# Determining Your Purpose and Choosing Partners

Once you have identified problem areas and gaps in your TB program's services and set priorities (see Chapter 4: *How Well Do You Know Your Environment?*), it is important to clarify six elements associated with partnership formation.

#### Your Partnership's Overall Purpose

Your partnership's overall purpose needs to:

- Clarify the geographic area the partnership will cover
- Clearly identify the scope of work your partnership will undertake
- Be broad enough for partners to jointly determine the most effective ways to accomplish the purpose

## Some Purposes Undertaken by TB Partnerships around the Country

- Develop and help to implement a comprehensive statewide TB elimination plan
- Review and recommend revisions to state TB rules and regulations
- Analyze and address TB outbreaks occurring in homeless populations
- Develop and implement programs and services for high-risk populations born outside the United States
- Create and implement a strategic plan for screening and appropriately treating at-risk incarcerated populations

### Six Elements Associated with Partnership Formation

- Your partnership's overall purpose
- Types of partnerships you will use
- Level of support within your agency for partnering
- Resources you can dedicate to your partnering efforts
- Characteristics of effective partners
- · Recruitment of effective partners

Some partnerships' overall purposes have addressed a variety of health issues encountered by high-risk populations, while others have addressed TB-specific issues. Both types of partnerships have been formed at the local, state, regional, national, and international levels.

When accomplished, your partnership's purpose will have significant impact on TB prevention and control efforts in your area, allowing you and your partners to feel that your time was well spent.

#### Types of Partnerships You Will Use

Once you have determined your partnership's purpose, you are ready to choose the type of partnership that will best meet your needs. Many types of partnerships have been successful in strengthening TB prevention and control efforts. The partnership models most commonly

The TB Education and Training Network (TB ETN) is an example of a formal network whose members are TB professionals representing a variety of stakeholder organizations. Additional information about TB ETN can be accessed at www.cdc.gov/tb/TBETN.

used in public health include <u>networks</u>, <u>task forces</u>, <u>advisory committees</u>, <u>coalitions</u>, and <u>collaborations</u>. Partnerships may begin as one type, and evolve over time to become more consistent with another type or combination of types.

The following descriptions are provided to help you decide which partnership type or combination of types would best fit your circumstances. They are presented in ascending order of both complexity of purpose and complexity of linkages among members.

TB Networks: Information-sharing partnerships	The primary purpose of a TB network is to promote the exchange of information and ideas. Network membership can be formal or informal. Networks do not usually demand significant time or effort from their members; instead, they assist members in carrying out their individual work.
TB Task Forces: Partnerships for short-term problem resolution	A TB task force is often used to coordinate an intense, short-term effort that requires input from many diverse groups. Partners agree to complete a specific and well-defined task within a specified period of time.
	Task forces are most often formed to resolve a specific problem or crisis. Examples include TB transmission in correctional facilities and high rates of drug resistance in specific populations. Problem resolution is often given in the form of recommendations or a report written jointly by task force members. Once the well-defined task has been completed, the task force may dissolve, or it may choose to become a more comprehensive partnership addressing broader concerns.
TB Advisory committees: Joint planning and strategizing partnerships	The purpose of a TB advisory committee is to provide valuable input and constructive criticism that will improve TB service delivery and program outputs. Members usually have diverse areas of expertise and come from a variety of TB stakeholder groups. They use their combined knowledge and skills to review, plan, and evaluate a specific agency's TB strategies, activities, and impact.

# **TB Coalitions:**Joint planning and coordinated action

The purpose of TB coalitions is to provide a forum where organizations addressing TB who might normally compete and duplicate efforts can work together cooperatively. Members undertake joint planning and coordinated action. Building a coalition requires sustained effort and the forging of long-term commitment among its members.

Coalition goals often include raising awareness, implementing specific campaigns or projects, and improving services. Often, a TB coalition works on several activities at once through various subcommittees or task forces. The TB coalition serves as an umbrella organization to set agendas, solicit funding, handle marketing and publicity, and evaluate the progress of its subcommittees or task forces.

Additional aspects that appear common to most coalitions include:

- Communication channels are formally established with partners' interactions occurring in structured settings such as meetings.
- Authority and accountability for conducting coordinated actions usually falls on individual organizations.
- Members pool their talents and resources.
- Members develop and demonstrate widespread public support for their issues and actions.

# **TB Collaborations:** Joint planning for collaborative action

The purpose of TB collaborations is to bring together diverse stakeholder groups to address problems that no one member can resolve in isolation. Partners develop common goals and strategies, as well as a shared responsibility for creating the structures needed to implement them. It is a complex partnership consisting of well-defined, mutually beneficial relationships. Partners tend to have the full backing of their individual organizations. Resources are pooled or jointly secured for longer-term efforts.

Collaborations are similar to coalitions, but with the following distinctions:

- Coalitions tend to bring together organizations with pre-existing common goals. Collaborations bring together organizations to create common goals.
- In coalitions, member organizations tend to maintain their pre-existing visions and approaches to their work. In collaborations, member organizations tend to align their visions and approaches with those developed by the collaboration.
- In coalitions, interaction tends to take place in structured settings, such as coalition meetings. In collaborations, communication and interaction among partners also frequently occurs informally between meetings.

#### **Level of Support for Partnering within Your Agency**

Whether you have decided to join an existing partnership or create a new one, it is essential to have the support of your agency's key decision makers for your partnership efforts.

#### Tips and Strategies

The following are approaches that your colleagues have used to obtain ongoing support for their partnership efforts:

- Assess your agency's current level of commitment to TB partnerships. Use the assessment as a guide for creating strategies to gain the support of your agency's key decisionmakers. The assessment will also help you to anticipate and address issues associated with how the partnership will interact with your agency. (See Chapter 16: *Toolkit*, "Assessing Your Agency's Commitment Worksheet.")
- Demonstrate how the partnership will help to access missing resources that are essential to TB prevention and control efforts in your area.
- Show the likely cost, in terms of dollars, political fallout, and human suffering if the partnership is not undertaken.
- Provide a monetary value for the in-kind expertise and services that will be provided through the partnership.
- Show the value to your agency of intangibles, such as trust and goodwill, that will be generated by the partnership.

#### Things to Keep in Mind

It is easy to forget how important it is to sell the value of your partnerships to your own agency. You may find it helpful to enlist the support of a trusted colleague agency to assist you with this effort.

#### **Resources You Can Dedicate to Your Partnering Efforts**

Resources are limited. Accurately assessing the resources you can dedicate to partnering is important. Sharing this information when recruiting new partners ensures they enter the partnership with an accurate understanding of your capabilities. This understanding will minimize partners' unmet expectations and future frustrations.

#### Tips and Strategies

Exploring the following areas may help you identify resources that could be dedicated to partnering:

 Consider how current staff responsibilities might be adjusted to incorporate partnering activities. • Consider how volunteers and interns might assist with your partnering efforts.

#### **Characteristics of Effective Partners**

A partnership is as good as the people who participate in it. Therefore, recruiting is one of the single most important partnership activities you will undertake. Good partners are the foundation upon which your partnership's future accomplishments are built.

#### What Is a Good Partner?

A good partner is someone who will work cooperatively, effectively, and efficiently with you and other partners. Characteristics associated with good partners include:

- They see themselves as TB stakeholders and understand that eliminating TB is a group effort. As such, they want to find and implement solutions, rather than see you as solely responsible for improving things. They are team players who want the partnership to succeed.
- They are committed to developing culturally appropriate prevention and control
  programs. They recognize the importance of diverse perspectives and strive
  to understand others' perceptions. They work respectfully with all partners,
  especially when addressing differences.
- They see the big picture. They tend to be both optimistic and pragmatic, believing that progress can be made even in the toughest of times. They arrive at conclusions and make decisions by analyzing data and gathering facts. They respond to rational arguments and do not etch their points of view in stone. They are willing to learn and grow as they go, and they tend to be patient when people make mistakes.
- They tend to enjoy working for the greater good. They find making a positive contribution intrinsically satisfying. They value productivity and efficiency more than they value personal recognition and rewards.

You may be asking yourself, "Do such people really exist?" The answer is "Yes," and they are involved in TB partnerships around the nation. The secret to finding good partners is investing sufficient time in your recruiting process. This usually requires a brief individual meeting with potential partners to pitch the partnership and explore their interests and concerns. This meeting will let you and your potential partner know whether your partnership is likely to be a good fit for them. (See Mutual Selection Process in Chapter 3: What Successful Health-Related Community Partnerships Have in Common.)

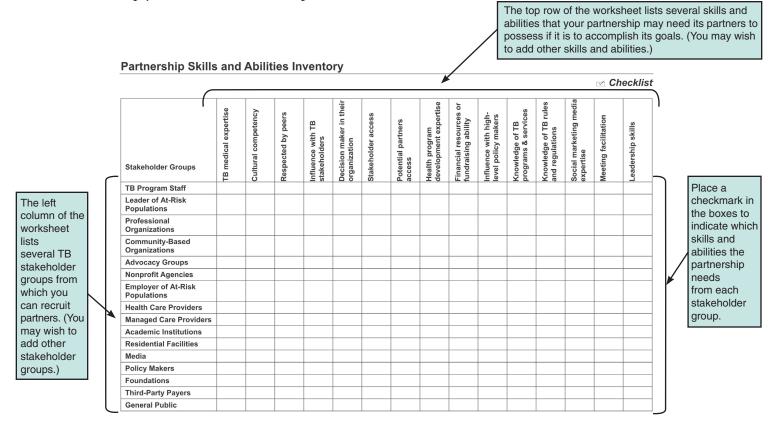
#### Things to Keep in Mind

Most partnerships include a few individuals who may not score very high on the characteristics associated with good partners. With dedicated leadership, you can develop operating norms and structure protocols that encourage all partners to work well together. (See **Operating Norms and Decisionmaking Protocols** in Chapter 3: What Successful Health-Related Community Partnerships Have in Common, as well as Chapter 6: Creating a Sense of Ownership, and Chapter 7: Making Progress and Making Decisions: Structure and Decisionmaking Issues.)

#### **Recruitment of Effective Partners**

When forming your partnership, it is often helpful to start by recruiting one or more partners who can help you to recruit others. It is essential that those doing your recruiting score high on the characteristics associated with a good partner. Using the information provided in Chapter 3: What Successful Health-Related Community Partnerships Have in Common, as well as your epidemiological profile and TB stakeholder information (see Chapter 4: How Well Do you Know Your Environment?) may assist you in this process. Your initial partners can work with you to

• Identify the skills and abilities that your partnership needs to succeed The *Partnership Skills and Abilities Inventory* checklist, included in the Toolkit, can help you to recruit effective partners.



General definitions for some of the skills and abilities listed across the top of the worksheet (e.g., cultural competency, <u>social marketing</u>, and leadership skills) are included in the glossary. However, the specific knowledge and skills associated with each category on the checklist are determined by your partnership's purpose and goals. For example, a partnership focusing exclusively on TB in children may require TB medical expertise that differs from that of a partnership focusing on adults. Thus, it may be helpful for you to discuss and document your own detailed definitions for some of the skills and abilities categories.

Reviewing the completed *Partnership Skills and Abilities Inventory* checklist with initial partners will provide you with a fairly complete picture of their skills and abilities. More importantly, it will help you identify the missing skills and abilities your partnership needs to succeed.

#### • Identify potential partners with these skills and abilities

Use the *Partnership Skills and Abilities Inventory* checklist to begin identifying people you know who fit the descriptions. When you draw a blank, identify people who can make recommendations. Looking at the list of TB stakeholder groups you developed in Chapter 4: *How Well Do You Know Your Environment?* may help.

#### Recruit the best partners

Whenever possible, it is helpful to have a face-to-face meeting to recruit potential partners. Be prepared to answer questions. Common questions include how much of their time is required and for how long.

When meeting with leaders of high-risk populations, the following approach may be helpful:

- Talk with the leader to get a better understanding of the population and its primary health care concerns.
- Explain how TB is impacting the population, including the problems families may encounter if <u>active TB disease</u> is not quickly identified and treated.
- Understand the leader's perspective on the main barriers to addressing TB in the population.
- Discuss whether the leader would be willing to work with you to address these barriers, including working with the partnership.
- Explain why the leader's participation is important.

#### Things to Keep in Mind

 Be sure your recruiting efforts are consistent with the culture of those you are trying to reach. In communities where communication is more formal, consider

- sending a letter to potential partners before calling to ask for a meeting (see Toolkit, *Sample Letter to an At-Risk Community Leader*).
- Essential partners, such as respected leaders of high-risk populations, may not be able to meet during your normal business hours. If you want them to participate, be flexible about when partnership meetings are held.
- Recruiting is an ongoing process, not a one-time occurrence. Always be on the lookout for good partners.
- Do not be too formal about partners' terms.
   Do you really want a valuable member to rotate off after a year if he or she is willing to stay and contribute?
- Some partners will be formally representing organizations that may wish to decide the length of terms their representatives should serve.
- People can support the partnership without being members. Seek creative ways to involve people.

### Perspectives from a rural public health nurse who launched a tri-county TB partnership:

"My advice is just pick a date and invite the people you think need to be there. Distance is a big deal to us, so we chose something equidistant. Schedules were too hard to coordinate for the first meeting so we made it a 7:00am breakfast and promised not to go over two hours.

"I didn't spend a lot of time agonizing about it. We didn't have an agenda. I just called people and basically said three things: We have some of the same clients, I am concerned about TB, and I would like to hear what you think about it.

"I was amazed by how many people came. We had physicians, nurses, community groups, and a person that I thought might volunteer. Some of us didn't know each other very well so we spent some time on that. Then, we talked and decided we really needed to start with some physician education.

"We didn't make it too difficult; we all did a little and the volunteer really helped. We knew our communities so we knew what would work.

"Then we decided to work with the high-risk, which is pretty much one group in our area. We have been doing that for about two years and just got a grant for targeted testing. Occasionally we hit some snags, but we get through them."

If potential partners continually tell you what you need to do about TB rather than exploring what you might do together, they probably are not a good fit with your partnership at this time.

#### **Related Resources**

• CDC. CDC's Response to Ending Neglect: The Elimination of Tuberculosis in the United States. Atlanta, GA: US Department of Health and Human Services, CDC; 2002. www.cdc.gov/tb/pubs/iom/iomresponse/

This 61-page document presents a TB elimination plan organized around six goals that frame TB elimination efforts in the context of recommendations made by the Institute of Medicine.

- The Centers for Disease Control National Prevention Information Network Website www.cdcnpin.org
  - This website can help you locate possible TB stakeholders groups in your area. Visit the website and select "Search for: Organizations." You will find descriptions of more than 19,000 national, state, and local organizations that provide resources and services related to HIV/AIDS, STDs, and TB. For additional TB tools and resources, visit the CDCNPIN Website and select "Tuberculosis."
- CDC. Progressing toward tuberculosis elimination in low-incidence areas of the United States: recommendations of the Advisory Council for the Elimination of Tuberculosis. *MMWR* 2002; 51 (No. RR-5). www.cdc.gov/mmwr/preview/mmwrhtml/rr5105a1.htm
- CDC. Recommendations for prevention and control of tuberculosis among foreign-born persons: report of the Working Group on Tuberculosis Among Foreign-Born Persons. MMWR 1998; 47 (No. RR-16).
   www.cdc.gov/mmwr/preview/mmwrhtml/00054855.htm
- CDC. Division of Tuberculosis Elimination. *TB Elimination, Now Is the Time*. Atlanta, GA.
  - This CDC pamphlet can serve as a call to action with partners. It provides background information on TB that laypeople can understand. The most current version of this pamphlet is available at www.cdc.gov/tb/pubs/nowisthetime/.