer control knows the ACS's name, knows how to contact me, and knows my willingness and my ability to work together with them (and others) to co-create a practical, meaningful, and effective project, event, or plan? How do I know this? Am I sure in my judgment?

3. What is the map in my mind of who to involve and how, if I want this community to have an effective cancer control program? If I want ACS to work with effective individuals/groups/organizations?

4. Do I really know what each community group interested in cancer (health and all related issues) knows about ACS, how we work, ACS's priorities; their history with ACS; examples of good or poor work, etc.?

5. What is my ACS history of working relationships with others "out there" in the community? What is the biography of my work on cancer control in this community?

6. Whom have I avoided because I truly am unsure of myself with them; scared of them; confused by them; put off by their ways; "beat up" in our work together...? How do I get past my history of avoidance/fear/anger/confusion...? Who is out there to be a go-between to bring us closer?

7. Do the folks out there and the people in here look and sound pretty much like each other? Who out there is not yet in here? Are the doors here wide enough?

8. How much time do I spend in here? Out there? With those like me? And with those who are different from me?
II.

GUIDANCE MATERIALS

The components in this section address issues to consider when approaching potential collaborations or when assessing current collaborative efforts. It is not necessary to work through every section included here in every instance.

Several models are included for your consideration, including the work of consultants Beth B. Rosenthal, MS and Arthur T. Himmelman, respectively. You are encouraged to explore these different approaches, and ultimately use what best addresses your needs.
Common Factors in Successful Collaborations

Each collaboration is unique in its characteristics and structure. Nevertheless, there are key ingredients to each collaborative effort that can largely determine how successful it can be. Most successful collaborations or coalitions have the following common factors:

\{ Mutually Agreed Upon, Clearly Defined Shared Vision or Guiding Purpose \}

This is probably the most important element of collaborations. Developing a shared vision begins with understanding that participants, while agreeing on the overall goals, bring different agendas to the collaboration. Openly sharing separate agendas is a necessary step in developing a common vision and will help avoid future misunderstandings and conflict. A major challenge in collaborating is finding ways of meeting different needs of participants while making significant progress towards resolution of the overall problem.

Collaborations exist to achieve certain mutually agreed upon specific results and outcomes. The process of collaboration should aim towards these clearly stated results. Progress towards the results should be monitored on a continual basis to decide what needs to be modified, expanded, or dropped.

\{ Competence \}

Without minimum competencies, the whole is less than the sum of its parts. The selection and training of organizational representatives, both volunteers and staff, in collaborations is extremely important. Strengths and weaknesses of personnel involved must be considered and appropriate training provided.

\{ Mutual Respect, Tolerance, and Trust \}

Like competence, there must be a minimum threshold of mutual respect, tolerance, and trust for a collaboration to succeed. Successful collaborations do not require friendships between participants or even that they like each other very much. Successful collaborators tend to ignore the quirks of their colleagues and focus on managing one another’s strengths rather than one another’s lesser qualities. It is explicitly understood that the task at hand transcends personal issues. The collaboration exists precisely because the collaborators all believe they are contributing value and they need each other to get the job done.

\{ Skilled Leadership \}

Collaborations usually begin with a small group of interested individuals brought together by a catalytic event or by common needs or values. All participants in this initial group have a stake in leadership and in the outcomes. As the collaboration grows, new participants need to feel a sense of responsibility for the
success of the group, even if they choose not to take a leadership role. As the group further evolves, new leaders need to be cultivated to ensure that a few individuals are not over-burdened and are not perceived as too controlling or monopolizing. Continuity and orderly transition of leadership are essential. Good leaders generate, build, and sustain trust by showing constancy, congruity, reliability, and integrity.

### Active Involvement of Participants/Attention to Process

While collaborations live by their results, attention always must be focused on the process of including people in the shared decision-making of the collaboration. There must be active involvement of participants in the establishment of goals and objectives, selection of major activities, negotiation of roles and responsibilities, and creation of operating procedures. Minority opinions need full hearings. Since participants always "come to the table" with their own agendas, it is important to maintain the focus on the agreed-upon mission while simultaneously striving to meet participants’ organizational and individual needs. There will be a certain degree of discomfort, disagreement, and conflict. This should be expected and is natural when parties engage in collaborative efforts. The key is to manage the conflict and channel it into useful solutions. Attention to process and fair play is critical. People don't mind a fair fight, but don't blindside them or slight them unless you are looking for trouble.

### Clearly Defined Roles, Responsibilities, and Operating Procedures

There are clear roles and lines of responsibility for each participant. Each has a defined functional role. Everyone is responsible for their own duties within the agreed upon operating procedures, but encouraged to create shared understandings about the entire task.

### Diversity and Inclusion

Collaborations must seek the richness that comes from including members from different groups, whether they be cultural, racial, ethnic, gender, or income. This most often results in new perspectives and creative solutions to problems. Don't make plans to affect people without involving and collaborating with them. Lack of involvement of the community being targeted and key intermediary groups (i.e., worksites, churches, media) is almost always a critical problem. Disenfranchisement is a primary reason for ineffective and inefficient programs. You must involve the appropriate people.

### Respect for Differences

Collaborative work must be entered into with the expectation that others we want to work with will be like, and be unlike, oneself and one's agency (ACS). Differences will exist in how they understand and work collaboratively on a
common project. Each individual brings his or her own cultural and personal and organizational/group understanding of the content being worked on.

Expect, invite, witness, and work with these differences. When appropriate, confirm the difference, validate, and legitimize it. Collaborative work transcends difference for a common purpose. It neither denies nor avoids it, with some exceptions. It is here where the ACS Principles and Guidelines, which follow in this guidebook, become real and crucial.

Styles of collaborative work differ by social class, ethnicity, cultural group, profession, geography, age, and gender, as well as by individual and organization. Expect this.

\{ Good Communications \}

Effective collaborations have communication patterns which include regular information sharing about the goals, objectives, and progress towards those goals, as well as planned discussion of interagency competition, vested interests, and turf issues. The information flow is continuous but not continual. The focus is on trying to create a rhythm, a tempo, or flow appropriate to the relationship and task, rather than a rigid structure.

Sadly, most people honestly think that when they talk with someone or send off a memo or hold a meeting that they are truly communicating. Most organizations genuinely believe that their people all speak the same language. One of the great challenges of communication and ultimately collaboration is to get others to "see what you see" or understand what you are trying to say.

\{ Early Success \}

A clear success early in the collaboration is important. The first test of strength is critical because if it is not successful, the centrifugal forces are unleashed. Early success can carry you through later discouragement, especially if the opponent is thought to be invincible.

Don't take on more than you have a chance of affecting; this is a common problem for most health and social service agencies. Choose a first objective that is neither too trivial nor too difficult. Don't start with the "biggest boulder in the road" or the hardest issue first. This is often a mistake as you can get a false picture of your potential and think that the problem is impossible.

\{ Conflict Resolution \}

Effective collaborations will handle conflict constructively and fairly. Conflict, whether overt or covert, is an inevitable part of human interaction. It is present whenever groups must function together to achieve a given task. Conflict is not necessarily bad; it is natural and should be expected. The trick is to understand
how we go about engaging in it and to make sure the disagreement we are having is the same disagreement the other party is having.

It is vitally important to understand one's own style of argument and to know one's own objectives. Many conflicts are caused by a failure to achieve clarity on goals/objectives/strategies, roles and responsibilities, procedures and relationships. A personal distaste for those with whom we disagree should be a footnote. The task of managing conflict is one of the most taxing any leader faces. The resolution must always be in line with understood objectives. Team-building demands that we better understand our own conflict styles and work to sharpen our skills at interacting with other styles. How you "play the game" earns other people's respect.

**Adequate Resources**

Any venture must have adequate resources to successfully address the scope of work mutually agreed upon by the collaborating partners. A critical problem is that rhetoric many times outweighs resources available -- a deathblow to effective programs and effective collaborations.

Each participating member agency must decide what it is willing to invest. Some may invest money; some invest people; some, their name; others, their brain power. It's a bit like adding apples and oranges, but it's the job of good collaborators to turn the ingredients into a fruit salad.

Obviously, for a collaboration to work, it must produce for its members more assets, tangible or intangible, than they put into it. There must be a payoff commensurate with the investment or the collaboration will break down.
A. DEFINING SUCCESS*

There are many ways to define collaborative success, and multiple factors to assess collaboration effectiveness. Some concepts of success apply to all models of collaboration; others, including many suggested in this paper, relate more to larger collaborations, such as service integration and comprehensive models.

1. ACHIEVING GOALS

Definitions

- Develop a project with tangible results
- Integrate services, yielding improved access and more comprehensive resources
- Accomplish a social change purpose
- Empower a constituency
- Find common ground

Factors Contributing to Success

- Visionary mission that unites the partners / membership around a common purpose
- Appropriate target and realistic goal
- Goal is member-driven
- Goal sustains commitment of participant
- Informed membership / constituency
- Interim victories
- Adequate resources – funds, staff, connections – to achieve goal
- Leadership expertise on issues and political process

2. ACHIEVING LONGEVITY

Definitions

- Endure and weather changes in goal, resources, membership, or external variables
- Create lasting networks that can be resurrected

Factors Contributing to Success

- Partners remain committed to the work and to the process of managing diverse interests within the collaboration
- Adequate resources to sustain participation and endure as a collaboration
- Multiple levels of involvement
- Inclusive participation in decision-making
- Leadership is skilled in collaboration management and facilitation
- Adaptation to changes within and outside the collaboration over time
- Collaboration provides a mechanism for leadership development and succession
- Collaboration develops and uses a mechanism for conflict resolution

* The information on Collaboration Success is consolidated from a combination of a literature review, suggestions from participants in many collaboration workshops, and findings from a study of 40 social change collaborations conducted by the author with Terry Mizrahi, PhD, in 1986-7.
### 3. Gaining Recognition

**Definitions**

- Gains community support and mobilization
- Gains legitimacy from target of change
- Gains public credit for collaboration achievement
- Organization’s reputation is enhanced and not compromised by the collaboration

**Factors Contributing To Success**

- Creates new products or services that add value to each partner’s organization
- Develops a broad-based constituency
- Provides reliable and useful information to public or target
- Represents fairly a constituency/community
- Provides protection for members in assuming a shared stance on controversial issues
- Understands and cultivates collective power
- Connects strategically to power structure, market/target

### 4. Meeting the Needs of Collaboration Partners

**Definitions**

- Partners gain tangible rewards for their participation

**Factors Contributing To Success**

- Partners become informed and involved on an issue
- Partners gain new skills, competencies, connections, and information
- Collaboration produces resources and benefits that are important for partners
- Integration of services or products helps partners to achieve respective goals
- Division of labor is comfortable for partners
- Collaboration process is comfortable for all partners
- The pace of collaboration accomplishment is acceptable to all partners
- Partners have an opportunity for creative/innovative work
B. ADAPTABILITY AND FLEXIBILITY

Because so many different elements interact to affect collaboration development, flexibility in approaching the work is essential. At each stage it is important to reassess past decisions, evaluate effectiveness, and make adjustments, if necessary. Change may be needed in any or all of the following eight areas:

1) Goal and strategy reassessment
2) Resources
3) Structure
4) Participation benefits
5) Processes for collaboration
6) Getting the work done
7) Visibility and credibility
8) Adapting to changing conditions

1. Goal and strategy reassessment

More than anything else, commitment to the issue or goal is the critical factor in sustaining involvement in a collaboration. Therefore, a collaboration needs to find ways to make the goal salient to all partners. If the collaboration has not achieved its goal, it may want to assess the reasons. It may be that the goal is:

- too vague
- too limited
- not directly relevant to the partners
- not viable
- contrary to partner organization's philosophy
- too difficult to attain with existing collaboration resources

Should a goal change be necessary, the collaboration participants may need to make other adjustments in partnership, resources, outside support, or structure.

Sometimes the goal remains appropriate, but the strategies for reaching it need to change. Strategies need to be practical, attractive, and effective. Some collaborations excel at certain strategies and renew them each year; others try new things according to changes in target, climate, partnership skills, or interests. If a strategy works, it may force the collaboration to take on a new project. For example if a needs assessment is successfully conducted, its findings may point to new initiatives to be undertaken. In this way, changes in goals and strategies are interactive and need to be addressed as such.
2. **Resources**

A variety of resources -- vision, commitment, power, funding -- are needed to sustain collaborations over time. With changes in external variables (such as political climate or funding opportunities), membership loss, or decisions to approach new goals, it is necessary to take stock of the collaboration's resources and make relevant adjustments. Also, decisions about what to do, how to respond to new opportunities, and what to include in future plans will be affected by the actual resources available. Existing workload or strategies may need to be reduced if key resources are lost; new plans need to be realistic, given the resources likely to be obtained and sustained. Key resources include:

**In-kind contributions from partners**
Partners should be encouraged to continue to contribute whatever they can to the collaboration, such as expertise, contacts, meeting or office space, mailing lists, volunteers, organizing skills, access to significant constituencies. Understandably, these contributions will change over time, according to the current focus and resources of each partner. In some cases, their contributions will be expected through a formal contracting process, which needs to be renegotiated periodically. In others, the leaders need to skillfully draw out and utilize whatever the partners can be expected to share.

**Collaboration skills**
Collaboration partners need to acquire and share skills for their collective work. Such skills include organizing and delegating a fair division of labor, bargaining, collective decision-making, negotiating, conflict resolution, and shared leadership. Over time, collaborations will require the use of such skills. People who have them must be given an opportunity to share them and to lead. People who want to learn them need to be given the opportunity to be trained or otherwise be exposed to these techniques. The group may want to highlight and value those skills that help to advance collaborative functioning, providing training or shadowing as needed, in order to increase them.

**Expertise**
Regardless of the purpose or type of the collaboration, expertise is needed to get the job done. Political, social, and program knowledge is vital, as is information on the changing environment in which the group's work occurs. Knowledge of relevant trends (i.e., legislation, policy, community priorities, competition) needs to be acquired and applied. Tasks such as needs assessments, joint programming or case management, advocacy and lobbying, all require specific expertise. When a collaboration decides to undertake a new venture, it should take steps to ensure that the required expertise is available.

**Membership**
Large collaborations need to include all relevant participants, key opinion leaders and sectors, and address cultural diversity. The strength of comprehensive or service integration collaborations comes from their active membership and the organizations and constituencies that they represent. Therefore, membership
selection and cultivation needs to be strategic and ongoing.

**Funding**
Funding is needed for the collaboration to sustain the effort. Over time, collaborations need to budget for the costs of managing the collaboration itself. This includes paying staff and covering other costs for space, communication, meeting time, equipment such as modems and fax machines, and postage. As the collaboration or some subcomponent of it takes on new projects and brings in business income or grants, the collaboration needs to find ways of managing and maintaining collective accountability for these new fiscal resources.

**Outside allies and supports**
Collaborations function in a complex environment where people outside the group can be a help or a hindrance. Over time, there is a need to identify key targets and allies who can be cultivated to support the work of the collaboration. New players in important positions should be approached and brought up to date on the collaboration's work and plans. Because their cooperation will probably require some sort of trade-off, outsiders should be asked for their own perspective and concerns. Clear negotiations may be necessary.

3. **Structure**
Collaboration structure needs to reflect shared leadership and power, multiple levels for participation, mechanisms for expansion to accommodate new members, tasks or components, and mechanisms for leadership succession or rotation. In large collaborations, over time, a certain group of people may become entrenched as leaders or "do-ers," and the core group takes on a life of its own. This is dangerous because the structure needs to remain open and inclusive. Changes in structure are sure to be needed if:

- new players are involved
- new opportunities or challenges arise
- the collaboration matures and deepens
- new leaders emerge
- the collaboration takes on new activities or completes certain commitments

4. **Participation benefits**
It is important to recognize that collaboration members will not continue to participate unless they feel that they are benefiting from their involvement. Generally, the most significant factor decreasing membership involvement/commitment is diversion of an organization's resources (time, funding, leadership, etc.). Therefore, collaborations need to offer alternative or comparable resources to participants. Over the long run, the benefits of involvement must outweigh the costs.
The needs of partners change over time. Initially, the intrigue of working with others or getting involved in a new project may be enough. Opportunities for socialization, sharing information, and engaging in mutual support should be provided. A longer-term commitment to the collaboration requires more substantial or tangible benefits. As partners get to know each other better and recognize each other's skills and assets, new opportunities for joint programming or fundraising, exchange of staff or skills, and countless other connections may arise. The collaboration itself can encourage or structure these opportunities for mutual gain. Alternatively, the collaboration itself can provide things such as funding, training, publicity, or cost discounts, that benefit all partners by virtue of their involvement in the larger effort.

One constant need, often overlooked, is that all partners – new and established – require recognition and respect. They need to be heard, valued, involved, and rewarded. If you are not sure what your partners expect to get out of your collaboration, ask them, and then problem-solve together to see how those needs can be met.

5. **Processes for collaboration**

In collaborations, attention to PROCESS is as important as attention to PRODUCTS and OUTCOMES. It is important to identify and try to evolve operating procedures that "level the playing field" and manage diversity. Because people and organizations are generally unaccustomed to sharing power and responsibilities, collaborations need to create new norms and cultures that provide a context for doing this work together. At different stages of development, collaborations may require processes for:

- shared decision-making
- fulfilling the responsibilities of representation
- inclusive communication and outreach
- conflict resolution
- mutual accountability
- bargaining and negotiating within the collaboration and between the collaboration and others
- orienting new members
- obtaining and valuing input of new and existing members
- collective responsibility

6. **Getting the work done**

Doing collaborative work requires approaches different than those used in single organizations. Much more can be accomplished if partners, members, and staff share responsibilities and fulfill new roles. The challenge is to:
• identify areas of individual and group responsibility.
• arrive at a mutually acceptable division of labor.
• find ways to maximize and integrate the diverse contributions of members.
• help staff to act as coordinators and facilitators, as well as directors and implementers.
• develop systems for shared responsibility, including clear directions for task rotation, delegation, and fulfillment of joint duties.
• systematically involve volunteers in meaningful activities.
• pace projects, making realistic demands on members and staff.
• take time to build skills and learn together.
• sustain direction and focus amid changing external and internal conditions and priorities.

7. Visibility and credibility

Some collaborations are engaged in social change work; other collaborations produce specific projects, but both need to attain visibility with the public and credibility with participants, funders, and supporters. These needs increase with time.

The collaboration itself needs to achieve "name value" and recognition in the community. Initially, when the group has no track record, efforts to build one and to document successes are vital. Later, when things have been accomplished, the challenge is to continue to build the reputation of the collaboration, while crediting its individual members and their organizations for whatever has been achieved. Concomitantly, partners need to credit the collaboration for its accomplishments rather than just using it to advance their own reputation.

In larger collaborations, there is danger that decisions or plans may be made only by a privileged few, leaving out the broader base. This invites disaffection, discrediting, or competition from those who feel excluded from the process. Credibility in the collaboration will increase if the membership base is fully informed and approving of collaboration work, and if the collaboration is accountable to its members. Growth entails finding new ways to keep the larger membership and community apprised and involved.

8. Adapting to changing conditions

External conditions are constantly changing and demand that collaborations respond or adapt. Over time, collaborations need to be alert to and accommodate changes in:

• political or economic climate
• windows of opportunity for achieving collaboration goals or acquiring more resources
• relationships within the collaboration, and between the collaboration and outside targets or allies
• the emergence of new issues or perspectives
• the target people or agencies that the collaboration is attempting to influence, due to changes in personnel or political changes, gain or loss in power, or the impact of the collaboration's past relationship with them
• internal or external conditions affecting the individual partner organizations
• existence of opposing collaborations

C. CONCLUSION

There are a variety of things that collaborations may do to enhance their effectiveness and increase their success. As we learn more about working collaboratively, it is clear that certain intrinsic approaches or values increase the likelihood of positive outcomes. Collaboration entails interaction and constant change; the more skills we develop to manage this dynamic fluidity, the more equipped we will be for collaborative work.
DEVELOPMENTAL STEPS IN COLLABORATION

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INTRODUCTION

Collaborations experience two kinds of development simultaneously: PROCESS (how and why), which relates to the working relationships and structure of the collaboration, and TASK (what and when), which relates to goals, outcomes, and accomplishing tasks.

This paper outlines five stages and seven steps in collaboration development that are relevant for all models of collaboration. Although these steps are presented here as linear and sequential, in fact, they are continuously dynamic and evolving. While each phase has its own specific tasks, processes, challenges, and outcomes which require completion in order to progress to the next, it is necessary to revisit and update knowledge gained in previous stages, incorporating new factors on a regular basis.

PRE-FORMATION

Before forming a collaboration, potential partners need to assess whether collaborating will advance individual organizational interests, help clients, and/or enhance knowledge through innovation. It is useful at this point to scan the environment, take stock of organizational capacity, and see how compatible potential partners will be.

STEP 1: EXPLORE AND ASSESS COLLABORATION READINESS

Determine whether collaboration is advisable or necessary, and understand fundamental requirements and characteristics of collaboration.
FORMATION

During the FORMATION PHASE, the primary tasks are to organize the collaboration, recruit members, establish a structure, identify goals and strategies, and clarify working relationships and accountability mechanisms. Process tasks in the formation stage include arriving at agreements about domain, ideology, administration, and evaluation and developing a common frame of reference.

STEP 2: GATHER AND CONNECT

Mobilize the initial partnership group or the core of a larger collaboration. Begin to build trust and mutual understanding and explore possible themes and parameters for the collaboration.

STEP 3: SHARE VISION AND FOCUS

Arrive at agreement on the collaboration’s purpose and goals, ensuring that these are inclusive of the perspectives and expectations of all partners.

STEP 4: CREATE NEW WAYS OF BEING AND WORKING TOGETHER

Create collaboration processes, norms, and culture that form the basis for the way that partners treat each other and work together.

IMPLEMENTATION

The primary tasks of THE IMPLEMENTATION PHASE are to create and implement an action plan, to launch the project(s), to produce preliminary results and analyze progress to determine next steps. Parallel to these product tasks are process tasks such as establishing a structure, tracking the work flow, and cultivating resources. If there is funding, staff is recruited and hired, contracts and subcontracts are developed and protocols for contract compliance are created and tested at this point.

STEP 5: DESIGN STRUCTURES AND PROCEDURES

for implementing and monitoring the collaboration’s work.
MAINTENANCE

In the MAINTENANCE PHASE, projects move toward expansion or institutionalization, sustaining internal development while progressing toward goals. At this point, the collaboration needs to sustain its work, keep members involved and informed, and re-approve or alter goals, activities, and strategies according to how things have been going. Some collaborations may need to replace members or recruit additional people in order to take on a new project, or represent a wider constituency. Others may change goals or take on new projects.

STEP 6: SUSTAIN THE EFFORT AND ADAPT TO CHANGE

Keep things moving smoothly, while adapting to internal and external change. Avert or address problems that can impede collaboration functioning.

TERMINATION/TRANSFORMATION

Finally, collaborations reach the phase of TERMINATION/TRANSFORMATION. They may have accomplished their goals, completed their project, and decided to disband. Or their project may have been spun off and "institutionalized" independently or incorporated by another entity. Or the collaboration has decided to transform itself into a permanent organization.

STEP 7: DISSOLVE OR TRANSFORM THE PARTNERSHIP

Make a respectful and harmonious transition from collaboration to whatever comes next.

These seven steps reflect the many considerations that go into building effective collaborations. While presented here in sequential order, it is important to remember that collaboration progress requires continuous flexibility, adaptation, and change.
DECISION-MAKING IN COLLABORATIONS

Decisions made by collaborations will affect all partners and inform the work that they do. Because of the need to cultivate shared ownership, collaboration decision-making needs to include many levels of participants. Records of decisions should be consistently kept and distributed and available to all relevant parties.

Identifying the Decision-Makers

Collaborations need to verify who is eligible to make different kinds of decisions. Considerations include the following:

1. Is it one vote per organization or per person?
2. Can each person vote regardless of their position in their own organization, or can only organization directors or board members vote?
3. Can there be proxies or substitutes for voting members?
4. Do people have to be present or can they vote by fax, ballot, etc.?
5. In larger collaborations:
   - Is there proportional representation, for example, one person voting for every 20?
   - Can whoever is present during decision-making sessions vote, even if they are new or do not represent a specific group?

Some groups establish quorums for each part of the decision-making structure. It is also important to have a policy on who cannot vote. Nonvoting participants may have input, if time is structured for discussion of issues prior to decision-making.

Making Informed Decisions

Everyone who is to be involved in the decision-making process needs to receive relevant background information in order to make an informed choice. If decisions are to be made at meetings, the agenda and background materials should be distributed well in advance so that participants can arrive prepared and informed.

Mechanisms for Non-Attending Partners to Have Input Into Decisions

If relevant participants cannot be present for a decision-making session, their input

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1 Although decisions can be made by various means, these examples use the term “vote” for purposes of clarification.
should be obtained in another way (e.g., over the phone or by fax or proxy). Using a list
or roll call will help to identify who is missing.

**Communicating and Abiding by Decisions**

Decisions should be actively communicated to all partner organizations, and, in large
collaborations, to different levels of membership. Efforts should be made to identify the
appropriate persons within an organization to receive this information. Minutes of
meetings should clearly delineate decisions made. A log book may be kept to record
all decisions and to use as a handy reference. If an agreed-upon decision-making
approach is used and a set quorum established, there should be little difficulty in
recognizing when decisions are made and abiding by these decisions. This does not
negate the occasional need to revisit, revise, or rescind a decision.

**Obtaining Approval from the Full Collaboration**

Clarify in advance what situations will require approval from all the partners; for
example, can the collaboration sign or develop a position paper? Write a letter of
endorsement? Join a lobbying effort?

Also clarify the process for obtaining this approval in a timely fashion using faxes, emails,
phone trees. The collaboration can delegate that certain members take charge of
different issues and report back to the full group.

**Obtaining Approval from the Partner Organizations** *(managing the
accountability/autonomy tension)*

It is important to clarify the types of issues which will require authorization or formal
approval from the leadership of the partner organizations which are represented in the
collaboration. The collaboration participant who represents an organization should be
accountable for involving their own organizational leadership in collaboration decisions
in accordance with their agency’s decision-making practices. The collaboration may
want to keep records of the types of decisions which will require this outreach, as well
as suggest processes to ensure that it occurs in a timely fashion.

**Decision-Making Approaches**

There are a variety of approaches to decision-making. Collaborations may use different
approaches for different occasions or tasks. Some collaborations utilize a neutral
facilitator to design and guide the decision-making process. Others develop protocols
for decision-making, or criteria for analyzing issues, and use these to frame the process.
*(See below for more detail on these approaches.)*

- nominal group technique
- consensus
- working consensus
- vote, with winning majority of 80%, of 60%, or whatever percent you choose
- vote, with simple majority (51%)
- straw vote

American Cancer Society 45
• no action unless there is unanimous support

How to Manage Dissension
One strategy for enabling action when there is no consensus is to "agree to disagree." Options for managing dissension include:

• Each partner has veto power.
• Only those partners supporting a decision sign on; those opposing do not.
• Dissenting participants can articulate their own position or develop their own action.

Dividing Up Decision-Making Areas
Operating a collaboration is complex. There are too many details to involve everyone in every decision. It is best to divide up decision-making responsibilities. Especially in large collaborations, different levels within the structure can be assigned primary responsibility for distinct areas of decision-making. Distinct areas for decision-making include:

• administration (coordinating and delegation)
• domain (goals, target area/group, purpose)
• strategy (activities and tactics)
• evaluation (review progress and amend plans)
• leadership selection

Decision-Making Approaches
Collaborations can use a variety of decision-making approaches. Different situations call for different methods. Here are instructions for four popular models:

1. **Nominal group technique** (most inclusive, bottom-up brainstorming)
   - Facilitator defines the task or question.
   - Facilitator asks each person to write down, on their own paper, or on a visible flipchart, one to three responses to the question.
   - In round robin style, the facilitator asks each person to read their responses, and lists them together on one flipchart. No discussion or questions are allowed at this point.
   - Facilitator asks if anyone has questions about any item; person who contributed the idea responds.
   - Facilitator and group consolidate ideas where possible, condensing the list to 8-10 separate ideas.
   - To narrow this down to three priorities, the facilitator asks group to choose the three most important ideas by a show of hands. Each person gets three votes. The facilitator writes down the number of votes next to each idea.
   - Alternative method: More precise weighted multi-voting techniques are
needed for lists with more than 50 items. One option is to distribute up to 8 cards to each participant and ask them to write down their preferred items, one per card, and assign a point value (up to 8) to each selection. Then the facilitator collects cards and tallies votes, marking the visible flipchart list.

- The items with the highest point value are the group’s top priorities or selections. These then may be further grouped, consolidated, and prioritized.

2. **Consensus** (allows room for explanations and other ideas; deepens understanding of the issues, helps partners find their common ground)

   There are many lengthy approaches to inviting inclusive dialogue and helping groups find consensus. Here is one:
   - Facilitator encourages discussion and helps group arrive at consensus.
   - Facilitator structures time to allow one (brief) speaker for and one against each item on the final list. OR Each item being discussed is compared to some shared criteria developed by the group.
   - Time permitting, dialogue is extended, allowing people with certain points to persuade and convince others to shift their position.
   - Discussion is directed into some form of consensus — usually this evolves on its own.
   - Agreements are clarified, and points of disagreement are separated out for further discussion.
   - The depth of dissension surrounding remaining items is brought to the surface, and the process continues or changes to a different decision-making approach.
   - Consensus is reached when the group fully understands the decision and can work with it, even if they were not unanimous in supporting this position.

3. **Voting** (gets the job done, does not allow for individual perspectives, or depth of understanding)

   - Issues to clarify before a vote is taken:
     - **What is a majority?** 51%? 60%? 95%?
     - **Who can vote? How many times?** (this is an issue if you have more than one person from an agency, or any other block of voters that can offset the equality of the vote.)
     - **Options for dissension.** If someone’s idea is voted down, how can they feel comfortable with the group’s decision and continue to participate?
     - **Voting methods:** secret ballot, show of hands, voice vote; participation
only at meeting, or by mail, fax, or telephone.

4. **Straw vote** (determines whether there are clusters of agreement; an interim measure)

   - Take a vote, by a show of hands, but use it only for temporary information, not as a final decision.
**SUGGESTED DIVISION OF DECISION-MAKING RESPONSIBILITIES WITHIN LARGE COLLABORATIONS**

The following chart suggests one way of dividing up primary responsibilities for decision-making among different levels within a collaboration. These divisions are not fixed or linear, and in fact, they are often interactive.

<table>
<thead>
<tr>
<th>SECTOR / POSITION</th>
<th>TYPES OF DECISIONS</th>
</tr>
</thead>
</table>
| **Executive Committee/ Steering Committee/ Board / Officers** | • Policy development and implementation  
• Structure and process for collaboration work  
• Evaluation of process and products  
• Criteria and job descriptions for paid or volunteer work  
• Direction and coordination of staff  
• Budgets and fundraising plans  
• Creating/dissolving committees or task forces  
• Program evaluation  
• Resource allocation |
| Committees or Work Groups        | • Program priorities  
• Implementation strategies  
• Planning priorities  
• Action priorities  
• Program priorities  
• Funding and program development  
• Evaluation of programs  
• Problem-solving |
| General Membership               | • Ratification of operating procedures, bylaws and amendments  
• Election of officers  
• Identification of new committees  
• Involvement in planning process for the entire collaboration  
• Mission and goals  
• Strategies, tasks, and actions |
| Individual/ Organizational Partners | • Degree and level of partner involvement, contributions, activities (collaborative agreement)  
• Implementation of shared tasks and activities  
• Implementation of subcontract (if any)  
• Public identification with the collaboration  
• Desired accountability to organizational leadership  
• Evaluation |
| Lead Agency (if any)             | • Administration  
• Program management  
• Fiscal management  
• Subcontractor monitoring |
| Paid Staff (if any)              | • Day-to-day tasks and priorities  
• Processes and participants for project implementation  
• Membership involvement and communication  
• Training and leadership development |

Staff alone should **not** have decision-making power for the collaboration on matters relating to goals, strategies, and leadership development.
Managing Dynamic Tension in Coalitions

Terry Mizrahi, PhD, and Beth B. Rosenthal, MS

Overview

Coalitions, as complex organizations of organizations, inherently experience dynamic tensions. Five of these tensions and their management are described below.

A. The Cooperation-Conflict Dynamic

While shared goals and a willingness to work together are the foundation of coalition functioning, in fact coalitions are characterized by conflict as well as cooperation.

Conflict inherently occurs on several levels:

1. between the coalition and the target they wish to influence around strategies and issues such as credibility, legitimacy, and power
2. among the coalition participants around issues such as leadership, decision-making, and personality/style
3. between the coalition and its member organizations around issues such as unshared goals, division of benefits, contributions, commitments, and representation.

Since conflict is an inevitable part of the coalition dynamic, coalition work should be approached as a conflict resolution model, where bargaining, trade-offs, negotiating, and compromise are part of all decisions, and agreements are reached by mutual consent.

1 This paper is adapted from a longer article by the authors, "Managing Dynamic Tensions in Social Change Coalitions" in T. Mizrahi and J. Morrison, (Eds.) Community Organization and Social Administration: Advances, Trends, and Emerging Principles. Haworth Press, 1993. While a coalition is only one type of collaboration, the dynamics described in this paper apply to all collaborations.
B. **Mixed Loyalties**

Coalition members have a dual commitment, to the coalition and to their own organizations, producing a conflict between altruism and self-interest.

Coalitions that operate in the same service or issue areas as their member organizations may compete with members for resources, organizational time, and energy. There may also be confusion over which "hat" coalition members are wearing while participating in coalition business. Once a coalition is formed, this "mixed loyalties" tension affects the degree of commitment and the contributions that members are willing to make to the coalition, as well as what the coalition can expect from them.

Organizations frequently join coalitions for some protection, because they cannot or do not want to be visible on a particular issue. On the other hand, participating in a coalition means assuming a collective risk, presumably for a greater good or benefit. Once coalition members begin working together, an organization's autonomy may be compromised. Organizations may decide not to join or remain in a coalition because they want to control their own agenda, or are focused on their own survival.

Coalitions can minimize losses and risks for member organizations by using the following approaches. They can:

1. design collective efforts that do not threaten the turf or networks of the member organizations;
2. identify and treat carefully issues or positions that could compromise members' credibility and funding;
3. prevent direct competition between the member organizations and the coalition; and
4. agree on actions that organizations can do in the name of the coalition versus those that they do on their own.

C. **Autonomy vs. Accountability**

A coalition must have enough autonomy to take independent action, and enough accountability to several levels within the coalition and its member organizations to retain credibility and maintain the base which is its essence. Effective coalitions decide when they can assume or need to
obtain sanction from the member organizations and their constituencies.

Coalitions can balance the autonomy/accountability tension by creating a variety of ongoing communication mechanisms between the coalition and its members and their organizations. They should also clarify:

1. how to integrate new members;
2. who the coalition represents; and
3. when and how different levels of participants will be involved in coalition decisions and actions.

D. Means vs. Model

A coalition can be a means to accomplish a specific social change goal, as well as a particular model of sustained interorganizational coordination. Lack of clarity about whether the coalition is viewed primarily as a "means" or "model" can lead to differences in emphasis on process or product, degree of commitment, visions of success and failure, willingness to compromise, and time frame for accomplishment of coalition goal.

Coalitions primarily concerned about being a model emphasize:

1. a goal, structure, and operating style that reinforce internal coalition development;
2. a commitment by member organizations to the coalition as an end in itself;
3. suspension of action toward the social change goal if necessary to build the coalition itself.

Some coalitions approached as a model later transform themselves into permanent federations or organizations.

Coalitions primarily concerned about being a means to accomplish a specific goal:

1. provide "just enough" structure;
2. avoid time-consuming process issues;
3. promote involvement only to produce results;
4. either tolerate or find creative ways to work with differences.

The most effective coalitions strive for consistency in process and goal,
and balance skill and leadership development with coalition efficiency.

E. **Unity and Diversity**

Coalition members share compatible, but not identical, interests, and must both utilize diversity as a strength and find ways to act in unison. Coalitions need enough unity to act together, yet enough diversity to accomplish their goal and represent a broad base. Their functioning requires a certain degree of "syncretism," an attempt to combine or reconcile differing beliefs in all salient areas. Coalition members must reach some amount of agreement regarding goals, strategies, domain, decision-making, and evaluation.

Many coalition leaders assume that unity demands uniformity and conformity. In fact, coalitions that are too unified resemble organizations and fail to achieve the essence of the coalition, the inclusion of diversity. Moreover, excess unity can lead to competition among the groups for turf, access to resources or visibility, and can also limit the coalition's creativity. Coalitions suffer if all their members have the same perspective, expertise, and resources.

Conversely, many coalitions pursue diversity, either strategically or indiscriminately, with an open-door membership policy. Numbers are not everything -- rather, it is the specific mix of diversity needed for a "winning" coalition that is essential. Because people assume that working together will be easy, they may overlook differences that may impede coalition functioning over time. Increasing a coalition's diversity will usually slow down progress toward external goals because it takes time to evolve trust, familiarity and comfort in working together. Coalitions can become a whole that is greater than the sum of its parts, but to realize this great potential requires making creative use of the different components.

The unity/diversity tension may manifest in eight different dimensions, as described below.

1. **Goal Differences**

   Goal differences affect problem definition, identification of potential coalition members, and choice of social change target, strategies, and solutions.
Managing Goal Differences
Coalitions utilize the following approaches to resolve or minimize goal differences. They can:

- Select a goal that is central to everyone's interests and is seen as something that can benefit both the diverse groups and the coalition as a whole.
- Define a goal relevant to the members' interests, but broader than any one group could address alone.
- Identify linkages between the issues.
- Create a superordinate goal that transcends differences among potential coalition members, and clarify how the participants' differences support the whole.
- Compromise on goals, i.e., create goals where all participants can get a portion of what they really want, enough to sustain their involvement.
- Change goals over time.
- Show how short-term goals relate to the long-term, bigger picture.

2. Ideological Differences
People with different political or religious ideologies approach coalition work with distinct belief systems and operating principles.

Managing Ideological Differences
Coalitions can use the following approaches to help member groups with different ideologies work together more effectively:

- Address a third issue unrelated to any member organization's domain.
- Take action only on issues on which there is total agreement and allow any group to have veto power.
- Limit joint action strictly to goals.
- Suspend judgment on areas of difference.
- Compromise on public position.
- Tone down ideologically extreme positions.
3. **Differences In Expected Outcome**

Organizations may agree on a common goal, but outcome expectations may differ. This tension intensifies with a coalition's success, at which time decisions about payoffs and rewards must be made.

**Managing Outcome Expectation Differences**

Coalitions can withstand divergence in the outcome expectations of their members by the following means:

- Expand or redefine the pie rather than consider possible outcomes in zero sum terms.
- Deal with issues which promise some tangible or intangible gains for each coalition member.
- Enable each member organization to maintain the ability to act autonomously on issues that are not directly related to coalition activity, as long as they do not do so in the name of the coalition.
- Select coalition issues that do not conflict with members' individual agendas.
- Make explicit the tradeoff for everyone's involvement.
- Discuss the consequences of winning or losing when there appears to be a zero sum outcome.

4. **Differences In Amount And Level Of Power**

Coalitions have to deal with the consequences of actual and perceived power differences among members and potential participants.

**Managing Power Differences**

To minimize power differences, coalitions can find ways to have the powerful group provide resources without dominating. When it is desirable to keep the powerful group(s) inside the coalition, the following mechanisms can be established:

- a one group/one vote rule;
- voting/not voting membership;
- caucuses for smaller groups;
- an agenda that gives less influential members the advantage.
Coalitions which exclude powerful groups from full participation can continue to draw upon their resources and support by:

- Making them affiliates or honorary members.
- Forming parallel/support coalitions.
- Providing technical/advisory status for the powerful group.

5. Differences In Level And Intensity Of Commitment

Organizations join and continue participating in coalitions for a variety of pragmatic and/or ideological reasons. Pragmatic reasons include some degree of self-interest, a quest for resources, power, or social contract. Ideological motivations mean some shared value-based commitment to a cause or a concept of the “greater good.”

Managing Differences in Commitment

To maximize commitment to the coalition effort and encourage a greater variety of organizations to participate, coalitions can:

- Structure opportunities for multiple levels of commitment.
- Develop membership agreements that clarify what kind and level of commitment is desirable and how it should be demonstrated.
- Plan for fluctuations in commitment over time.
- Provide a variety of incentives to sustain participation, addressing the actual motivations of members.
- Ensure protection to members.

6. Differences In Type And Level Of Contributions

Coalition development requires the assessment of the amount and kinds of contributions needed, and the assignment of equivalent weights to the various contributions actually provided by members. As coalitions endure, they identify whether they have the necessary contributions required both to achieve their social change goal and to maintain the coalition.

Managing Differences in Contributions and Rewards

Coalitions should clarify expectations about minimum contributions, how the ratio of contributions to rewards will be determined, and how different contributions can be made to be equivalent.
• Balance contributions with rewards. There are several ways to do this:
  - Equity: Organizations get out what they put in.
  - Equality: Regardless of what organizations put in, they get the same rewards.
  - Equivalency: (structured inequality) Some organizations get out more than they put in, while others get less.

• Determine minimum contributions according to a coalition's priorities.

7. Differences In Color, Gender, Sexual Preference, Nationality, And Class

Long-standing differences in experiences, priorities, and problem definitions make it difficult to develop coalitions that cross color, gender, sexual preference, nationality, and class lines.

Managing Diversity in Color, Gender, Sexual Preference, Nationality and Class

Coalitions consciously pursuing diversity must factor in the time and effort it takes to make it happen. Some useful approaches might be to:

• Include diverse groups at the coalition's inception, rather than later, which can minimize real or perceived tokenism, paternalism, and inequality.

• Consciously give priority to increasing diversity.

• Provide opportunity for majority group-initiated coalition to offer some incentives ("affirmative action") to recruit minority participants, and consciously operate in new ways to share control and build trust. True diversity requires an ongoing commitment of coalition resources to issues important to the minority group members.

• Provide opportunity for minority group-initiated coalition to present its issues within a broad framework that integrates the majority perspectives, if their involvement and support is deemed necessary.
8. Differences In Organizational And Personal Style

Organizations and individuals bring different styles of operating and interacting to their coalition work. Some style differences evolve from color, class, and gender, and some, such as personality differences, are purely idiosyncratic.

Managing Style Differences

Depending on their goal and the amount of time they have to act, coalitions can either accept or attempt to minimize style differences. If there is a sense of urgency about the coalition taking action, differences may be tolerated. Over the long term, coalitions committed to a model of intergroup cooperation can seek ways to minimize the negative effect of style differences. To contain differences which could become destructive, spell out common rules for interaction:

- Create and discuss ground rules for meetings and coalition operations.
- Develop and enforce membership criteria.
- Structure equal time to speak.
- Conduct criticism/self-criticism of meetings. This process articulates and builds a common set of expectations, values, and operating methods for coalition functioning.
- Create a policy that allows for the exclusion of deviant or disruptive personalities or organizations, if necessary.
Roles in Collaborative Processes

The following are common roles played by organizations in collaborative processes. These roles are not mutually exclusive; one often leads to or is integrated into another. All the roles can be played to some extent by any organization engaging in collaborative efforts, although several of them are most often played by larger governmental, philanthropic, or nonprofit institutions. It can be useful to think about these as organizational options when engaging in collaborative processes and, to the degree possible, assess collaborative efforts to determine if some of these roles need to be further developed by particular or all partners to better ensure the overall success of your efforts.

Convener

Organizations often play the role of community convener on significant issues that may, or may not, result in further community action. The convening role usually includes a highly visible public discussion of community issues. These discussions are often related to data gathering or studies which provide information intended to highlight a common understanding of the issues at hand. Such discussions are important prerequisites for collaborative community problem-solving.

Catalyst

Organizations may use the convening role to stimulate discussion with a longer-term strategy in mind. When an organization is catalytic, it makes an early and clear commitment to participate in longer-term community problem-solving that begins with an initial discussion of issues. In this way, it uses its influence and resource base to make the collaborative initiative "real" in the minds of various other potential partners who may be waiting for leadership before making commitments to an action agenda.

Conduit

Organizations may serve as conduits for funding that is essential for collaborative action. For example, many federal grants require a particular organization to be the lead agency in providing grants for local collaborative initiatives. A similar situation occurs when foundations make grants with the condition that an agency be a lead partner. This role can be very problematic, however, if the conduit dominates a collaborative process through its fiscal role. This can result in conflicts about power and trust that must be addressed and resolved by all partners.

Funder

The role of public and private sector funder of collaboration is common, but one that challenges traditional practices. Many grantees find that funders — public and private — fail to fully understand how much more collaboration requires than a proposal with letters of endorsement. Usually, it takes considerable time for organizations to create a well designed, mutually respectful and trusting
collaborative**. Some funders do not understand the need for the time required for these characteristics to emerge and, as a result, expect substantial results before the collaborative has fully formed. Funder expectations need to be balanced between the processes and the products of collaborative efforts and must be appropriate for particular circumstances.

**Advocate**

Some partners view their primary role as advocacy, either for individuals or groups that are the primary focus of the collaborative's activities and/or for policy and systems change proposals that emerge from the collaborative. Partners that play this role may be viewed with concern by other partners in a collaborative and, therefore, it is helpful to develop frameworks and internal processes within which advocacy efforts can emerge with support from as many partners as possible. In general, it can be argued that all collaboratives seeking systems change would have to have commitments from some, if not most, of its partners to play an advocacy role. Without such advocacy, collaboratives tend to be limited to data gathering, public education, and program/service innovation change strategies.

**Community Organizer**

Partners may include community organizing among their contributions to collaboratives. In this role, partners have a primary interest in paying attention to who is at the decision-making table and, in particular, how those who are traditionally excluded from decision-making are included as full partners. A community organizing role often includes the ongoing recruitment, welcoming, and sustaining of participation by community-based, neighborhood-based, and constituency-based organizations and individuals.

**Technical Assistance Provider**

Many organizations have substantial human and technical resources which can be made available in creating and sustaining collaborative efforts. These resources include, among others, data retrieval, new research and information gathering, planning expertise, legal opinions, other specific expertise on a wide variety of subjects, access to information and assistance in preparing funding applications, and lobbying assistance. Organizations do not have to be highly visible partners in collaborative efforts to provide many kinds of technical assistance.

**Capacity Builder**

Capacity building is a strategy to increase the ability of community, neighborhood, and constituency-based organizations to prioritize issues and secure resources relevant for addressing challenges defined and determined by these organizations. Collaboratives committed to capacity building often focus on: (1) acknowledging, clarifying, and "mapping" community assets; (2) valuing the contributions each partner can make; (3) being clear that everyone can play a role in enhancing each other's capacities;

**Himmelman uses "collaborative" as a noun, meaning a collaborative effort or collaborative initiative.**
(4) inquiring about and, whenever possible, providing specific, requested skill-development opportunities in an appropriate manner and setting; (5) being honest and open about motivations and being realistic about what can and cannot be provided in what amount of time; (6) facilitating user-friendly access to resources that normally may be restricted to those only with power, status, or money; and (7) sharing the risks of other partners who may find themselves in difficult or challenging circumstances. Capacity-building strategies proclaim that the primary task of the power structure is to increase power-sharing and community ownership rather than to maintain the status quo in power relations.

**Partner**

This is the most obvious role in a collaborative, but the way that this role is played greatly affects the quality of the collaborative process and the likely outcomes of its activities.

Partners fully share risks, responsibilities, resources, and rewards in collaborative efforts. They establish mutually respectful, trusting relationships, take the time to understand each other's motivations and hoped-for accomplishments, and define and address challenges in a manner that provides opportunities for others to share in their solutions.

**Facilitator**

In this role, an organization helps collaborative, community problem-solving initiatives work more effectively. This can be difficult when an organization is a key partner because the facilitator role may be perceived as another way of adding greater decision-making authority to the organization's partner role. This challenge often is addressed by having nonpartner facilitation agreeable to all partners provided by those trained in such work. When done effectively, facilitation is valued as a source of fairness, encouragement, and as a resource to all partners in the collaborative process.
A Guide to Collaborative Processes

by Arthur T. Himmelman

The following guide is best used as a menu, not a blueprint, for thinking about and addressing many issues and activities that are often central to collaborative efforts. The questions and sub-questions are drawn from the experiences of a wide range of efforts and, therefore, are likely to be relevant for those working together on a variety of issues. **It is not necessary to answer the questions in the order that they are provided or answer all or even most of the questions to move forward effectively with particular collaborative efforts.** However, in general, collaboratives that are in the initial stages of development should consider answering many of the first questions before proceeding with the more complex issues related to the remaining questions in the guide.

**Design Step 1:**

(1a) Should your organization participate in a collaborative initiative?

(1b) What costs and benefits are involved in this decision?

(1c) How well prepared is your organization to be a quality partner in a collaborative effort, e.g., has it allocated the time and other resources necessary for your organization to fully participate?

**Design Step 2:**

What is your vision? Before beginning your discussion, interview each other for a few minutes, in teams of two, by asking your partner the following questions and then reversing the interview:

(2a) What motivates you to be involved in your collaborative initiative?

(2b) What do you most want to accomplish through your involvement?

After the interviews, allow time for those who will volunteer to tell the group the name of the person they interviewed, and what they learned about that person's motivations and about their hoped-for accomplishments. Listen to the reports of these interviews and note the words and phrases that you believe are significant. Using these words and phrases, write initial sentences and paragraphs that begin to reflect the vision of your group based on the interviews. Use this first draft of your vision as the basis for further discussion and refinement by your group.
**Design Step 3:**

(3a) Who is currently involved in your collaborative effort?

(3b) Are those who will be most affected by your collaborative effort involved at this time?

(3c) Who else should be involved?

(3d) How will you involve them?

(3e) How could community organizing become a central method of ensuring the participation of those traditionally excluded from decision-making?

**Design Step 4:**

(4a) What expectations should you have for each other?

(4b) What are some basic ground rules you have, or wish to have, for participating partners?

**Design Step 5:**

What is the mission statement of your collaborative? A mission statement can be defined as a simple, clear statement of purpose that is also a call to action.

**Design Step 6:**

What are the goals and objectives of your collaborative?

If you have not formulated them, please prepare goals related to your mission statement and objectives related to your goals. A goal can be defined as a long-term activity to implement a mission statement and as a measure of progress on achieving a mission statement. An objective can be defined as a short-term activity to implement a goal and as a measure of progress on achieving a goal.

**Design Step 7:**

(7a) Who will get the work done?

(7b) How can you link specific individuals and organizations to the specific objectives you have identified above to ensure that the objectives will be carried out in a timely manner?
**Design Step 8:**

(8a) What do you know about other collaboratives that have worked on a similar mission and goals?

(8b) What are some key lessons your collaborative can learn from these previous efforts?

**Design Step 9:**

What can each partner contribute to the effort? In making this inventory, please remember that it can include a wide variety of financial and nonfinancial contributions. For example, a partner who brings credibility with and access to community residents adds something as valuable as any financial contribution.

**Design Step 10:**

(10a) How does the collaborative identify and encourage new members to participate?

(10b) How well are new members informed about the roles, responsibilities, and rewards of participation?

(10c) How well do new members reflect the diversity of the communities that the collaborative effort serves?

**Design Step 11:**

What are some incentives and rewards that can be used to recognize and sustain partners' contributions to the collaborative and changes they make in their own organizations' policies and practices that are consistent with the collaborative's vision, mission, and goals?

**Design Step 12:**

(12a) How is your collaborative governed? Who makes decisions and what authority do they have to make them?

(12b) How will governing responsibilities be rotated over time?

(12c) How will governance reflect and respect the collaborative's diversity?
**Design Step 13:**

(13a) How effective is your leadership?

(13b) Who is providing leadership for your collaborative?

(13c) How adequate is the leadership team?

(13d) What might be done to improve it or better support it?

(13e) How is new leadership identified and rotated into key positions?

(13f) What expectations do you have for the collaborative’s leadership?

**Design Step 14:**

(14a) How is your collaborative administered and managed?

(14b) Are the arrangements adequate?

(14c) If not, what could you do to improve the administration and management of your collaborative?

**Design Step 15:**

(15a) How is staff provided for your collaborative?

(15b) How is the staff accountable to the collaborative?

(15c) If staff is being donated by a partner or partners, what, if any, challenges does this arrangement present?

**Design Step 16:**

(16a) What barriers or conflicts make progress difficult?

(16b) How can such barriers and conflicts be resolved or overcome?

**Design Step 17:**

(17a) How does the collaborative offer training for its members in areas such as group process, conflict resolution, and cultural diversity and inclusiveness?

(17b) How can this training be most helpful in addressing and resolving important issues?
**Design Step 18:**

(18a) How will people find out about your activities?

(18b) How will you publicize your activities and provide effective community education and information about the work of the collaborative?

(18c) How well can you inform and engage people, organizations, and communities that represent diverse cultural and ethnic interests or for whom English is not their first language?

(18d) Do you communicate well and regularly with grassroots groups and organizations?

**Design Step 19:**

(19a) How much money do you need and how will you secure it in a timely manner?

(19b) What kinds of funding sources will be necessary if you are to be successful?

(19c) Is there a written financial plan and a clear strategy with identified responsibilities for implementing it?

(19d) Has the collaborative made certain that the organization through which funding flows does not have greater decision-making authority in the collaborative simply because of this fiscal management role?

**Design Step 20:**

(20a) How will you monitor progress and evaluate the overall success of your collaborative?

(20b) How can you monitor and evaluate both the products/results and the processes of your collaborative?

(20c) How can your evaluations be used to make changes in the collaborative's processes based on the findings of such evaluations?
What Is Collaborative Leadership?

Facilitating mutual enhancement among those working together for a common purpose

by Arthur T. Himmelman

Some Collaborative Leadership Characteristics

1. A commitment to improve common circumstances based on values, beliefs, and a vision for change that is communicated both by talking it and walking it.

2. An ability to persuade people to conduct themselves within ground rules that provide the basis for mutual trust, respect, and accountability.

3. An ability to respectfully educate others about the relationship of processes to products/outcomes and organizational structure to effective action.

4. An ability to draw out ideas and information in ways that contribute to effective problem-solving rather than ineffective restatements of problems.

5. A willingness to actively encourage partners to share risks, responsibilities, resources, and rewards and to offer acknowledgments of those making contributions.

6. An ability to balance the need for discussion, information sharing, and storytelling with timely problem-solving and staying focused on responding to action-oriented expectations of those engaged in common efforts.

7. An understanding of the role of community organizing as the basis for developing and expanding collaborative power.

8. A commitment to and active engagement in leadership development activities, both informal and formal, that can take the collaborative process to higher levels of inclusiveness and effectiveness.

9. An ability to communicate in ways that invite comments and suggestions that address problems without attacking people and, when appropriate, draws upon conflict resolution and win-win negotiating to resolve differences.

10. A very good sense of humor, especially whenever collaborative processes get ugly or boring or both.
III.

Worksheets and Sample Documents
CREATING OUR OWN GROUND RULES

One important process that can strengthen collaboration work is the creation of ground rules to guide group discussion and conduct. Ground rules clarify mutual expectations about group participation and set guidelines for respectful and inclusive dialogue.

Creating our own ground rules provides an opportunity for each group member to contribute to a new "etiquette" for collaboration that derives from our own individual expectations. All group members who agree to "own" these ground rules are empowered to invoke and enforce them.

Here is the beginning of a list of essential ground rules for collaboration meetings. You can use this list and worksheet to start a discussion with your collaborators about what ground rules you would like to set for your work together.

We agree to:

1. Preserve the dignity and self-respect of all participants.
2. Give new voices a chance, and not dominate the discussion.
3. Listen and not interrupt while one person speaks at a time.
4. Disagree as long as nobody's feelings are hurt.
5. Respect everyone's uniqueness and our differences.
6.
7.
8.

As participants in this group process, we will take ownership of these ground rules and invoke them as needed so that we can create a safe space for meaningful exchange.
Entering into a collaboration is a serious commitment. Responsible preparation for joint effort requires that you:

1) pick the right time and reason to collaborate (assess the context for collaboration);
2) know that your own organization has the capacity to collaborate;
3) consider how you will represent your organization;
4) explore your prospective collaboration partners; and
5) collectively determine which factors will influence the collaboration, and plan accordingly.

This checklist includes variables known to influence collaboration dynamics. Items marked with a check are recommended as "must-do's." The other items should be considered and planned for if you think they are relevant to your particular collaboration. This checklist is intended to present a comprehensive list of factors to help you assess whether collaboration is a viable option for you, and help you to be prepared. Check off only those items that seem pertinent in your own case, and consider if or how you will address the others.

### 1. CONTEXT/CONDITIONS FOR THE COLLABORATION

<table>
<thead>
<tr>
<th>Items marked with 4 are &quot;must-do's&quot;</th>
<th>Items in this column should be considered and planned for if you think they are relevant to your particular collaboration</th>
</tr>
</thead>
<tbody>
<tr>
<td>o 4 The problem/issue/project we want to address requires a collaborative approach - it cannot be done effectively by only one organization.</td>
<td>o We have the necessary credibility and leadership to convene the effort and bring people to the table.</td>
</tr>
<tr>
<td>o 4 We have sufficient resources or sponsorship to begin and implement the effort.</td>
<td>o We can identify the relevant community of interests to generate the organizational, political and institutional will to create change.</td>
</tr>
<tr>
<td>o 4 We are aware of the qualities and resources needed for collaboration success, and we believe we can obtain them.</td>
<td>o The timing is right - a window of opportunity exists; or the situation is critical, and we must act.</td>
</tr>
<tr>
<td></td>
<td>o It makes sense to continue or deepen an existing collaboration.</td>
</tr>
<tr>
<td></td>
<td>o This collaboration is an opportunity for relationship development, which can be reward enough for our participation.</td>
</tr>
<tr>
<td></td>
<td>o The political climate is conducive to collaboration.</td>
</tr>
<tr>
<td></td>
<td>o We have access to research and needs assessments that can sharpen the focus of this effort.</td>
</tr>
<tr>
<td></td>
<td>o We are aware of relevant laws, policies, regulations that will impact our project.</td>
</tr>
<tr>
<td></td>
<td>o The level of conflict and mistrust that exists among the potential partners is negligible.</td>
</tr>
<tr>
<td></td>
<td>o The skills necessary for collaboration exist among the potential partners.</td>
</tr>
</tbody>
</table>
## 2. ORGANIZATIONAL SELF-ASSESSMENT FOR COLLABORATION

<table>
<thead>
<tr>
<th>Items marked with 4 are &quot;must-do's&quot;</th>
<th>Items in this column should be considered and planned for if you think they are relevant to your particular collaboration</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Operations:</strong></td>
<td></td>
</tr>
<tr>
<td>o 4. We have organizational protocols for collaboration and have prepared our representative.</td>
<td></td>
</tr>
<tr>
<td>o 4. We have criteria for entering collaborations and selecting collaboration partners, and can use them to help us to commit to or decline collaboration opportunities.</td>
<td></td>
</tr>
<tr>
<td>o 4. The goal of the collaboration is linked to our goals and priorities.</td>
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</tr>
<tr>
<td>o 4. We are aware of what might be a problem for our organization if we join the collaboration, or if certain others participate, and we are prepared to address this.</td>
<td></td>
</tr>
<tr>
<td>o 4. We are ready to meet the collaboration's expectations for participation and work.</td>
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</tr>
<tr>
<td>o 4. We are clear about the level of organization (e.g., director, staff, board) we will involve in this collaboration.</td>
<td></td>
</tr>
<tr>
<td>o 4. Our proposed role in this collaboration is appropriate, given our resources and priorities.</td>
<td></td>
</tr>
<tr>
<td>o 4. Appropriate leadership endorses our participation in this collaboration.</td>
<td></td>
</tr>
<tr>
<td><strong>Organizational fit:</strong></td>
<td></td>
</tr>
<tr>
<td>o 4. This collaboration adheres to our established organizational values.</td>
<td></td>
</tr>
<tr>
<td>o 4. Our administration, services, customers can benefit from collaboration.</td>
<td></td>
</tr>
<tr>
<td>o 4. Working in this collaboration will be consistent with our organizational philosophy and culture.</td>
<td></td>
</tr>
<tr>
<td>o 4. Our market, contacts, knowledge, resources, and skills can benefit this collaboration.</td>
<td></td>
</tr>
<tr>
<td>o 4. Participating in this collaboration promises a reasonable return on our investment.</td>
<td></td>
</tr>
<tr>
<td><strong>Commitment to collaboration:</strong></td>
<td></td>
</tr>
<tr>
<td>o 4. We are willing to share risks, responsibilities, and rewards of the effort.</td>
<td></td>
</tr>
<tr>
<td>o 4. We are willing to share decision-making around goals, activities, and allocation of resources.</td>
<td></td>
</tr>
<tr>
<td>o 4. We intend to evaluate our collaboration work and use information to make needed improvements.</td>
<td></td>
</tr>
<tr>
<td>o 4. We trust the other potential collaboration members, or will try to cultivate mutual trust.</td>
<td></td>
</tr>
</tbody>
</table>

## 3. INDIVIDUAL ROLE AND READINESS FOR COLLABORATION

American Cancer Society
Within this collaboration, my organization expects me to play the following role:

- Catalyst/Convener
- Chairperson/Leader
- Facilitator
- Partner
- Funder
- Group Leader/Committee Chair
- Staff Member
- Advocate
- Community Organizer
- Capacity Builder
- Evaluator
- Other: ___________________________

4. ORGANIZATIONAL ROLE: (Items marked with 4 are "must-do's")

Within my own organization I have influence and expertise in these areas:
_____________________________________________________________________________________
_____________________________________________________________________________________
__________________________________________________________

My agency's expectations for me as a representative in this collaboration are:
_____________________________________________________________________________________
_____________________________________________________________________________________
__________________________________________________________

I have authority, on behalf of my organization, to:

- Establish relationships
- Generate ideas
- Set policy
- Plan activities
- Implement activities
- Spend money
- Assign resources
- Commit staff time
- Sign position papers
- Evaluate
- Make recommendations
- Make organizational or personal changes

For aspects of collaboration work which require involvement or approval from others in my organization, I am prepared to follow our own procedures for accountability. (Describe what these are.)
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

PERSONAL SKILLS / QUALITIES THAT CAN ENHANCE COLLABORATION

- I am culturally competent and able to work effectively with diverse others.
- I am willing to share power, and will seek to facilitate and not control the process.

The strengths that I bring to this group are: ______________________________

The areas that I need to work on and build on are: _______________________

The ground rules that are important for me to function in this group are:
_________________________________________________________________________

The things that motivate me include:_______________________________________

I tend to negotiate and communicate in these ways: _________________________

4. THINGS TO DISCERN ABOUT POTENTIAL COLLABORATION PARTNERS

American Cancer Society 72
<table>
<thead>
<tr>
<th>Items marked with 4 are “must-do's”</th>
<th>Items in this column should be considered and planned for if you think they are relevant to your particular collaboration</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 Organizational mission and goals</td>
<td><strong>Operations:</strong></td>
</tr>
<tr>
<td>4 Organizational philosophy, values, and culture</td>
<td>o Organizational structure: level/location of this collaboration</td>
</tr>
<tr>
<td>4 What can they bring to the collaboration? Why is their involvement essential to the success of this effort?</td>
<td>o Fiscal resources: can they afford to collaborate? Can they provide support for the collaboration?</td>
</tr>
<tr>
<td>4 Why do they want to collaborate with you and others? What are their collaboration outcome expectations?</td>
<td>o Do they have appropriate staff/representatives to assign to the collaboration?</td>
</tr>
<tr>
<td>4 Where does this collaboration fit within their organizational priorities?</td>
<td>o Do they have available time to coordinate/ collaborate?</td>
</tr>
<tr>
<td></td>
<td>o Funding sources and rules governing utilization of funds</td>
</tr>
<tr>
<td></td>
<td>o Policies and procedures the organization must follow in conducting collaboration work</td>
</tr>
<tr>
<td></td>
<td><strong>Organizational fit:</strong></td>
</tr>
<tr>
<td></td>
<td>o What is their expertise and program experience related to the collaboration we are undertaking?</td>
</tr>
<tr>
<td></td>
<td>o Who are their board members, allies, supporters, adversaries, former collaboration partners, and is there anything controversial about any of these people?</td>
</tr>
<tr>
<td></td>
<td>o What is their public record and positions related to matters of concern to us?</td>
</tr>
<tr>
<td></td>
<td>o How will the collaboration support the changes they wish to make within their own organization?</td>
</tr>
<tr>
<td></td>
<td>o Degree of organizational formality and communication style</td>
</tr>
<tr>
<td></td>
<td>o Leadership and credibility</td>
</tr>
<tr>
<td></td>
<td>o Decision-making structure and style</td>
</tr>
<tr>
<td></td>
<td><strong>Commitment to collaboration:</strong></td>
</tr>
<tr>
<td></td>
<td>o The person with authority to make decisions is participating in the collaboration, or is directly supportive of the effort.</td>
</tr>
<tr>
<td></td>
<td>o Are they willing to share risks, responsibilities, and rewards of the effort?</td>
</tr>
<tr>
<td></td>
<td>o Are they willing to share decision-making around goals, activities, and allocation of resources?</td>
</tr>
<tr>
<td></td>
<td>o Are they willing to evaluate collaboration work and address the findings?</td>
</tr>
<tr>
<td></td>
<td>o Do they trust the other potential collaboration partners, or are they willing to try to cultivate mutual trust?</td>
</tr>
</tbody>
</table>

**5. Things to clarify about the potential collaboration**

American Cancer Society
<table>
<thead>
<tr>
<th>Items marked with 4 are &quot;must-do's&quot;</th>
<th>Items in this column should be considered and planned for if you think they are relevant to your particular collaboration</th>
</tr>
</thead>
<tbody>
<tr>
<td>o 4 Is there a foundation of trust among the partners / members of this collaboration?</td>
<td>o What is the expected developmental life span of this effort and at what stage are we entering the process?</td>
</tr>
<tr>
<td>o 4 What will collaboration success look like, and what will be the standards of practice?</td>
<td>o What collaboration outcomes, benefits, or rewards are expected by each partner?</td>
</tr>
<tr>
<td>o 4 How will we evaluate the effort and make mid-course adjustments? Are the partners open to developing shared evaluation criteria and conducting periodic evaluations to keep the project on course?</td>
<td>o What kind of contributions / resources are needed and can potential partners provide these?</td>
</tr>
<tr>
<td>o 4 What type and level of organizational representation is expected?</td>
<td>o What kind of commitment to the collaboration is mutually agreeable?</td>
</tr>
<tr>
<td>o 4 How will the partners fulfill the different roles needed to make this collaboration function?</td>
<td>o Is each potential partner stable enough to withstand the change that collaboration will introduce?</td>
</tr>
<tr>
<td>o 4 What is the expected developmental life span of this effort and at what stage are we entering the process?</td>
<td>o How can we integrate or tolerate different organizational cultures in order to collaborate?</td>
</tr>
<tr>
<td>o Are we more focused on task or process? How can we accommodate other perspectives on our joint effort?</td>
<td>o What conflicts or compromises might be entailed and can the partners manage these?</td>
</tr>
<tr>
<td>o Are the partners willing to make the effort to communicate and share responsibility for collaboration work and decisions?</td>
<td>o Are we more focused on task or process?</td>
</tr>
<tr>
<td>o Are partners willing to explore ways to expand participation in the collaboration to involve others who can add value to the effort?</td>
<td>o Are the partners willing to make the effort to communicate and share responsibility for collaboration work and decisions?</td>
</tr>
<tr>
<td>o Are staff needed, and if so, how will they be paid and supervised? Are funds needed, and if so, how will they be obtained and managed?</td>
<td>o Are partners willing to explore ways to expand participation in the collaboration to involve others who can add value to the effort?</td>
</tr>
<tr>
<td>o Are shared facilities needed, and if so, where will they be located and how will they be managed?</td>
<td>o Are staff needed, and if so, how will they be paid and supervised? Are funds needed, and if so, how will they be obtained and managed?</td>
</tr>
<tr>
<td>o Is funding needed, and if so, how can it be obtained and allocated, and who will be fiscally responsible?</td>
<td>o Are shared facilities needed, and if so, where will they be located and how will they be managed?</td>
</tr>
<tr>
<td>o Will the effort be sustainable?</td>
<td>o Is funding needed, and if so, how can it be obtained and allocated, and who will be fiscally responsible?</td>
</tr>
</tbody>
</table>
Identifying Potential Collaboration Partners

The first thing that most collaborations do is identify potential partners. Partnership selection is a strategic process. Initially, cultivate those organizations or individuals that possess whatever the collaboration needs to succeed -- resources, technology, constituencies, skills, reputation, and power. Also pay attention to what incentives will attract or deter partners. Later in a collaboration's life, focus shifts to retaining, cultivating, and replenishing partners who bring important contributions to the effort.

These worksheets can help:

1) identify different types of organizations which might be relevant to consider as potential partners in your collaboration (worksheet #1).

2) guide you in doing field research on organizations that you are considering (worksheet #2). For each type of organization that might be helpful to include in your collaboration, find out more specific details: names, relevant activities or experiences, reputation, potential contributions, incentives, and conflicts.
# Identifying Potential Collaboration Partners

## WORKSHEET #1: TARGETING NECESSARY PARTICIPANTS

Types of organizations to consider as partners

<table>
<thead>
<tr>
<th>ORGANIZATIONS / GROUPS</th>
<th>DETAILS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Advocacy and lobbying organizations</td>
<td></td>
</tr>
<tr>
<td>2. Businesses - local</td>
<td></td>
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<tr>
<td>3. Cancer control organizations</td>
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<tr>
<td>4. Civic and community organizations</td>
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<tr>
<td>5. Civil rights organizations</td>
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<tr>
<td>6. Consultants/technical assistants/planners</td>
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<tr>
<td>7. Consumer/ patient groups</td>
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<tr>
<td>8. Corporations</td>
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<tr>
<td>9. Cultural institutions</td>
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<tr>
<td>10. Educational institutions</td>
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</tr>
<tr>
<td>11. Elected officials/legislators</td>
<td></td>
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<tr>
<td>12. Environmental organizations</td>
<td></td>
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<tr>
<td>13. Financial institutions</td>
<td></td>
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<tr>
<td>14. Governmental agencies</td>
<td></td>
</tr>
<tr>
<td>15. Health care providers/hospitals</td>
<td></td>
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<tr>
<td>16. Housing organizations</td>
<td></td>
</tr>
<tr>
<td>ORGANIZATIONS / GROUPS</td>
<td>DETAILS</td>
</tr>
<tr>
<td>------------------------------------------------------------</td>
<td>---------</td>
</tr>
<tr>
<td>17. Labor unions</td>
<td></td>
</tr>
<tr>
<td>18. Media</td>
<td></td>
</tr>
<tr>
<td>19. National health and medical organizations</td>
<td></td>
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<tr>
<td>20. Nutrition experts/organizations</td>
<td></td>
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<tr>
<td>21. Parents' organizations</td>
<td></td>
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<tr>
<td>22. Personal identity or constituency groups</td>
<td></td>
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<tr>
<td>23. Policy and research organizations</td>
<td></td>
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<tr>
<td>24. Private foundations/philanthropic corporations</td>
<td></td>
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<tr>
<td>25. Professional organizations</td>
<td></td>
</tr>
<tr>
<td>26. Religious institutions and organizations</td>
<td></td>
</tr>
<tr>
<td>27. Senior citizen organizations</td>
<td></td>
</tr>
<tr>
<td>28. Social service organizations</td>
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<td>29. Support groups</td>
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<td>30. Survivor organizations</td>
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<td>31. Women's or men's organizations</td>
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<td>32. Youth groups</td>
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<td>33. Others?</td>
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Identifying Potential Collaboration Partners

WORKSHEET #2: RESEARCHING PROSPECTS

COLLABORATION NAME: ___________________________________________________________________________________

COLLABORATION GOAL: ____________________________________________________________________________________

**Step 1:** For each category of organization that would be helpful to include in your collaboration, do some research on specific groups you are considering.

**Step 2:** Once you’ve identified potential partners, you can use another form, the *Collaboration Readiness Checklist*, to explore more details.

<table>
<thead>
<tr>
<th>POTENTIAL COLLABORATION PARTNER (NAME)</th>
<th>CURRENT RELEVANT ACTIVITIES OR ACHIEVEMENTS</th>
<th>RESOURCES/TALENTS: What will they contribute?</th>
<th>BUY-IN: What will they gain?</th>
<th>CONFLICTS: Issues related to their involvement?</th>
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American Cancer Society
Engaging Potential Partners Worksheet

Tasks For Your Initial Collaboration Meeting:

1. Review the background information about the collaboration, to make sure that everyone is aware of the context and initial purpose.
2. Each person should introduce themselves to the group.
3. Collectively explore whether to begin this collaboration by answering the following questions:
   - What can each partner bring/contribute to the effort?
   - What are necessary requirements or constraints to be addressed for each partner?
   - What are the issues for negotiated agreement?

*Note answers on your flipchart. Use this form to make a copy for yourself, if you like. The other side of this page provides ideas to consider.*

<table>
<thead>
<tr>
<th>PARTNER NAME</th>
<th>CONTRIBUTION</th>
<th>REQUIREMENTS / CONSTRAINTS</th>
<th>ISSUES TO NEGOTIATE</th>
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Engaging Potential Partners Worksheet

Things To Discern About Potential Partners

(from the Collaboration Readiness Checklist, page 70)

Questions such as these may be relevant in understanding partners' requirements and constraints, as well as issues to negotiate.

1. What can they bring to the collaboration? Why is their involvement essential to the success of this effort?
2. Why do they want to collaborate with you and others? What are their collaboration outcome expectations?
3. What are their organizational mission and goals?
4. What are their organizational philosophy, values, and culture?
5. Where does this collaboration fit within their organizational priorities?
6. What is their expertise and program experience related to the collaboration you are undertaking?
7. Who are their board members, allies, supporters, adversaries, former collaboration partners, and is there anything controversial about any of these people?
8. What is their public record and positions related to matters of concern to us?
9. Do they trust the other potential collaboration partners, or are they willing to try to cultivate mutual trust?

NOTES
Goals Clarification Worksheet

Individual Organizational Goals
What are your organization's outcome expectations for this collaboration? What do you want to get out of it?

Other Partners’ Outcome Expectations

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<th>PARTNERS</th>
<th>INDIVIDUAL ORGANIZATIONAL GOALS</th>
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What collective goals can integrate everyone’s visions for the collaboration and make this effort worthwhile for all partners?
Collaborative Agreements

Collaborations require organizations to do business in a new way. Collaborating organizations agree upon shared goals and each applies their distinct capacities to achieve those goals. They are accountable to their partners for commitments and quality of work, resources, and deliverables. They may enter the collaboration with different expectations about outcomes, process, or other details about their joint effort, and yet assume they are working in similar ways. Collaborations also place particular communication demands upon the individuals who serve as liaisons and decision-makers on behalf of their respective groups. And unanticipated changes affecting any partner will usually have an impact on other partners and their joint effort.

For all these reasons, it is useful to develop collaboration agreements, in order to clarify expectations and commitments for collaboration partners and to articulate plans for the collaboration effort. Such mutual understandings may be facilitated by some form of written contract or agreement covering specific areas of concern, that is signed by leaders of each partner organization.

Whether short and informal, or longer and structured as a legal document, whether considered Letters of Commitment, Memoranda of Understanding, Letters of Agreement, Contracts, or Subcontracts, these agreements usually cover similar terrain.

Collaboration agreements may include any of the following areas:

**The Context For The Collaboration**
- Conditions that call for the creation of the collaboration
- Collaboration goals, objectives, and time frame for completion
- If funded, information on the purpose and duration of the grant
- If a business venture, the business plan

**Criteria for Membership/Partnership**
- Qualifications for participation

**Collaboration Purposes**
- Statement of purpose
- Summary of bylaws/operating procedures
- Written agreements may be appended to other documents, such as the collaboration’s principles, visions, or goals, and indicate that partners sign on and acknowledge agreement with the items described elsewhere.

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Collaboration Activities

• Activities that the collaboration has agreed to implement
• Activities flow from collaboration goals and objectives
• Activities are realistic, given the specific resources and assets of the collaboration partners
• If operating through a funded contract, activities reflect contract deliverables

Collaborative Products and Projects

• Shared outcome expectations, goals, and milestones
• Specific points and processes of evaluation
• Criteria for success, standards of practice
• Mechanisms by which collaboration partners can observe or review each other's work

Collaboration Processes

• Mechanisms for partner communications and mutual accountability, including specifics on frequency of meetings, expectations for timely response to memos or email, etc.
• Clarification of when and how the collaboration as a whole has the authority to make decisions, speak for or represent the interests of the partner organizations
• Clarification of when individual partners are expected to represent the collaboration (as opposed to their own organization), or give the collaboration credit for a given product or event
• Processes for partners to be accountable to their own organization regarding collaboration developments
• Mechanisms for resolving disputes over the fulfillment of the collaborative agreement
• Mechanisms for grievance/conflict resolution
• Process to ensure that partners are accountable to the collaboration for fulfillment of their commitments
• Procedure for changing the collaborative agreement
• Consequences, if any, of violating the collaborative agreement
Roles and Responsibilities Of Each Partner

- Definitions for roles that each partner will play in the collaboration’s work: for example, convenor, funder, record-keeper, advocate, implementer, and specific roles related to their specific project or activity
- Criteria for attendance, representation, liaison to partner organizations
- Decision-making status, e.g., voting or nonvoting; areas of decision control
- The specific commitment of time, effort, staff, funds, in-kind contributions that are expected for each partner
- The deliverables and products that each partner is expected to produce
- The costs that each partner is expected to incur or receive reimbursement for
- Agreement to support the purpose of the collaboration
- Agreement to abide by the ground rules of the collaboration
- Organizational endorsement of the partnership: official recognition of the collaboration and appointment of a regular representative to the collaboration, designation of an alternate representative (if necessary)
- Continued organizational representation: two way communication and involvement of relevant parties linking the collaboration and the organization around important decisions or actions.
- Agreement to use (or delete) organization name on collaboration stationery, position papers, proposals, or other shared materials

Credit, Rewards, and Payment Terms

- Specific rewards, in the form of funding, visibility, or credit which will accrue to collaboration partners, and the process by which these will be allocated
- If shared products or services are to yield a specific financial return to the partners, specification of how this is to be calculated, and consequences of unexpected shortfalls
- Schedule and procedure for receiving payment from the collaboration project for subcontracted services
- Ownership of the products, materials and rights to distribute models or protocols developed collaboratively
Legal Commitments and Requirements

- Board sign-off from each partner organization, acknowledging the terms of the collaboration agreement
- Mergers and Acquisitions - legal documents, as needed
- Liability or "hold harmless" clauses that suit the type of collaboration - i.e. if co-locating services, who is responsible for mishaps? If sharing information on clients, who is liable for violations of confidentiality?
- Partnership terms and limitations

Opt-Out Clause

- Criteria that shall be applied to assist partners in determining whether there is a good fit between their needs and capabilities and the collaboration goals
- Waivers, methods of dissension or non-participation for partners to invoke as a stop-gap measure
- Conditions under which partners will be able to gracefully withdraw from the collaboration
- Protocols for ending the collaborative relationship and transferring duties to others
In beginning a collaboration, it is useful to establish written agreements that clarify important aspects of the working relationship and mutual expectations of the partners. This Collaborative Agreement Worksheet outlines areas that need to be discussed and negotiated. While having a written agreement does not avert all problems, it does help to explore details and issues that shape the collaboration. The agreement solidifies the notion that partners are accountable for commitments made to each other and to the collaborative effort. The agreement can also be used as a baseline against which to review how things are going at later points, or to renegotiate roles, responsibilities, approaches or plans.

1. **Background / Context For The Collaboration**
2. **Membership / Partnership Criteria** (who can be partners?)
3. **Collaboration Purposes** (collective, mutually agreed-upon goals)
4. **Collaborative Activities** (what the collaboration will do)
5. **Collaborative Products and Projects** (the results of the collaboration)
6. **Collaboration Processes** (e.g., communication, decision-making, conflict resolution)
7. **Roles and Responsibilities Of Each Partner** (mutually agreed-upon commitments)

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<th>PARTNER</th>
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<th>RESPONSIBILITY</th>
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8. **Time-frame for Evaluation and Re-negotiation**
9. **Credit, Rewards, and Payment Terms**
10. **Legal Commitments and Requirements**
11. **Opt-Out Clause**
Model Collaborative Agreement

BETWEEN

______________________________

AND

American Cancer Society ________________________ Division, Inc.

Note: This model agreement provides a template for drafting collaborative agreements. While it is lengthy, it provides everything you might need to draft a thorough agreement with appropriate legal clauses. Following this model will help you improve the effectiveness of your collaborations by working through many critical issues at the beginning of your efforts, and also address important legal considerations. Of course, as with many of the tools in this guidebook, you may customize what you include in each of your agreements to suit the nature of the situation at hand.

I. BACKGROUND/CONTEXT

This section should include:

♦ Descriptive paragraph(s) outlining the conditions that call for the creation of the collaboration.
♦ Statement of the problem, including any relevant supporting data (local data if possible).
♦ Rationale for using collaboration to address the problem.

Sample text:
The American Cancer Society (ACS) estimates that approximately 180,500 new cases of prostate cancer will be diagnosed in the US this year, and 32,000 men will die of the disease. Prostate cancer is now the second leading cause of cancer death in men, exceeded only by lung cancer. Prostate cancer is a leading cause of death in men aged 55-74.

In the US, prostate cancer incidence is significantly higher among African-American men than among white men. Additionally, African-American men have the highest rate of prostate cancer in the world, and their mortality rate is more than twice that of white men.

To unite and focus those dedicated to relieving the burden of prostate cancer on African-American men, and to begin to address the many unanswered questions related to this issue, the following organizations are joining forces to convene a leadership conference on prostate cancer in African-American men. The American Cancer Society, the National Cancer Institute, the Centers for Disease Control and
Prevention, the Intercultural Cancer Council, the National Prostate Cancer Coalition, the National Black Leadership Initiative on Cancer, the 100 Black Men of America, and the Urban League have agreed to participate. The scope of the problem at hand requires a collaborative effort, with organizations joining together who have different resources to bring to bear on this issue.

II. COLLABORATORS/CRITERIA FOR PARTICIPATION
(Who are the participants? Can others be involved?)

This section should:
♦ State the specific collaborators entering into this agreement.
♦ Address additional collaborators becoming involved in the collaboration, and if appropriate provide criteria for participation.

Sample text:
The American Cancer Society, Inc., located at 1599 Clifton Road, NE, Atlanta, Georgia, 30329, and the American Public Health Association, 800 I Street, NW, Washington, DC, 20001, enter into this collaborative agreement. Additional collaborators will be considered if they are able to demonstrate a common mission, demonstrate dedication to the goals and objectives outlined in this agreement (see Section III. Purpose), and meet the required responsibilities of each collaborator, as outlined in Section VII. Roles, Responsibilities, and Resources. ACS and APHA will jointly consider any additional collaborators and must mutually agree to add a collaborator to this agreement.

III. PURPOSE
(Mutually agreed-upon goals)

This section should include:
♦ Statement of purpose for agreement.
♦ Demonstration of common goal(s), vision(s), mission(s).
♦ Appendices including other documents (collaboration’s principles, vision(s), goal(s)), indicate that collaborators acknowledge agreement with the terms described elsewhere.

Sample text:
AARP and ACS enter into this collaborative agreement to support national and state-based efforts for the early detection of breast cancer in women age 50 and over. Activities outlined in this agreement support the AARP Breast Cancer Campaign mission “sharing information and services with older women to encourage them to get regular mammograms, clinical breast exams and do monthly breast self-exams.” As well as the ACS mission, “dedicated to eliminating cancer as a major health problem by preventing cancer, saving lives from cancer, and diminishing suffering from cancer,
through research, education, advocacy, and service,” and ACS Mission 2000 goals in breast cancer detection. Both ACS and AARP are interested in reaching specific groups of women age 50 and older who are not being regularly screened. AARP has community access via its chapters and members. Both organizations believe that collaboration on this project can result in more women reached than by either organization undertaking this effort on its own.

SECTIONS I., II., and III. alternative sample text:

This Collaborative Agreement is made between the American Cancer Society, Inc., having its principal offices at 1599 Clifton Road, NE, Atlanta, Georgia 30329, hereinafter referred to as “ACS”, and __________, having its principal office at __________, hereinafter referred to as “__________”.

WHEREAS, ACS is a health organization, qualified under section 501(c)(3) of the United States Internal Revenue Code, organized for the purposes of: eliminating cancer as a major health problem; preventing cancer; saving lives and diminishing suffering from cancer, through research; education; advocacy; and service;

WHEREAS, __________ is an organization (Describe collaborating organization’s non-profit status and mission here);

WHEREAS, ACS and __________ seek to develop and maintain collaborative relationships and projects with other <National Organizations> as well this collaborative relationship between ACS and ____________;

WHEREAS, it is the understanding of __________ and ACS that all activities undertaken as a result of this agreement must support both organizations’ missions;

WHEREAS, (Describe the background and reasons for the need of a collaboration);

WHEREAS, __________ and ACS enter into this collaborative agreement to support (Describe the purpose of this collaboration. The purpose should support the mission of each of the collaborators.)

NOW, THEREFORE, in consideration of the mutual covenants contained herein and intending to be legally bound, ACS and _________ hereby agree to the terms of this Collaborative Agreement as follows:
IV. ACTIVITIES
(What the collaboration will do)

This section should include:

♦ Business plan for the activities of the collaboration, including timeframe for each activity.

Sample text:
The Community Health Clinic and Outreach Program (CHCOP) and ACS will undertake the following collaborative activities:

A. Act as co-conveners of the Parsons Task Force on Cancer in African Americans

CHCOP and ACS will act as co-conveners of this new Task Force, utilizing the principles of Collaborative Leadership as put forth by Arthur Himmelman (see Attachment C). CHCOP and ACS will provide volunteer co-chairs and lead staff to convene the first meeting of this community-based initiative. CHCOP and ACS will undertake an outreach effort to develop the membership of the Task Force. ACS will provide community assessment data for the Task Force’s deliberations. The attached business plan puts forth the anticipated activities and timeframe for this project (see Attachment D).

B. Distribute Quality Prostate Cancer Informed Decision-making Materials

CHCOP and ACS will coordinate prostate cancer information provided through both sources, to reflect an informed decision-making approach and to ensure credibility of information distributed. A meeting at CHCOP has been scheduled to initiate this coordination effort. CHCOP and ACS will provide this information to existing community health sessions, including Thursday church initiatives and bi-monthly clinic open houses.

V. PRODUCTS AND RESULTS
(The expected results of the collaboration)

This section should include:

♦ Criteria for success, standards.
♦ Shared expected outcomes and how they will be measured.
♦ Baseline data from which to judge progress.

Sample text:
Given the complexity of the problem at hand, ACS and Girls Club recognize that this is a long-term initiative to reach high-school-age girls. The criteria for success in the first year of the collaboration between the Girls Club of Dayton and the American Cancer
Society will be the following:
- Four teams of girls will participate in the Dayton RFL as volunteer “patrols.”
- One youth advocacy program will be held at the Girls Club with a minimum of 20 participants, pre- and post-evaluation, 3-month follow up on activities and knowledge, attitudes, and behavior change. The program will be planned with a Girls Club Advisory Group.
- An assessment will be completed by 100 Girls Club girls to provide ACS and Girls Club with data for planning future youth prevention programs in Dayton.

Current baseline data consists of community assessment data (see appendix D for specific references) showing that 30% of high-school-age girls in the state of Ohio currently smoke and less than 20% indicate consumption of five fruits or vegetables a day.

VI. PROCESSES
(Collaboration operations)

This section should include:
- Summary of by laws/operating procedures.
- Summary of any mutually agreed-upon ground rules.
- Specific processes such as communication, individual contacts for each collaborating organization, meetings, decision-making, conflict resolution, the evaluation plan, when collaborators represent their individual organization as opposed to the collaboration as a whole, position on collaborating with other organizations outside of this collaboration.

Sample text:
The leadership conference collaborators have developed a lengthy set of operations guidelines to guide the group as the conference is planned and executed. See Attachment D for the complete set of operation guidelines. Additionally, the group has adopted a list of Ground Rules for use during meetings (see Attachment E).

In addition to the operations guidelines, the group has specified the following regarding key issues for collaboration success.

Communication
All correspondence related to this collaborative effort will go through the following contacts, designated as primary contacts for this agreement. All correspondence to volunteers must go through the staff contact first to facilitate coordination of requests for participation and scheduling.

Contacts
ACS Contact - Sam Peterson, ACS, 546 Glenville Parkway, Albany, NY 30305, 344/322-8977
Meetings
The collaborating organizations have agreed to an initial schedule of meeting every other month. This will begin with the first meeting August 15, hosted by the Urban League. Each organization will take a turn hosting one of the meetings. The group will re-visit this plan for meetings following the second meeting, in October 2000.

Decision-making
Activities undertaken as part of this collaborative agreement will be guided by a shared decision-making process involving the collaborating organizations. All parties must agree to written plans for activities. Decisions/positions will not be presented as mutual when they have not been considered by all collaborators.

Evaluation
An evaluation plan will be developed by the group and implemented for the conference. Specific resources will be put aside to allow for a quality evaluation. All collaborating organizations agree to support an approach which provides for quality evaluation of this program. Additionally, the collaborative approach to this conference will be assessed by the collaborators. A process for this will be developed by the group.

Collaborating with Others
Recognizing that the fight against prostate cancer requires the efforts of many organizations, and recognizing that the nature of collaboration requires different types of partnerships to address different aspects of a problem, each collaborating organization reserves the right to collaborate with other organizations on efforts related to prostate cancer in African-American men. The collaborators will seek to keep each other informed of their respective activities aside from the leadership conference.

VII. ROLES, RESPONSIBILITIES, AND RESOURCES
(Mutually agreed-upon commitments)

This section should include:
♦ Responsibilities that are expected of all partners (see suggested list).
♦ Each collaborator and their specific role(s), responsibilities.
♦ Resources that each collaborator has agreed to contribute.
Both ACS and APHA agree to the following list of responsibilities:

♦ Provide a staff contact for the span of this agreement
♦ Participate in regular conference calls (bi-weekly) between now and the briefing
♦ Participate in a joint decision-making process regarding all aspects of the briefing
♦ Provide contact names and addresses for invitation to the event
♦ Fully support the event as a joint effort in all references

Additionally, each organization agrees to the following specific responsibilities:

American Cancer Society (Roles: Funder, Partner) will:

♦ Provide materials for the event (three pieces to be mutually agreed upon)
♦ Provide funding in the amount of $1,000 to support the event (administered by ACS)
♦ Provide media relations support one month prior to the event

American Public Health Association (Roles: Funder, Convener, Partner) will:

♦ Secure all logistics arrangements for the event
♦ Provide funding in the amount of $500 to support the event (administered by APHA)

VIII. DURATION OF AGREEMENT, TIMEFRAME FOR EVALUATION/RE-NEGOTIATION

This section should include:

♦ Length of the agreement.
♦ Timeframe for evaluating results and considering renewal of the agreement.

Sample text:

The term of this agreement is one year beginning on August 1, 1998 and ending on July 31, 1999. This agreement may be extended for another 6-month period if such an extension is agreed upon in writing by both parties. The parties will meet at least once every three months to review assessment data from previous activities and consider the effectiveness of the collaborative process, and discuss any issues of concern. The parties agree to meet at least 60 days prior to the expiration of this agreement to assess the year’s activities and renewal of this agreement. At the meeting to consider renewal of the agreement, all evaluation and assessment data will be reviewed and discussed.
IX. CREDIT, REWARDS AND PAYMENT TERMS

This section should include:

♦ Clarification of when individual partners are expected to represent the collaboration (as opposed to their own organization), or give the collaboration credit for a given product or event.
♦ Specific rewards (resources, funding, visibility, credit) anticipated and how they will be allocated to the collaborators.
♦ Procedure for use of collaborators’ names and/or logos on collaboration materials.
♦ Schedule and procedure for receiving payment from the collaboration project for subcontracted services.

Sample text:
Both ACS and AARP agree that for activities outlined in this agreement, all references made will be to the collaborative effort. At no time will representatives from ACS and AARP be expected to represent the collaboration as opposed to each individual organization. The outcomes of the joint activities will be credited to both organizations and the collaboration, and each party is expected to reference the other. For any and all materials produced for the activities in this agreement, both organizations’ names and logos will be used. See legal clauses in Section X. regarding use of names/logos. For any/all media activity surrounding these activities and results, both organizations will be represented. Payments for subcontracted services will be outlined in writing at the time both parties agree to subcontract service.

X. LEGAL COMMITMENTS AND REQUIREMENTS

This section should include:

♦ Indication of appropriate leadership sign-off (Board or Executive Staff, or both, as appropriate for each organization) from each collaborating organization, acknowledging the terms of the collaborative agreement.
♦ Liability clauses that suit the activities of the collaboration.
♦ Required legal clauses on confidentiality, intellectual property, relationship between the collaborators, indemnification, etc. (see sample text for ACS required language).
♦ Required language regarding advocacy activities (see sample text for ACS required language).

Sample text:
ACS and CHCOP have each demonstrated appropriate leadership sign-off and support for this collaborative agreement.
XI. ACS Required Legal Clauses

Confidentiality
The Society may from time to time communicate to ________ proprietary, confidential and other information during the term of this Agreement. ________ shall treat all such information as confidential, whether requested to do so or not, and shall take all such reasonable precautions to prevent the unauthorized disclosure of any part of such information to any person outside its organization including, without limitation, taking all those precautions which ________ uses to safeguard its own confidential information.

This obligation of confidentiality shall not apply to information that is or becomes available in the public domain through no wrongful acts of ________. Nor does this obligation of confidentiality apply to information that is required to be disclosed pursuant to any court or regulatory order served upon either party, provided that either party gives the other prompt notice of such order. This confidentiality shall survive the expiration or earlier termination of this Agreement.

Indemnification and Insurance
It is agreed that ________ shall and does indemnify and hold harmless the ACS and all its affiliates, and their officers, agents, and employees from any losses, claims, actions, suits, proceedings, investigations, arbitration, assessments, settlements, penalties, damages, liabilities, costs, and other expenses, including reasonable attorneys' fees, arising out of (i) any unauthorized event or unauthorized use or public dissemination of materials, releases, reports or information. ________ is also required to obtain prior approval, in writing, before making any public dissemination of releases, reports or information; (ii) any infringement of trademark, copyright, or similar rights in any intellectual property of the ACS by ________ pursuant to this Agreement; ________ agrees that it will obtain prior approval, in writing, of any use of trademarks, copyrights, or similar intellectual property of the ACS; (iii) any libel, slander, defamation, or invasion of the right of privacy, publicity, or property of the ACS, or violation or misappropriation of any other right of any third party; (iv) any agreements or alleged agreements made or entered into by ________ to effectuate the terms of this Agreement; (v) any act or omission by ________ constituting gross negligence or a breach by ________ of its obligations under this Agreement; and (vi) any claim or action by any third party for bodily injury, illness, or death alleged to have been caused, in whole or in part, by or in consequence of the negligence of ________, or its Representatives, except only such injury or damage as shall have been occasioned by the sole negligence of ACS Representative.

Prior to commencing activity under this agreement, ________ shall obtain, and thereafter maintain, commercial general liability insurance (including product and contractual liability insurance), automobile liability insurance, third party fidelity insurance, and professional liability insurance, providing adequate protection for ACS as additional insured on ________'s policy from and against any and all claims, actions, suit, proceedings, investigations, arbitration, assessments, losses, damages, liabilities, settlements, penalties, costs, and expenses, including reasonable attorney fees, resulting from or in connection with any of the circumstances described in
Paragraph VII. Such insurance policy shall not be canceled or materially changed in form without at least thirty (30) days’ written notice to ACS. ACS shall be furnished with a certificate of such insurance in the form prescribed by ACS. __________ agrees that each such insurance policy shall provide coverage of at least One Million Dollars ($1,000,000) for any claim arising out of each occurrence, or __________’s standard insurance policy limits, whichever is greater. These minimum liability limits do not limit __________’s liability under the contract for actions for which they are held legally responsible. However, recognizing that the aforesaid amounts may be inappropriate with regard to specific situations, it is contemplated that ACS may make reasonable adjustments to the foregoing amounts. Any adjustment must be confirmed in writing by ACS.

It is agreed that ACS shall and does indemnify and hold harmless __________ and all its affiliates, and their officers, agents and employees from any losses, claims, actions, suits, proceedings, investigations, arbitration, assessments, settlements, penalties, damages, liabilities, costs and other expenses, including reasonable attorney’s fees, arising out of (i) any unauthorized event or unauthorized use or public dissemination of materials, releases, reports or information; (ii) any infringement of trademark, copyright or similar rights in any intellectual property of __________ by ACS pursuant to this Agreement; (iii) any libel, slander, defamation or invasion of the right of privacy, publicity or property of __________ or violation or misappropriation of any other right of any third party; (iv) any agreements or alleged agreements made or entered into by ACS to effectuate the terms of this Agreement; (v) any act or omission by ACS constituting gross negligence or a breach by ACS of its obligations under this Agreement; and, (vi) any claim or action by any third party for bodily injury, illness, or death alleged to have been caused, in whole or in part, by or in consequence of the negligence of ACS, or its Representatives, except only such injury or damage as shall have been occasioned by the sole negligence of any __________ Representative.

This indemnification hereunder shall survive the expiration or earlier termination of this Agreement.

Intellectual Property
During the term of this Agreement, ACS reserves the right to grant __________ permission to use the ACS name, logo, trademarks, and other intellectual property belonging to ACS. At no time during this Agreement will ______ use any name, trademark, or other intellectual property belonging to ACS without the prior written approval of the American Cancer Society. All rights and licenses of any kind not expressly granted in this agreement are exclusively reserved to the ACS. No title to or ownership of the ACS Trademarks and other intellectual property, or any part thereof, is hereby transferred to __________. __________ will submit to ACS for ACS’s prior written approval the portion or section of the packaging, materials, scripts, or any other communications medium that include the ACS name, logo, trademark, or other such intellectual property.

________ must adhere to ACS graphic standards and said standards will not be altered or modified in any way. No such name, logo, trademark, or other intellectual property shall be used in a manner that would imply or infer that ______ has any affiliation with ACS other than as provided in this Agreement or that ACS has sanctioned, approved, or is involved in any other activity, campaign, or promotion of ______ other than that
specified in this Agreement.

Upon termination or expiration of this Agreement, _____ shall cease any and all use of the ACS name, logo, trademark, and other intellectual property.

Relationship Between the Parties
Nothing in this Agreement shall be construed to create a partnership or joint venture between the parties and neither party shall have the right to bind the other to any contracts, agreements, or other obligations without the express, written consent of an authorized representative of such party. Pursuant to this, each party will be responsible for insuring their activities as they relate to this Agreement. This would include statutory worker compensation and other insurance coverage stated in Paragraph VII, contained herein.

Force Majeure
ACS shall not be liable for damages nor shall ______ be entitled to a refund of any payments hereunder due to any delay or failure to perform its obligations to ________ contemplated in this Agreement due directly or indirectly to circumstances beyond ACS's reasonable control. ________ shall not be liable for damages and shall be excused from its obligations hereunder due directly or indirectly to circumstances beyond ________'s reasonable control.

Assignability
This Agreement may not be assigned by either party hereto without the prior written consent of the other party.

No Third Party Beneficiary
This Agreement is made for the sole and exclusive benefit of ACS and ________, and is not intended to benefit any other third party. No other party may claim any right or benefit or seek to enforce any term or provision of this Agreement.

Construction
This Agreement embodies the entire understanding between ________ and ACS and all the terms and conditions with respect to the matters related herein; it supersedes and annuls any and all other or former agreements, contracts, promises, or representations, whether written or oral, expressed or implied, made by, for, or on behalf of ________ and ACS. This Agreement may only be altered or otherwise modified by written agreement signed by both parties.

Governing Law
This Agreement shall be construed in accordance with the laws of the State of Georgia. If any provision of this Agreement is for any reason held to be invalid or unenforceable, such provision shall not effect any other provision hereof, but this Agreement shall be construed as if such invalid and/or unenforceable provision had never been contained herein.

Survival
The duties, obligations, and rights imposed or granted in the sections of this Agreement
regarding Intellectual Property and Confidentiality shall survive the expiration or earlier termination of this Agreement.

**Waiver**

Neither the waiver of any provision of this Agreement, nor the failure of a party to enforce any provisions of this Agreement or to exercise any right, remedy, or privilege hereunder shall thereafter be construed as a waiver of any such provisions, rights, remedies, or privileges hereunder.

**Captions**

Captions and headings are for the convenience of the parties and are not intended to modify, limit or enlarge the content of the terms and conditions contained in this Agreement.

**Communications and Notices**

Communication of ongoing business management activities, as necessary and desired by the parties, shall be made by telephone or by US Mail. Notice under this Agreement shall not be deemed effective unless it is delivered by US Mail, return receipt requested, or by a private overnight delivery service. Communications and notices shall be directed as follows:

**Use of Unrestricted ACS Grant by Other Party**

As any grants provided by ACS to __________ are not earmarked, __________ must report to the IRS any costs charged to these funds for “direct lobbying communications” or “grassroots lobbying communications,” as those terms are defined by the Internal Revenue Service, or IRS Form 990 (for 501 (C)(3) organizations) or analogous form.

**XII. MODIFICATION OR CANCELLATION TERMS**

This section should include:

♦ Procedure for modifying the collaborative agreement.
♦ Consequences, if any, of violating the collaborative agreement.
♦ Conditions under which partners will be able to gracefully withdraw from the collaboration.
♦ Waivers, methods of disension or nonparticipation for collaborators to invoke as a stop-gap measure.
♦ Protocols for ending the collaboration and transferring duties to others as appropriate.

**Sample text:**

This agreement may be revised by signature approval of both parties. If either party feels that the collaborative agreement has been violated by the other party, a special meeting will be called to discuss the current status of the collaboration. Cancellation of this agreement may be accomplished at the expiration of 30-day advance written
notice by either party. The parties agree to consider whether or not to transfer duties addressed in this collaborative agreement to others at each annual review and assessment period.

Signature Lines

(NAME OF ORGANIZATION)   (NAME OF ORGANIZATION)

NAME: ___________________________ NAME: ___________________________
TITLE: ___________________________ TITLE: ___________________________
DATE: ___________________________ DATE: ___________________________
List the organizations involved and their representatives. Initial self-interests and possible contributions can be declared by individual/organization or summarized for all involved. How these factors are listed depends on the level of trust – the higher the trust, the more individuals can lay claim to their declarations. Update this roster regularly.

<table>
<thead>
<tr>
<th>ORGANIZATION</th>
<th>INITIAL SELF-INTERSTS</th>
<th>POSSIBLE CONTRIBUTIONS</th>
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<tbody>
<tr>
<td>Representative’s name, phone number, Organization name and address, and type of organization (i.e., nonprofit, government, grassroots, funder, and so forth)</td>
<td>Organizational and Personal Gains</td>
<td>Powers and Commitments</td>
</tr>
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# Meeting Agenda & Summary

Calling the next meeting  
(send to participants in advance of next meeting)

<table>
<thead>
<tr>
<th>Collaboration Name or Purpose:</th>
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<tr>
<th>Purpose of Next Meeting:</th>
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<tr>
<th>Meeting Date:</th>
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<th>Location:</th>
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<th>Start and End Times:</th>
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<tr>
<th>Convener:</th>
<th>Phone:</th>
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**Participants**  
(see membership roster for addresses and phone numbers):

## Action Agenda

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<tr>
<th>Item</th>
<th>Disposition</th>
<th>Responsibility</th>
<th>Time</th>
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Summary of Decisions Made/Actions to be Taken
This summarizes the previous meeting and accompanies the agendas for the next meeting.

<table>
<thead>
<tr>
<th>Decision Made/Action to be Taken</th>
<th>Responsibility</th>
<th>Deadline</th>
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Summary of Decisions Made/Actions to be Taken
This is a log of all achievements. It provides an excellent history and basis for evaluation. Update it regularly.

<table>
<thead>
<tr>
<th>Decision Made/Action to be Taken</th>
<th>Responsibility</th>
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Vision and Focus Statements

This document provides an excellent record of the rationale for the vision and focus statements. It also aids in achieving support from key stakeholders.

1. **What is our destination – what will we achieve, for whom and where?**

2. **What is the scope of effort – how big, how many, how much?**

3. **How is this destination unique among members of the collaboration?**

4. **How can we phrase the vision statement so that it is not complicated?**
   
   Our draft vision is:

5. **After considering our statement, how can we rephrase it so that it is easy to understand and easy to repeat?**

6. **Imagining that we have fifteen seconds to communicate the essence of our vision, what short phrase best captures the heart of it?**

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Communal Benefits -- Outline what we are trying to achieve
**Desired Results and Strategies (cont.)**

**Key Strategies**  Give the key stakeholders perspectives; rate them “for,” against,” or “persuadable.” Sequence the approach – who talks to whom, and in what order.

<table>
<thead>
<tr>
<th>Key Stakeholders</th>
<th>Perspective</th>
<th>Rate (F/A/P)</th>
<th>Sequence</th>
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**Redefined Results**  Now we restate our desired results integrating stakeholders’ perspectives.

**Strategic Aim**  List specific actions to influence stakeholders.

<table>
<thead>
<tr>
<th>Responsibility</th>
<th>Action Step</th>
<th>Deadline</th>
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IV.

EXAMPLES OF COLLABORATION
American Cancer Society

Examples of Collaboration in the Year 2000

Overview

Collaboration is being practiced by many volunteers and staff at the American Cancer Society. Examples presented here reflect one collaboration internal to ACS, and others where ACS works with external organizations. One is still in formation; some began in the late 1990s; and others started even earlier, illustrating collaborations at different stages of development.

These examples represent three different models of collaboration:

**Strategic Partnership:** A few organizations collaborate to create new products, projects, or markets. Each partner makes a distinct contribution based upon their unique capacity, expertise, or resources. Each component enhances and extends the value of the other.

**Service Integration:** Several or many organizations collaborate to streamline systems, consolidate resources, save costs, increase service options, or broaden access. Collaboration links similar or complementary services or programs into a larger, shared system.

**Comprehensive Collaboration:** Collaboration unites disparate organizations, institutions, and sectors to create more comprehensive approaches for planning, advocacy, and resource creation. Representatives of diverse geographic, functional, or interest communities mobilize a joint effort around an issue that affects all participants, but is bigger than any one group can address alone.

Additional examples of collaboration appear as illustrations in the document, Ways Of Working Together (included in this Guidebook). Documentation of collaboration may also be found in the Resource Section of the ACS Lotus Notes Collaborative Relations Database, which lists over 400 organizations (see the Resources section of this Guidebook for more information about the database). ACS staff and volunteers are encouraged to use the database to research prospective partners, learn about collaboration projects, and share their own collaboration experiences.

Much of what we know about collaboration comes from actual practice. The varied experiences with collaboration among ACS staff and volunteers can be helpful in building expertise and capacity to guide future efforts.
Patient Education Broadcast Program On Prostate Cancer
A Strategic Partnership

Partners
- The Northwest Division of the American Cancer Society (ACS)
- The University of Washington Medical Center (UWMC)
- Novartis Oncology

Purpose
To produce a 2-hour patient education program on prostate cancer. The program will be broadcast live, by satellite, around the country to C-Band satellite downlink sites on Tuesday, May 16, 2000.

All three strategic partners have a common need to reach prostate cancer patients and caregivers with information of importance to prostate cancer treatment. Novartis and the UWMC gain public recognition for being involved in this high-quality, high-visibility patient education program. The ACS downlink sites will utilize the live, local downlinks to showcase ACS community involvement, and promote personal advocacy to patients who are seeking to become informed, active participants in their own prostate cancer care.

Time Frame
This ambitious venture was launched in late 1999, six months prior to broadcast. Organizers believe that more time would have been welcome.

ACS Role (see below)

Program/Strategy
The UWMC brings to the partnership a $10,000 volunteer-guild donation and the donated services of Dr. Celestia Higano as a presenter. Novartis Oncology brings an unrestricted educational grant of $15,000 to help cover the cost of the satellite broadcast, and the Novartis Oncology product representatives nationwide to help promote the event. The American Cancer Society brings the organizational structure, broadcast expertise, and ACS volunteer-coordinated “downlink” sites across the country. As a grassroots organization, the ACS is uniquely positioned to organize downlink sites in any local community that wants to view the live presentation.

Resources
A variety of resources are being combined to produce this project:
- Underwriting money (from Novartis Oncology and University of Washington Medical Center Service League)
- ACS community volunteers to set up downlink sites
- Local community collaborators for downlink sites (such as a local hospital that could help promote the program to prostate cancer patients)
- Internet sites and chat pages for promotion
- Printed brochure for promotion
- Model public service announcements and press releases to promote the downlink sites
- Speakers
- ACS prostate cancer materials
- Contract with satellite broadcast company
- C-Band satellite dish facilities at downlink sites
- ACS National Cancer Information Center

**Anticipated Outcomes**
- To impart informed decision-making skills to prostate cancer patients and their caregivers
- To evaluate skills learned by 3-month post-event survey to all attendees
- To make available to small or remote communities a live prostate cancer forum with toll-free phone lines available for downlink site audiences to call in questions to the presenters.
- To solidify a partnership between the ACS, a major teaching hospital (UWMC), and a private-sector oncology drug company, in the interest of prostate cancer patients.

**Collaboration Issues/Learning Points**
- Secure a partnership agreement with all parties, with each partner's roles and responsibilities, before promoting the event to the public.
- Allow enough time for each partner to complete their portion of the project. A six month lead time for this collaboration was barely enough due to the community downlink sites needing a great deal of lead time as well to set up the local events, after the program was in place.
- Expect negotiation for credit and visibility. This collaboration spent quite a bit of time negotiating sizes of logos on the brochure, positioning on the promotional materials of the three partners, how much time each speaker would be allowed for speaking and Q/A afterwards, acknowledgements of sponsors during the event (verbally by the moderator), etc.

**Contact Information**
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American Cancer Society  
Northwest Division  
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Seattle, WA 98198  
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fax: 206-285-3469  
e-mail: dschiro@cancer.org
Church Connection
A Strategic Partnership

Participants
Church Connection is an unusual example of an ACS collaboration, in that it appears as a straightforward ACS standing committee out of the Fort Worth office. Participants are all ACS volunteers, although the initial outreach effort involved recruitment specifically from African-American faith communities. Members of a variety of churches are now trained ACS volunteers, who act as liaisons to the pastors and others in their congregation or community.

Purpose
Cancer control, outreach to the African-American community

Time Frame
Church Connection was launched in summer of 1997 and continues to grow stronger.

ACS Role
ACS recruited volunteers to be contact persons from the faith communities, and organized a leadership group, the Church Connection Task Force, to guide the effort. ACS set up this collaboration infrastructure for the purpose of cancer control, and now manages the venue. Currently, 150 churches have liaisons to ACS and 73 are active members. ACS provides one staff person, a Director of Early Detection, who facilitates the Task Force; they also provide information on cancer, resources such as meeting space, host quarterly dinners for liaisons and pastors, and act as the gateway for many other resources of interest to the African-American faith communities market.

Program/Strategy
The Church Connection Task Force acts as a core organizing committee for ACS volunteers based in different churches. They recruit liaisons from different types of churches, and cultivate relationships with their liaisons in order to organize events. Church Connection has taken several ACS programs and tailored them for their particular market: 1) Purple Tea, a breast health awareness program originally from ACS-Florida, brings together women, to testify or tell stories about their own experience with breast cancer and a breast health educator to answer questions; participants meet over tea and wear purple carnations; 2) Honor Thy Father, gathers men and focuses on the importance of prostate cancer screening and counseling, following a similar format to Purple Tea, but with the focus on “taking care of our men” so that the community doesn’t lose more fathers and teachers; 3) Smoke-Out Sunday, held the Sunday before the Great American Smoke-Out, helps church members to get spiritual and community support to stop smoking, and later to join Fresh Start classes. In a related effort, a youth minister holds sessions with parents on how to speak with their children about the dangers of smoking. ACS-trained volunteers, who are church members, are the ones who speak at these events, and act as educators on the issues. The Task Force has started to cultivate leaders who organize these events without relying upon ACS staff support.
Resources
In addition to providing staff support, information, and meeting space for Church Connection, ACS has brought in speakers and resources on other issues of interest to the African American faith communities - e.g., legal services, Arthritis, Alzheimers.

Outcomes
This collaboration reaches 15,000 African-Americans, or roughly 15% of the African-American residents in Fort Worth - Arlington, TX. It is a model for the ACS National Volunteer Diversity Task Force, which is supporting the development of a training guide to help others replicate this approach.

Collaboration Issues/ Learning Points
This collaboration pushes the boundaries of ASC volunteer recruitment to draw upon people who are intrinsically wearing two hats: one for their community identity and one for their role as a volunteer for ACS. In general, many successful ACS volunteers represent some other organization in their communities; what is distinctive about this effort is that volunteers were specifically recruited because of their connection to the African-American faith communities. Utilizing this network of trained ACS volunteers enabled ACS to develop a highly effective collaboration with churches of diverse denominations, diminishing the “us-them” dichotomy that often characterizes such partnerships. Another interesting aspect of Church Connection is that it reflects a collaboration that is driven by a specific market, and not by a specific issue or type of cancer. The collaboration works with the African-American faith communities on a variety of health concerns, determined by people within the community. Providing staff support and leadership development to this volunteer group has resulted in greater community ownership and reach of the cancer control effort. Finally, this collaboration has demonstrated how essential cultural competence is to effective community collaboration.

Contact Information
Donna Rankin
Metro Executive Director - Fort Worth
American Cancer Society
3301 Freeway
Fort Worth, TX 76107
Ph: 817-737-9990
Fax: 817-737-9977
Email: drankin@cancer.org
ACS-NYC and Macy’s East Department Store
A Strategic Partnership

Partners
- New York City Office of ACS departments of Corporate Relations, Special Events, and Education
- Macy’s East, part of Federated Department Stores

Purpose
ACS is one of Macy’s East’s charities of choice, and the two partners collaborate on a variety of initiatives. This strategic partnership is ongoing, and operates fluidly throughout the year, taking on new dimensions as opportunities arise.

Time Frame
The collaborative relationship began years ago.

ACS Role
The New York City Office of ACS has focused on building the relationship with Macy’s East, so that they can be called upon to help with different ACS activities over the years. Relationships forged at the national level are helping to connect ACS and Macy’s East stores on the local level, and to leverage resources. One staff member in the New York City Office of ACS Corporate Relations keeps abreast of relevant activities and opportunities and coordinates the New York City Office of ACS’s strategy for working with Macy’s East.

In partnering with Macy’s East, the New York City Office of ACS is targeting two audiences simultaneously – thousands of Macy’s employees and the public the store attracts as shoppers. Working with Macy’s East entails a certain amount of internal collaboration between the ACS New York City Special Events, Education, and Corporate Relations offices, as well as local ACS offices across the country. Maximizing the opportunities for visibility is a key strategy. Publicizing what ACS can do, covering the entire spectrum of cancer concerns and care, and increasing name recognition are all part of the strategy used in this collaboration.

Program/Strategy
The relationship began as a collaboration with the New York City office of ACS Special Events when Macy’s East joined as a co-sponsor of ACS’s Dogs Walk Against Cancer. Subsequently, Macy’s East has been a corporate sponsor of ACS’s annual fundraising event, The Dream Ball, and most recently participated in the ACS Daffodil Days program for the first time. (Daffodils, the flower of spring, represent the flower of hope; 12 out of 17 divisions ask companies to sell cut daffodils that are grown especially for this purpose. Proceeds raise millions of dollars.) Macy’s East has also provided volunteers for ACS events. Macy’s East will open new stores in Puerto Rico, Fair Oaks, VA, and West Palm Beach, FL, by fall 2,000, and plans to hold fundraising activities to benefit local ACS offices in each site, to launch each store.
The New York City office of ACS helps put together the Macy’s East wellness calendar, and provides substance for events several times a year. For example, one month might focus on breast health: the New York City office of ACS provided written material on breast cancer and trained Macy’s East volunteer group, Partners in Time, to distribute this information and answer questions. Another month was The Great American Smoke-Out: the New York City office of ACS helped develop payroll-stuffers distributed to thousands of Macy’s East employees. Another special initiative was “For the Love of Her Life.” In this, Macy’s East developed and printed a card with breast health information (guidelines provided by NYC ACS) and a pink ribbon, and coupons for different retailers in their store. Shoppers purchased the card for $5 and the proceeds went to ACS; additional funds were raised by using Macy’s East or American Express credit cards. The New York City Office of ACS kicked off the event and provided speakers. This event was replicated in stores all along the eastern seaboard.

**Resources**
Resources for each activity within this collaboration are donated by the partners. One valuable contribution that ACS makes is the use of its name and logo; sometimes its use is contingent upon a certain financial return.

**Outcomes**
The collaboration benefits both partners. Macy’s East obtains quality information on cancer and wellness, credibility through the use of ACS’s name and logo, and volunteer assistance, enabling them to provide reliable information to their shoppers; ACS gains greater exposure for its cancer education and control initiatives, as well as enhanced visibility and significant charitable contributions. The public, largely female shoppers, receives important health information.

**Collaboration Issues/ Learning Points**
This ongoing collaboration involves maintenance of separate relationships with representatives of different departments at Macy’s East, in Benefits, Special Events, Public Relations, and Partners in Time. Sometimes these collaborations entail negotiation and contracts to ensure that there is a reasonable return on investment. Building relationships is essential to this effort; increasing opportunities to collaborate deepens the relationship and expands possibilities.

**Contact Information**
Robin Grossman
ACS Director of Corporate Relations
ACS Eastern Division
19 West 56th Street
New York, NY 10019
Ph: 212-237-3838
Fax: 212-237-3842
E-mail: Rgrossma@cancer.org
Taking Charge Of Money Matters  
A Strategic Partnership

Partners
- National Endowment for Financial Education (NEFE)
- The American Cancer Society (ACS) National Home Office - Cancer Control Department

Purpose
To develop a personal financial management workshop for people facing cancer

Time Frame
NEFE approached ACS in 1996 about developing a joint program; Taking Charge of Money Matters was introduced to the ACS field early in 1999.

Roles
Taking Charge of Money Matters was jointly developed by ACS and NEFE. Recognizing the need for a workshop like this, ACS and NEFE combined the expertise of specialists in cancer and financial planning to design the content of the workshop, and tested it in several communities to ensure it met the needs of cancer patients and their loved ones.

Program/Strategy
Taking Charge of Money Matters is a workshop for people with cancer and those who care about them. Lasting between 2 and 2 1/2 hours, the workshop addresses many concerns about money that arise during or after a person's cancer treatment, regardless of whether that person has health insurance. The session provides an opportunity to discuss key money matters with guest speakers.

Resources
Many workshop facilitators are long-time ACS volunteers involved in such programs as I Can Cope, although some have had no prior ACS involvement.

Guest speakers are knowledgeable in at least some of the core and key topic areas. They may include:
- Licensed certified financial planners
- Hospital billing representatives
- Attorneys
- Insurance agents/specialists
- Bankers and bank trust/loan officers
- Social security/medicare/medicaid representatives
- Certified public accountants
- Comprehensive health insurance plan representatives
- Tax consultants/specialists
Outcomes
Taking Charge of Money Matters is an optional module added to the American Cancer Society's I Can Cope Program. In addition, it can be offered as a stand-alone workshop in a community.

During the workshop, key topics of interest to participants are covered along with core financial topics, including:

- The need for family openness in discussing and finding solutions to financial and investment matters.
- The importance of practicing basic financial planning, e.g., all adults should have a will and other essential paperwork in place, make a budget, and monitor cash flow.
- Warning signs that finances are out of control.
- How to handle work-related issues, such as disclosing medical information to an employer and the legal rights of cancer patients and their survivors. (Work-related topics are only discussed if a number of participants are employed.)

Collaboration Issues/Learning Points
This is an example of collaboration initiated by an outside party, which asked the American Cancer Society to get involved for specific purposes. Developing a legal agreement was a necessary step in this collaboration. Issues included copyright and ownership of different parts of the program, how the program could be utilized and whom else the partners could collaborate with.

Contact Information
Claudia Bannon
Director, Patient Support
ACS National Home Office
cbannon@cancer.org
Make Yours A Fresh Start Family
A Strategic Partnership

Partners
- Pennsylvania Department of Health (PADOH)
- The American Cancer Society (ACS) National Home Office – Cancer Control Department

Purpose
To disseminate a comprehensive program package for health care providers to help them counsel pregnant women and mothers to stop smoking.

Time Frame
Discussions with PADOH began in 1995; Make Yours a Fresh Start Family was released to the ACS field in 1997.

Program/Strategy
Make Yours a Fresh Start Family is an innovative program that teaches providers to give their smoking patients one-on-one counseling using a 5-step "STAGE" intervention. The program is based on the Agency for Health Care Policy and Research (AHCPR) Clinical Practice Guidelines on Smoking Cessation.

Roles
The protocol used in the program was developed and evaluated by the Fox Chase Cancer Center for the Pennsylvania Department of Health. The Pennsylvania Department of Health owns the copyright to most of the program components. The American Cancer Society is responsible for printing and distributing the program through our field offices.

Outcomes
All partners benefited from this collaboration. The Pennsylvania Department of Health expanded the reach of the program; the American Cancer Society was able to add Make Yours A Fresh Start Family to their inventory of tobacco control programs.

Collaboration Issues/Learning Points
This is an example of collaboration initiated by the American Cancer Society with one party, the Pennsylvania Department of Health. The partners developed a Letter of Agreement to delineate roles and responsibilities of each party.

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Collaboration To Increase Involvement Of Special Populations In Advocacy
A Strategic Partnership Internal To ACS

Partners
- The Midwest Division of ACS
- The National Government Relations Department (NGRD)

Purpose
To increase ACS's capacity to involve special populations in our advocacy efforts

Time Frame
Began discussing the potential for collaboration in 1999, actually started solid discussions on the structure of the partnership in October 1999, hired a community advocacy director to head the program in Milwaukee in November 1999, and started the project in January 2000

Roles/Program/Strategy
The Midwest Division had expanded their advocacy staff in a recent charter agreement, and was interested in becoming more effective at serving underserved communities. While they had new staff to carry out these efforts, they had minimal experience working with special populations. The Special Populations advocacy staff at NGRD had the experience working with multiple communities and was interested in developing pilot projects that could be replicated by multiple Divisions to increase ACS capacity to do advocacy work with underserved populations throughout the country.

Through the collaboration NGRD Special Populations advocacy staff works directly with new Community Advocacy Directors in the Midwest to provide guidance and technical support in developing relationships with minority and underserved communities in the Milwaukee area.

Outcomes
The lessons learned through this effort are documented and will provide guidelines for a "best practice" plan of action for other Divisions to institute. The collaborators are also working together to produce a community advocacy publication which will be personalized for Milwaukee and also replicated for use by other Divisions. Both collaborators commit financial, human, and other necessary resources to the project.

The Midwest Division can draw upon National staff's exposure to work being done in multiple communities across the country. Instead of trying to reinvent the wheel, the Midwest Division can build on experiences of staff in other Divisions. The NGRD also has relationships with leading national organizations that represent the underserved and other special populations, and extends those relationships to the Midwest Division. Consequently, the Midwest Division has to invest significantly less work in building those relationships from scratch--which can be incredibly time consuming.
Collaboration Issues/ Learning Points
ACS expertise and experience in distinct arenas can be combined to provide certain strategic advantages. In this example, time is saved, and expertise and a foundation of relationships is gained through collaboration. The ACS Advocacy Department is increasingly pursuing collaborations such as this, recognizing that they increase their capacity in the field to expand their grassroots efforts and to work with racial and ethnic minorities and the underserved.

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Duval County Coalition Against Tobacco
A Comprehensive Collaboration

Participants
- American Cancer Society
- American Heart Association
- American Lung Association
- Baptist Hospital
- Blue Cross and Blue Shield
- City Councilmember Dick Kravitz
- Division of Alcoholic Beverages and Tobacco
- Duval County Health Department
- Duval County Public Schools
- Fuller Financial Services
- Health Planning Council of Northeast Florida
- Jacksonville Sheriff's office
- JobCorps
- Mayo Clinic
- Naval Wellness Center
- Northeast Florida Dental Hygiene Assoc.
- Other organizations and private citizens
- St. Vincent’s Hospital
- University of North Florida

Purpose
Duval County, which shares boundaries with Jacksonville, Florida, has among the highest rates of lung cancer in the country. According to the Duval County Lung Cancer Study, cigarette smoking was the dominant cause of lung cancer (from the abstract of the study: Southern Medical Journal, JSMA, May 1999). The Duval County Coalition Against Tobacco (DCCAT) was initiated by the Tri-Agency Coalition of the American Cancer Society, the American Lung Association, and the American Heart Association in 1986 to bring together different county resources and see what could be done collectively.

Time Frame
The Coalition began in 1986 and worked on a number of tobacco control activities until 1998 when tobacco settlement funds arrived and a youth component was added.

ACS Role
The Duval County Unit of ACS was part of the Tri-Agency Coalition, the initial organizer of the effort. Early work required more collaboration and direct involvement, to share responsibilities and contribute resources to make things happen. Now the coalition has grown and has operational funds; ACS currently holds one seat on DCCAT as a regular member.

Program/Strategy
Early events included organizing a dining guide which listed restaurants with a non-smoking section throughout the county (shortly after legislation required the establishment of such a section in the 1985 Florida Clean Indoor Air Act), securing an ordinance making tobacco possession for youth under 18 years of age illegal, and a billboard advertising campaign with anti-tobacco messages. The Coalition established itself as a 501(c)(3) organization giving them a tax-exempt, incorporated status.
When 1998 tobacco settlement funds came to the State of Florida, the newly established Tobacco Pilot Program decreed that they needed to be allocated through each county’s health department. The program also called for a county-based partnership of community members coupled with a youth component to decide how best to use the funding in each particular county. Because such a coalition was already established in Duval County, DCCAT took on this responsibility for their area. The group saw an increase in their membership of 650 youth county-wide.

DCCAT meets monthly to discuss business, collaborate on projects, and to make decisions for the coalition. The newly formed youth component, Students Working Against Tobacco, also holds monthly meetings, separately from the adult group, to discuss business and make decisions based on their goals and objectives. Once a quarter, both groups come together for a joint meeting. This meeting is normally dominated by the vigor and enthusiasm of the youth.

Funds from the State Office of Tobacco Control are allocated based on the annual work-plan, which is formulated and approved by both the youth and adults. In order to be approved by the state, the work-plan must involve activities and expenditures in the following five goal areas:

- Changing Attitudes About Tobacco
- Increasing Youth Empowerment Through Community Involvement
- Reducing the Availability of and Youth Access to Tobacco Products
- Reducing Youth Exposure to Second-Hand Smoke
- Reducing Tobacco Use Among High Risk Populations

DCCAT continues to work on such activities as the Smoke-Free Dining Day, promotion of cessation programs including a cutting edge web-site, and seeking relevant policy changes. The addition of the youth has also added many youth related activities such as educational curriculum, peer education, a Smoke-Free Stadium Night at the Jacksonville Suns stadium, community events, art projects, peer education, and many more anti-tobacco and youth empowering activities.

**Resources**

Early on, resources consisted of the time and efforts of the core group of DCCAT members. The group was the recipient of a CDC grant in 1992, which provided $25,000 a year for 3 years. They have also been the recipients of the Chronic Disease Program grant as well as grants from groups such as Glaxo Wellcome. Funds from the State Office of Tobacco Control aid the youth component and provide staffing and operational support. Additionally, DCCAT has received tobacco-related grants through both private and health department sources.

**Outcomes**

In early years, DCCAT was able to obtain ordinances relating to signage, underage tobacco use and vending machines. Additionally, the Smoke-free Dining Day has expanded to include advertising, media, a published guide, and a significant expansion of participating restaurants. The Coalition also continues to work in the
areas of both youth and adult cessation, maintenance of a speaker’s bureau, along
with many other activities.

**Collaboration Issues / Learning Points**
The small group of core members collaborate and work very well together. Rather than
begin a new coalition to meet state requirements for receipt of tobacco settlement
funds, DCCAT’s original membership was strong enough to stay together, sustain their
original vision, and incorporate a large and vibrant youth component.

This is an example of the comprehensive collaboration model, drawing upon a diverse
membership to achieve large-scale change. This model of collaboration allows for
multiple activities to be conducted simultaneously, and often involves external targets.
Such collaborations may find it desirable, as did DCCAT, to expand goals and
membership, in response to changes in external conditions.

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Multicultural Advocates For Social Change On Tobacco (MASCOT)
A Comprehensive Collaboration

Partners
- American Cancer Society (ACS)
- Albuquerque Fire Department
- Youth Development, Inc. (YDI)
- American Lung Association
- American Heart Association
- New Mexicans Concerned About Tobacco
- State Public Health Division
- University of New Mexico
- The Albuquerque Partnership
- Albuquerque citizens
- Talking Talons Youth Leadership Program
- The ARC of New Mexico

Membership includes additional individuals and organizations in the Albuquerque area.

Purpose
MASCOT is a volunteer, community-based coalition dedicated to empowering New Mexicans to live a healthy, tobacco-free lifestyle. MASCOT goals include educating the community about youth access and the advertising and promotion of tobacco products by the Tobacco industry, and advocating self-efficacy through education efforts. (MASCOT mission)

Time Frame
The coalition was founded in September 1995, and continues today.

Program/Strategy
MASCOT’s projects include: "Smoking’s Cool, Yeah Right!" a 1996 youth-directed billboard and bumper sticker campaign; advocacy for the elimination of tobacco and alcohol billboards; and Kick Butts Day, an annual public education effort begun in 1998, in conjunction with two local Teens Against Tobacco Clubs.

A major focus of work has been development of and advocacy for passage of the Tobacco Products Ordinance, legislation that restricts self-service tobacco displays and requires vendor-assisted tobacco sales in most stores. This bill passed the Albuquerque City Council and became effective on December 28, 1998. In New Mexico it is illegal to sell tobacco products to anyone under the age of 18. This ordinance is expected to help reduce the illegal sale of tobacco products to young people by removing easy access, and forcing young people to produce age identification before purchasing tobacco products. Placing tobacco products behind the counter and requiring direct clerk assistance also reduces theft. MASCOT is currently educating the Albuquerque community about the ordinance and helping to enforce it. MASCOT published an education brochure that was distributed to over 350 local tobacco retailers. In April 1999, the Albuquerque Fire Department conducted a retailer study to assess the impact of the Tobacco Products Ordinance. Learning that some vendors were only receiving light fines for violating the ordinance, MASCOT is prepared to ask the municipal court judges to issue stiffer fines. As part of a tobacco control CD-ROM prototype, MASCOT
is sharing its experiences with this ordinance with other community coalitions, in the hope that they will encourage more city councils to pass similar ordinances throughout the state and beyond. More than 190 cities in the U.S. have enacted this type of regulation.

MASCOT, along with other coalitions and partner organizations, is fighting the New Mexico legislature on the tobacco settlement allocation. Tobacco control advocates want the funds put into trust for tobacco prevention and cessation, rather than going toward other state projects.

**ACS Role**
ACS has been a major player in MASCOT since its inception. In New Mexico, MASCOT is one of a few interwoven tobacco control collaborations; because ACS is active in each of them, it has played a linking role. Albuquerque ACS leads the Tobacco Core Team, another coalition, which sponsors the Great American Smokeout and targets schools for letter writing and other organizing efforts. ACS is also very active with New Mexicans Concerned About Tobacco (NMCAT), a statewide coalition addressing state legislative initiatives. Within MASCOT, ACS has participated in letter writing and preparation of testimony, paid for mailings and lent their name to various advocacy efforts.

**Resources**
MASCOT operates without dues or grants; resources, such as printing and mailing, are donated by partners. For example, in addition to the ACS contribution mentioned above, The New Mexico Public Health Division set up and maintains a website for the collaboration; the University acts as a base of contact for public information; the American Lung Association and American Heart Association share responsibilities for writing, telephoning, and testifying, and handling press; the Heart Association provides meeting space. YDI provides youth leadership and volunteers on MASCOT efforts, and the Albuquerque Fire Department implements sting operations on local merchants to ensure that they are in compliance with the new ordinance. MASCOT anticipates the need for additional funding in order to tackle larger projects.

**Collaboration Issues/Learning Points**
MASCOT is an example of a comprehensive coalition that drew together representatives of different bases and sectors, in order to provide a distinct multicultural approach to tobacco control among young people. Factors influencing its success include its ability to involve or channel volunteers who are already committed to this issue; to coordinate strategy with other compatible coalitions; and to recognize and consciously build upon the fact that some MASCOT members are active representatives in those other coalitions. In this way, different coalitions can focus on their particular niche, and more comprehensive efforts can cover the whole field of tobacco control. The multicultural dimension of MASCOT derives from recognition that individuals, while representing different organizational or institutional partners, are themselves members of diverse cultures and ages, and bring forth a variety of ideas based on their backgrounds and experiences.
Contact MASCOT

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Public Education And Advocacy Among New Mexico Indian Tribes And Pueblos
A Service Integration Collaboration

Partners
- The American Cancer Society’s National Government Relations Department (NGRD), Southwest Division
- The Indian Health Service in New Mexico

Purpose
To create a culturally competent, user-friendly publication and accompanying education programs and advocacy efforts

Program/Strategy
This collaboration links efforts by the Indian Health Service and independent researchers to disseminate epidemiological findings to the tribes, with ACS efforts to do cancer control and advocacy work with pueblos and tribal communities. Scientific research on cancer burdens among specific pueblos and tribal communities will be combined with information on culturally competent cancer control programs to form one user-friendly community-oriented publication. The goal of the publication is to present extremely scientific epidemiological information to the community in a way that makes it relevant to their daily lives, and in turn, to use that research to implement programs that will be most relevant to each specific community. The ACS will also work with the pueblos and tribes to implement advocacy efforts around the most relevant cancer-burden and disparities issues brought forth through the epidemiological research. Rather than having tribal health organizations and the American Cancer Society engage in competing or overlapping efforts regarding cancer education, prevention, and advocacy, this collaboration attempts to create one cohesive effort to dialogue, and link scientific research with programmatic efforts among multiple communities in one network.

Time Frame
This project is still in development. Discussions between NGRD and the Indian Health Service staff began in September of 1999. Before actual implementation, the project is currently searching for funding to ensure that multi-year support will be available. Funding has been secured only for one year; the NGRD staff decided that they do not want to commit to working with the community, only to pull out after a year because of lack of funding.

ACS Role
ACS performs many roles in this collaboration: convener, co-coordinator, program developer tailoring programs to incorporate specific cancer burdens facing the pueblos and tribes, advocacy trainer, funder for Program Coordinator position to be filled by a member of the community.
Outcomes

It is significant that none are yet projected. This is an example of a collaboration where ACS departs from its habit of beginning collaborative relationships with a set agenda. Instead, ACS has come to the community ready to listen to what their greatest burdens, concerns, and needs are and work from there. According to the ACS Advocacy Manager for Special Populations, "this approach builds trust, respect, and ultimately an extremely valuable program that may be more beneficial to ACS goals than ever imagined."

Collaboration Issues/Learning Points

This is an example of a service integration effort, in that it connects existing efforts directed at a shared population. The collaboration is currently seeking funding to provide long term support for a new, shared staff position (Program Coordinator) that links the efforts. This collaboration is still in the formation phase, cautiously approaching implementation only when sufficient resources can be secured. In collaborative relationships with underserved communities, it is important to assess realistically the time frame necessary to make a difference, or achieve collaboration goals, and to arrive with a clear grasp of whether or not ACS has the resources and the organizational commitment (authorization) to commit to the project for its duration. Only by cultivating a long-term relationship, respecting and supporting the needs of the community, can ACS programs and resources truly help the underserved and empower them to make a lasting difference.

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RESOURCES AND BIBLIOGRAPHY
COLLABORATION RESOURCE LIST

ACS Publications/ Sources


Collaborative Relations Database on Lotus Notes. This new database was announced to staff on December 7, 1999. For information about accessing this database, contact the ACS CSS Support Center at 800-843-1092.

ACS Collaboration Training

Beginning in May 2000, a train-the-trainer program for the training module “Moving Towards 2015: Collaboration Skills and Strategies for Results” (basic collaboration skills and strategies workshop) will be available at nationwide regional cancer control trainings. For more information about this training and/or to find out when the training is being offered, contact NHO Public Affairs department, 404/329-5762.

ACS National Staff Resources

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References/Articles/Publications


Collaborative Relations Lotus Notes Database
March 2000

What is the Collaborative Relations Database?
To effectively work with other organizations, the American Cancer Society (ACS) needs up-to-date information about organizations with an interest in cancer, health, or related issues, and what activities or what type of relationship is currently in place between ACS and these organizations. The Collaborative Relations Database has been developed as a framework for National and Division staff to access information about other organizations, as well as information about ACS relationships and collaboration with other organizations. The general information this database houses about other organizations (including history, background, and contact information) will enhance the Society's ability to promote collaborative relationships with these other organizations. The Collaborative Relations Database focuses only on tracking non-profit organizations, associations, and agencies.

Why develop a Collaborative Relations Database?
Collaborating with other organizations has been identified as a critical activity for the American Cancer Society. Working with other groups can help ACS better address its mission through additional resources, linkages to communities, reduced duplication and overlap, an increased power base to affect change, among other possible benefits. Information from the database will allow the NHO and Divisions the ability to monitor the types of collaborative activity taking place throughout ACS, and easily identify who within ACS has in-depth information about a specific organization and/or collaboration.

How has the database been developed?
All information currently in the database has been compiled through general research on national organizations, and internal research and interviews by NHO staff. The future quality of the database relies completely on the quality of the information submitted over time by NHO and Divisions about organizations and collaborative activity. General comments and questions about the database or listings can be submitted through the Comment Corner to the database manager for consideration in future releases.
What are some of the other features of the database?

Each organization listed in the database has been given a status rating of 'Go' or 'Stop', which indicates whether the organization may be approached for collaboration by anyone within ACS (Go), or whether current activity with ACS warrants internal coordination prior to an approach (Stop). The Stop indicator directs viewers to contact a particular person at ACS who can advise regarding the feasibility of approaching the organization at this time, and provides additional relevant background information. This "Status" aspect of the database, along with the Activity Log section, assist ACS in effectively managing relationships with other groups. This is not meant to control contact with other organizations for publications or information; rather this is to allow coordination of contact with other organizations for collaborative activities or related issues that have widespread or nationwide impact.

Who is responsible of the development of this database?

The database is currently supported by the Public Affairs Department at the National Home Office. General comments and questions about the database or suggestions for listings and additional information can be submitted through the Comment Corner to the database managers. Angie Owens, Manager, Collaborative Relations (404/329-7955) is the project content manager.