Resources for Identifying Potential Partners

Tips and Strategies

- **Building on prior positive working relationships** among at least some of the potential partners is a step in the right direction when establishing a new community-institutional partnership to address a public health issue not previously addressed by this particular group of partners. Drawing upon the trust that is already present can lead to the initial willingness to get involved and the commitment to develop more long-term trusting relationships. When this is not possible, engage a core group of dedicated participants.

- **Organizational membership**, rather than individuals, helps to bring the entire resources of the organization to the partnership, and if an individual who participates on a given project leaves, then the organization is committed to identifying another person to be involved.

- **Starting with a small number of diverse partner organizations** may facilitate your success with drawing upon diverse ideas and resources while keeping the number of partners small enough to be able to adopt and adhere to a set of participating principles and operating norms.

- It is also essential to **have early, tangible successes**. These will help to sustain enthusiasm among partners, and will require that the goal setting process be very realistic, with milestones set at short, medium and long-term intervals.

### Characteristics of Effective Partners

- Willing and committed
- Organizational mission in alignment
- CBO History of engagement in the community
- CBO staff/volunteer capacity and willingness
- Engaged, competent researchers
- Support and involvement from CBO’s top leadership
- Ability to adopt multiple roles
- Good negotiation, problem-solving and conflict resolution skills
- Ability to obtain resources
- High degree of political knowledge
- Ability to foster collaboration among members
- Access to decision-makers within the community

### Example Partnership Policy on this Topic

“Criteria for Selecting New Partners for the Detroit Community-Academic Urban Research Center (URC)” (Revised and adopted January, 2002)

- Organizations with a health, human service and/or community development mission, operating in and working with one or more of the URC communities in southwest and eastside Detroit, that have a prior, positive working relationship with current URC partners.

- Organizations that are embedded in, well respected by, and/or involve staff from the communities in which they work.

- Organizations with a history of working on URC-affiliated projects and/or activities that emphasize prevention, family and community health issues, and/or enhancing community capacity building.

- Organizations that are interested in and willing to work within the overall goal (i.e., addressing social determinants of health) and specific priorities (i.e., access to quality health care, physical environment, violence prevention) established by the URC Board.

- Organizations that are willing to adapt and adhere to the operating norms and “Community-Based Participatory Research Principles” adopted by the URC Board.

- Organizations that are willing and have the capability to assign a representative and an alternate to be a member of the URC Board. The representative should have the authority in their organization to make decisions without having to go back to the leadership within the organization, or, at the least, have easy access to the leadership as well as their active and visible support of URC activities.

- Organizations that are willing to actively participate, through, for example, the involvement of one or more representatives, at the monthly URC Board meetings and on steering committees for specific URC-affiliated projects and attending and participating in national, regional or local conferences, workshops and meetings, as appropriate.

- Organizations that are willing and have the capability to facilitate ongoing, two-way communication between the partner organization and the URC Board that fosters collaboration, coordination, development of new projects and participation in special activities involving the URC partners.
Activity #1: Identifying Potential Partners for “Promoting Healthy Living” Project

Case Study: Your local health department, working with public health faculty persons from a nearby university, is developing a proposal in response to a federal Request for Applications (RFA). The RFA is seeking proposals that will develop effective interventions to increase physical activity in elementary school students in order to reduce childhood obesity. A community-based participatory research model must be used, involving key partners from sectors relevant to the topic.

Task: In small groups, brainstorm which community and institutional partners from your setting should be invited to participate in this partnership and why. In addition, list some of the pros and cons associated with these choices.

Use the following questions for discussion during and after the brainstorming:

- What kind of agencies should be invited? What kinds of academic departments should be invited?
- Who decides who is invited?
- Is membership comprised of individuals or organizations?
- How is “community” defined and who is able to “represent” the community?
- How many members do you want on your partnership? How many is too many? Not enough?
- How will members be invited?
- Why would individuals and organizations want to get involved with this partnership?

Groups will report on which community institutional organizations and/or individuals they selected and the main points of their discussion.

Resources for Community-Based Participatory Research
from Community-Campus Partnerships for Health (CCPH)—www.ccph.info

Online Clearinghouse
CCPH maintains a collection of relevant resources and information relevant to CBPR partnerships including sample CBPR course syllabi, peer-reviewed journal publications, and announcements of related projects and events. Visit the website at: http://depts.washington.edu/ccph/commbas.html

Electronic Discussion Group
CBPR Listserv: This listserv was launched in June 2004 through a partnership between CCPH and the Wellesley Central Health Corporation to serve the growing network of people involved and interested in CBPR. We hope this listserv will provide a resource for sharing knowledge and experience and contribute to strengthening the field of CBPR and ultimately improving the health of communities. To subscribe, go to: https://mailman.u.washington.edu/mailman/listinfo/cbpr.

Funding
The Directory of Funding Sources for CBPR: Published by CCPH and the Northwest Health Foundation in June 2004, this directory includes funding agency descriptions, deadlines, contact information, examples of previously funded CBPR projects, and an annotated listing of funding resource websites. The directory is available on the CCPH website at http://depts.washington.edu/ccph/pdf_files/directory-062704f.pdf

Policy Guide
Speaking Truth, Creating Power: A Guide to Policy Work for Community-Based Participatory Research Practitioners: Authored by CCPH Fellow Cassandra Ritas, this tool-kit is designed for community-based participatory research institutional and community partners who want to create or change policies that affect health in their communities. The guide is available on the CCPH website at http://depts.washington.edu/ccph/pdf_files/ritas.pdf.

Faculty Promotion and Tenure
The most frequently cited barrier to faculty conducting CBPR is the risk associated with trying to achieve promotion and tenure. CCPH maintains a resource web page including items such as sample faculty promotion and tenure policies that recognize CBPR as scholarship. Visit this page at: http://depts.washington.edu/ccph/scholarship.html

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