

Community Research Collaboration

Partnership Assessment Tools

The California Breast Cancer Research Program (CBCRP) believes that communities affected by breast cancer can take a leading role in the research process. Since 1997, our Community Research Collaboration (CRC) awards have funded community organizations--such as breast cancer advocacy groups, community clinics, and other women's health organizations —to work in teams with well-trained, experienced research scientists. Together, the teams decide which breast cancer questions are most important to them, determine how to study these questions, gather and interpret data, and communicate findings to other community members, scientists, and the public.

Collaborative research takes time, patience, commitment, and even a sense of humor! Our own evaluations have discovered that those teams who have the best collaborative process, and include lay community members and staff and board members from the community-based organization have the most robust outcomes from their studies, including widespread dissemination and impact with their research results. In order to help the collaborations strengthen and stay abreast of any potential problems, we offer this packet of partnership assessment tools. These tools can be used in whole or in-part, anonymously or openly in a meeting or on retreat. We encourage all the CRC teams to focus equally on the partnership, as well as the science.

By combining the knowledge and interest of communities with the expertise and resources of research scientists, CRC award teams are making real the CBCRP's vision of funding innovative and important research that will reduce the suffering caused by breast cancer.

ASSESSING THE CCPH PRINCIPLES OF PARTNERSHIP IN A COMMUNITY-CAMPUS PARTNERSHIP

Authored by Julie Bell-Elkins, Director, Office of Social Issues and Wellness, Framingham State College, <u>ibeboston@yahoo.com</u> as part of her doctoral dissertation, Case Study of a Successful Community-Campus Partnership: Changing the Environment Through Collaboration, 2002.

Principle One

Partners have agreed upon mission, values, goals, and measurable

outcomes for the partnership.

1a. There is a written mission statement that has been agreed upon by

all members of the partnership.

____ yes ___ no

- 1b There is a written mission statement that is accessible to all members of the partnership.
- ____ yes ___ no
- 1c Goals of the group are written and have been agreed upon by all members of the partnership.
- ____ yes ___ no
- 1d The group identifies measurable outcomes for the partnership on an annual basis.
- ____ yes ___ no
- 1e The outcomes are in writing and accessible to group members.
- ____ yes ___ no

- 1f Partners verbally reflect a common mission and goals through interactions with other in the community.
- ____ yes ___ no
- 1g The mission, goals, and outcomes are revisited on an annual basis.
- ____ yes ___ no

Principle Two

The relationship between partners is characterized by mutual trust, respect, genuineness, and commitment.

2a Members address each other respectfully in meetings by making eye contact with each other.

____Never true _____rarely true _____unsure ____usually true _____always true

2b Members refer to each other respectfully in the group by using parallel titles or names. (i.e., everyone uses titles or everyone uses first names).

____Never true _____rarely true _____unsure ____usually true _____always true

2c The formal leaders of the partnership addresses group members in a respectful manner by using names or titles.

____Never true _____rarely true _____unsure ____usually true _____always true

2d Verbal and non-verbal cues are in synch when talking about others.

(i.e., individuals shake their heads in agreement when they verbally say "ves", etc.)

___Never true _____rarely true _____unsure ____usually true _____always true

2e Members consistently participate and follow through on tasks.

____Never true _____rarely true _____unsure ____usually true ____always true

Principle Three

The partnership builds upon identified strengths and assets, but also

addresses areas that need improvement.

3a Members of the partnership are able to identify the strengths of the group in written documents, interviews, or oral presentations.

____Never true _____rarely true _____unsure ____usually true _____always true

3b The group is willing to examine issues raised by members.

____Never true _____rarely true _____unsure ____usually true _____always true

3c The group is willing to re-addresses unresolved issues.

____Never true _____rarely true _____unsure ____usually true _____always true

3d The group sets priorities for what should be accomplished based on member needs.

____Never true _____rarely true _____unsure ____usually true _____always true

3e The partnership works to expand the depth or breadth of what the partnership is good at over time.

____Never true _____rarely true _____unsure ____usually true ____always true

Principle Four

The partnership balances power among partners and enables resources among partners to be shared.

4a Members of the partnership that have resources (i.e., money, equipment, support staff, expertise) share the resources with the group.

____Never true _____rarely true _____unsure ____usually true _____always true

4b Group members who have contacts and relationships outside the group share these resources with members.

____Never true _____rarely true _____unsure ____usually true ____always true

4c The campus and the community share power, leadership, and resources.

____Never true _____rarely true _____unsure ____usually true _____always true

Principle Five

There is clear, open and accessible communication between partners. Members make it an ongoing priority to listen to each other. The group has developed a common language that clarifies the meaning of terms, events, or incidents.

5a Members refer to activities, events, or actions with similar jargon.

____Never true _____rarely true _____unsure ____usually true _____always true

5b All group members are familiar with the methods to raise issues within the partnership.

____Never true _____rarely true _____unsure ____usually true _____always true

5c Members have methods of communicating with each other outside the group (i.e., emails, written minutes, phone calls).

____Never true _____rarely true _____unsure ____usually true _____always true

5d Members ask questions and ask for clarification in the group if interactions, information, or events are unclear.

___Never true _____rarely true _____unsure ___usually true ____always true

Principle Six

Roles, norms, and processes for the partnership are established with the input and agreement of all partners.

6a Members of the group created the leadership of the group (i.e.,

appointed, elected, chosen).

____Never true _____rarely true _____unsure ____usually true _____always true

6b Members of the partnership have formed group norms about

patterns of communication and decision-making.

____Never true _____rarely true _____unsure ____usually true _____always true

6c Group members are familiar with the process of decision making in the group.

___Never true _____rarely true _____unsure ____usually true _____always true

Principle Seven

There is feedback to, among, and from all stakeholders in the partnership,

with the goal of continuously improving the partnership and its outcomes.

7a Partnership meetings reflect an open exchange of ideas between members.

____Never true _____rarely true _____unsure ____usually true _____always true

7b The goal of the meetings is focused on improving the partnership and its outcomes.

____Never true _____rarely true _____unsure ____usually true ____always true

7c Active members represent various constituencies in the partnership.

__Never true _____rarely true _____unsure ____usually true _____always true

7d A diversity of participants interact verbally at the meetings.

____Never true _____rarely true _____unsure ____usually true _____always true

7e Non-verbal language is consistently reflected with verbal

comments, (i.e., members shake head in agreement and then follow-up

with verbal comments that support their non-verbal nods of agreement)

___Never true ____rarely true ____unsure ___usually true ____always true

Principle Eight

Partners share the credit for the partnership's accomplishments.

8a When talking about accomplishments with the group, leaders share

the credit with members of the group.

____Never true _____rarely true _____unsure ____usually true _____always true

8b When formal group leaders talk about the partnership outside the

group, credit is shared for accomplishments.

____Never true _____rarely true _____unsure ____usually true _____always true

8c When members of the group write about partnership

accomplishments, various contributors are listed.

____Never true _____rarely true _____unsure ____usually true _____always true

Principle Nine

Partnerships take time to develop and evolve over time.

Meeting minutes or other group documents reflect a positive 9a evolution within the partnership. ____Never true _____rarely true _____unsure ____usually true _____always true 9b The partnership has been formed to be on-going group. Never true rarely true unsure usually true always true 9c There is adequate structure and commitment on the part of the community and the campus to maintain an on-going partnership. Never true rarely true unsure usually true always true 9d Campus and community leaders demonstrate commitment to the partnership over time through attendance at meetings, and by making contributions to support the mission of the partnership. Never true rarely true unsure usually true always true

Principle Ten

The partnership is a *community*-campus partnership.

- **10a** Partnership meetings are held at a location in the community.
- ___yes ___no
- 10b Community leaders are viewed as leaders of the partnership.
- ____Never true _____rarely true _____unsure ____usually true _____always true
- 10c The campus is committed to educating its students to be good neighbors.

____Never true _____rarely true _____unsure ____usually true _____always true

10d Members of the partnership view the group as a community committee not a campus committee.

____Never true _____rarely true _____unsure ____usually true _____always true

10e Formal leadership (mayor, selectman, council members) within the community support the partnership.

____Never true _____rarely true _____unsure ____usually true _____always true

10f The campus communicates the importance of forming and sustaining a partnership with the community through its commitment of resources

____Never true _____rarely true _____unsure ____usually true _____always true

10g The community communicates the importance of forming and sustaining a partnership with the campus through its commitment of resources.

____Never true _____rarely true _____unsure ____usually true _____always true

10h Community and campus leaders allocate resources to collaborate on community issues.

____Never true _____rarely true _____unsure ____usually true _____always true

GUIDELINES FOR PARTICIPATORY RESEARCH IN HEALTH PROMOTION

George MA, Daniel M, Green LW. Appraising and funding participatory research in health promotion. *Int Q Community Health Educ.* 1998-99;18 (2):181-197.

Presented below are guidelines intended for use by grant application reviewers to appraise whether proposals for funding as participatory research meet participatory research criteria. These guidelines can also be used as a checklist by academic and community researchers in planning their projects. The methods used in developing these guidelines are found in Appendix B.

As presented, the instrument employs what may be considered a generic set of guidelines that define participatory research. These guidelines represent a systematic attempt to make explicit and thus observable and possibly measurable the principles and defining characteristics of participatory research, from the perspective of health promotion. By objectifying these principles and characteristics, the guidelines will not find uniform favour with all those who advocate a more unstructured form of participatory research. Nevertheless, if participatory research is to be funded as *research*, it is necessary (for reasons discussed earlier) to make as explicit as possible the essential components of the process.

In attempting to ascribe specificity and concreteness to participatory research practice, the guidelines risk denying the very essence of leaving the agenda open for local adaptation of the research. We therefore avoided attaching a single summative scoring procedure to the guidelines and we caution the user that some of the classification categories do not follow a simple hierarchy from weak to strong participatory research. For example, guideline number 1f suggests that "community participants should be able to contribute their physical and/or intellectual resources to the research process." The categories range from "no enabling of contribution from participants (researchers do it all)" to "full enabling of participants' resources (researchers act only as facilitators)." The latter category is not necessarily better than some of the middle categories, depending on the relationship called for or negotiated by the parties involved, including community members, researchers and funding sponsors (Labonté, 1993). Another example of the need to decide on the appropriate weight to be given categories within guidelines is number 6a: "Do community participants benefit from the research outcomes? At one end of the categories is "research benefits researchers or external bodies only." At the other is "research benefits community only." A preferable arrangement to the latter might be one of the middle categories in which both benefit.

This leaves open the choice of classification procedures and weights to the funding agency or project collaborators according to the relative importance they would attach to the various dimensions and to the categories within each criterion or guideline.

GUIDELINES AND CATEGORIES FOR CLASSIFYING PARTICIPATORY RESEARCH PROJECTS IN HEALTH PROMOTION

Definition

Participatory research is defined as systematic inquiry, with the collaboration of those affected by the issue being studied, for purposes of education and taking action or effecting change.

Instructions

The following guidelines can serve to appraise the extent to which research projects align with principles of participatory research.

For each guideline, check only one box. Some of the guidelines may not be applicable to the research project, in which case no boxes should be checked, or boxes labelled "Not Applicable" should be added to all the guidelines for users to check when appropriate. The categories identified by boxes for most guidelines increase in appropriateness to participatory research from left to right, but the most appropriate level for some projects on some guidelines might be more toward the middle or even to the left of the row of boxes.

Guidelines

1. Participants and the nature of their involvement:

a) Is the community¹ of interest clearly described or defined?

, ,	,								
no description	inexplicit/general description	general description but explicit	general /detailed description	detailed description					
(b) Do members of t the issue?	he defined communi	ty participating in the	e research have conc	ern or experience with					
no concern or experience with the issue	little concern or experience with the issue	moderate concern or experience with the issue	much concern or experience with the issue	high concern or experience with the issue					
(c) Are interested r research process		ined community pro	ovided opportunities	to participate in the					
no opportunity to participate	little opportunity to participate	more than one opportunity to participate	several opportunities to participate	many opportunities to participate					
(d) Is attention given to barriers to participation, with consideration of those who have been under- represented in the past?									
no attention to offsetting barriers	low degree of attention to offsetting barriers	moderate degree of attention to offsetting	moderate/high degree of attention to offsetting	high degree of attention to offsetting barriers					

barriers

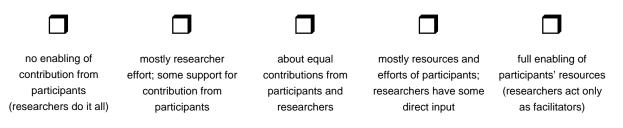
barriers

¹ The term *community* is defined in this context as any group of individuals sharing a given interest; this definition includes cultural, social, political, health and economic issues that may link together individuals who may or may not share a particular geographic association. This definition also includes the traditional concept of community as a geographically distinct entity.

e) Has attention been given to establishing within the community an understanding of the researchers'² commitment to the issue?

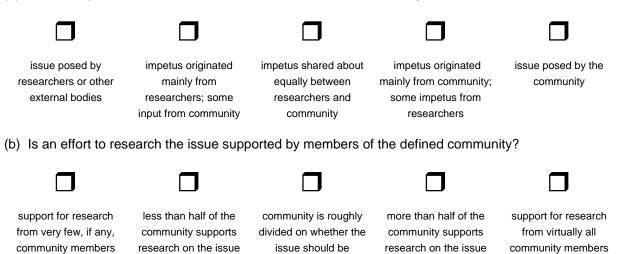


(f) Are community participants enabled to contribute their physical and/or intellectual resources to the research process?



2. Origin of the research question:

(a) Did the impetus for the research come from the defined community?



researched

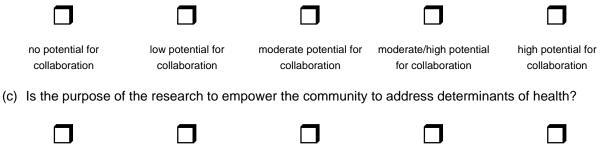
² Though the general term *researcher* can refer to both the community participants involved and external persons with specialised training, this usage of *researcher* refers to external persons with specialised training in research methods. In a theoretical sense the collaboration of people in participatory research makes artificial the distinction of specialised *researchers*.

3. Purpose of the research:

(a) Can the research facilitate learning among community participants about individual and collective resources for self-determination?

no provision for learning process	low provision for learning process	moderate provision for learning process	moderate/high provision for learning process	high provision for learning process

(b) Can the research facilitate collaboration between community participants and resources external to the community?



purpose devoidlow prioritymoderate prioritymoderate/highhigh priorityof empowermentempowerment objectiveempowermentpriority empowermentempowerment objectiveobjectiveobjectiveobjectiveobjective

(d) Does the scope of the research encompass some combination of political, social and economic determinants of health?

no consideration of	only one or two	limited consideration of	moderate consideration	comprehensive
political, social or	determinants are	combined determinants	of combined	consideration of
economic determinants	considered	of health	determinants of health	combined determinants

4. Process and context-methodological implications:

(a) Does the research process apply the knowledge of community participants in the phases of planning, implementation and evaluation?





analytic issue

analytic issues

three analytic issues

analytic issues

5. Opportunities to address the issue of interest:

(a) Is the potential of the defined community for individual and collective learning reflected by the research process?



research benefits research benefits about equal benefit of research benefits explicit agreement on research for both researchers or external researchers/ external community primarily; how the research will bodies only bodies primarily; researchers/external benefit is secondary for benefit the community community benefit is bodies, and community researchers/ external secondary bodies

(b) Is there attention to or an explicit agreement for acknowledging and resolving in a fair and open way any differences between researchers and community participants in the interpretation of the results?



agreement regarding

interpretation issues

low attention to

interpretation issues

moderate consideration of interpretation issues

high attention to interpretation issues; no explicit agreement

explicit agreement on interpretation issues

(c) Is there attention to or an explicit agreement between researchers and community participants with respect to ownership of the research data?









no attention to or any agreement regarding ownership issues

low attention to ownership issues

moderate consideration of ownership issues

high attention to ownership issues; no explicit agreement

explicit agreement on ownership issues

(d) Is there attention to or an explicit agreement between researchers and community participants with respect to the dissemination of the research results?











no attention to or any agreement regarding dissemination issues

low attention to dissemination issues

moderate consideration of dissemination issues

high attention to dissemination issues; no explicit agreement

explicit agreement on dissemination issues

MODEL GUIDELINES FOR NONPROFITS EVALUATING PROPOSED RELATIONSHIPS WITH OTHER ORGANIZATIONS

A nonprofit's reputation for integrity, credibility, social responsibility and accountability is its greatest asset. As relationships between governmental agencies, nonprofit organizations and for-profit organizations grow in number and complexity, it is important for non-profit organizations to have clear policies and procedures in place to ensure that the relationships and agreements they enter into and contributions they accept are ethical, promote the mission of the organization, do not involve conflicts of interest, and do not promote activities, organizations or interests that conflict with the organization's goals.

These guidelines are intended to address the most common practical and ethical concerns raised by relationships with and contributions from other organizations. They are general in nature and not intended to address every situation. They reflect the conclusion that ethical issues can be raised by the nature of a partner or contributor as well as by the activity carried out through the partnership or as a result of the contribution. By adapting these guidelines to their own situation, nonprofit organizations can minimize the risk that they will inadvertently enter into relationships that could be publicly embarrassing, internally divisive and counterproductive to organizational goals.

These guidelines are drawn from a review of the literature on this subject. They are intended to help in evaluating a variety of relationships, including giving or receiving financial or in-kind contributions; cosponsoring meetings, programmatic activities, conferences or other events; collaborating or partnering in research, publications and similar projects; and permitting the use of a nonprofit's name or endorsement in cause-related marketing or similar agreements.

Considerations in Evaluating a Proposed Relationship

Fundamental questions to ask before entering a relationship include:

- Does the proposed activity and/or the proposed relationship promote the mission and values of our organization?
- Will the relationship promote or enhance activities or organizations whose goals are inconsistent with the mission and values of our organization?
- Will the relationship maintain our organization's reputation for objectivity, independence, integrity, credibility, social responsibility and accountability?

Answering these questions involves considering the reputation of the proposed partner, the partner's goals, the subject area of the relationship, the partner's role, and the potential positive and negative consequences of the relationship. It is also useful to assess the organization's evaluation process to ensure that the right questions will be asked and answered before commitments are made.

1. Nature of the Proposed Partner

It is important to consider the nature of a proposed partner – its mission, ethical standards and business practices – for two reasons:

- Relationships are based on mutual gain. Therefore, we are helping to advance our partner's cause or interests as well as our own. Before entering into a relationship, we should carefully consider how we are advancing our partner's interests and whether it is consistent with our mission to do so.
- We are judged by the relationships we form. If we associate ourselves with disreputable or unethical partners, our reputation and our ability to fulfill our mission may be seriously compromised.

Key questions about the nature of a potential partner include:

- Is the proposed partner one with which we would be proud to be publicly associated?
- Does the proposed partner share our mission and values?
- Can we stand behind the products, services and positions taken by the partner?
- Are the proposed partner's ethical and scientific standards and business practices consistent with ours?
- In the case of funding from a disreputable or unethical source, would we reject the gift if it
 were a smaller amount? If so, we should reject a larger gift as well, or acknowledge the
 price we have placed on our organization's integrity.
- Where a proposed partner has undertaken harmful or unethical activities in the past, and claims to be reformed, have we independently confirmed that it has genuinely reformed and is no longer involved in harmful activities?

2. Goals of the Proposed Partner

- Why does the partner want to work with us?
- Does the proposed partner hope to use our organization's name or its relationship with us to advance its public image, public policy agenda, or its marketing? If so, these goals of the partner should be consistent with our organization's mission and our reputation. Any use of our name should be spelled out in writing in advance to ensure that it is not used to advance an agenda inconsistent with our mission.
- Does the proposed partner expect that a relationship with us will help secure our support or our silence on activities or issues on which we do not agree? This is a strategy sometimes used by corporations attempting implicitly to "buy the silence" of potential critics.
- Is the proposed partner related to, or does it have a history of representing or advancing the interests of, an entity with which we would not partner directly? If so, we should consider the proposed relationship to carry with it an indirect relationship with that entity, and we should subject the proposed partnership to special scrutiny. The partnership should be rejected unless we are able to ensure that this indirect relationship will not raise the same ethical concerns or negative consequences as would a direct relationship. This situation arises most often in the context of parent, subsidiary and affiliated organizations.

3. Potential Conflicts of Interest Due to the Subject Area of the Proposed Relationship

 Does the subject area of the proposed relationship raise special conflict of interest concerns? Such conflicts occur, for example, when corporations involved in a potentially harmful activity seek to influence research, publicity or educational programs about its products or services.

4. Role of the Proposed Partner

- What role will the proposed partner play in the relationship?
- If it is a funding relationship, what "strings" or constraints are attached? Are those constraints justified as a matter of responsible philanthropy – for example, reporting and budget requirements?
- Is the partner attempting to move our organization in a particular direction in terms of the work we do? Is that consistent with our mission?
- Will the partner participate in the design, execution, evaluation or publicity of a project?
- Will the partner approve materials prior to publication?
- Is our independence, objectivity and credibility fully protected, in fact and in public appearance?
- Does our proposed partner have other unwritten expectations about its role in the relationship? If so, these should be identified and put in writing before the relationship is initiated.

5. Potential Consequences of the Relationship

- Are negative consequences foreseeable from this relationship? For example, a relationship that advances the interests of a partner devoted to marketing a harmful product or service, or engaged in unethical business practices, or devoted to racist or other disagreeable causes, all would have foreseeable negative consequences. By lending our name to such an organization through our association, we would be seen as partners in advancing a harmful agenda, seriously damaging our organization's reputation.
- Is the proposed partner the subject of a boycott or other campaign by environmental, human rights, public health, consumer or other groups? Would our partnership harm an organized effort to sanction or change the behavior of our proposed partner? If so, we should independently investigate the reasons why our proposed partner is in this position before proceeding, and carefully consider the potential harm our partnership could do to the campaign or boycott. We also should consider how our decision to partner with a controversial entity might affect our organization's reputation, morale and public image.
- How will this relationship affect other relationships of value to us? Will it affect our image, reputation, credibility, ability to raise funds or other important assets?

 Would we be comfortable if the details of this relationship appeared on the front page of a major newspaper?

6. The Evaluation Process

- How does our organization ensure that new relationships are fairly evaluated before we make commitments?
- How often are existing relationships reviewed to ensure that they remain consistent with our policies and mission?
- How do we ensure that evaluations are objective, and are not left to those who are most committed to forming a new relationship?
- What roles do staff play in evaluating relationships?
- At what point should our Board be involved in reviewing and approving relationships?

March 2000

References

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The Wilder Collaboration Factors Inventory

This questionnaire can help your group inventory its strengths on the factors that research has shown are important for the success of collaborative projects. The questionnaire is designed for use by people who are planning or participating in collaborative projects.

There are no right or wrong answers. Your opinion is important, even if it is very different from the opinions of others. When your group sees the results, you all will learn how people feel—whether they all feel the same or different about the questions.

Unless your group has decided to put names on the questionnaires, your answers will not be associated with your name and will be grouped with the answers of others.

Instructions

Please follow the instructions *exactly*. They are very simple:

- 1. Read each item.
- 2. Circle the number that indicates how much you agree or disagree with each item.
- 3. Do not skip any items.
- 4. Return your form as instructed by your group leader or facilitator.

You might want to do something a bit differently, but we have learned from experience that your group will get the most benefit if you fill out the questionnaire as the instructions describe. Some special situations:

"Don't know"

If you feel you don't know how to answer an item, or that you don't have an opinion, circle the "neutral" response, the number 3.

Opinion falls "in between two numbers"

If you feel that your opinion lies in between two numbers, pick the lower of the two. Do not put a mark in between the two numbers; and do not circle both of them. For example, if you feel your opinion lies between 1 and 2, circle the 1.

The Wilder Collaboration Factors Inventory was developed by Wilder Research Center and is distributed by Wilder Publishing Center, to accompany *Collaboration: What Makes It Work*. Purchasers of *Collaboration: What Makes It Work, Second Edition,* may photocopy this inventory *for use only with their collaboration.* Separate copies of the inventory, professionally packaged and designed for distribution to members of the collaboration, are also available from Wilder Publishing Center; see ordering information at the back of this book. Because these preprinted inventorries include substantial information about each of the factors, many groups find them more useful for spurring group discussion than simply photocopying the inventory from this book. Groups who use the instrument (in either form) are encouraged to notify Wilder Research Center in order to list their use and to become part of the mailing list for future updates or notices. Address: Wilder Research Center, Suite 210, 1295 Bandana Boulevard North, Saint Paul, Minnesota 55108, U.S.A. E-mail: research@wilder.org

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The Wilder Collaboration Factors Inventory

Name of Collaboration Project

Date

Respondent Name

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Organization

Include your name or the name of your organization on the line above.

Statements about Your Collaborative Group

Factor	Statement	Strongly Disagree	Disagree	Neutral, No Opinion	Agree	Strongly Agree
History of col- laboration or	 Agencies in our community have a history of working together. 	1	2	3	4	5
cooperation in the community	 Trying to solve problems through collaboration has been common in this community. It's been done a lot before. 	1	2	3	4	5
Collaborative group seen as a	 Leaders in this community who are not part of our collaborative group seem hopeful about what we can accomplish. 	1	2	3	4	5
legitimate leader in the community	4. Others (in this community) who are not part of this collaboration would generally agree that the organizations involved in this collaborative project are the "right" organizations to make this work.	1	2	3	4	5
Favorable political and	 The political and social climate seems to be "right" for starting a collaborative project like this one. 		2	3	4	5
social climate	6. The time is right for this collaborative project.	1	2	3	4	5
Mutual respect, understanding,	7. People involved in our collaboration always trust one another.	. 1	2	3	4	5
and trust	 I have a lot of respect for the other people in- volved in this collaboration. 	*	2	3	4	5
Appropriate cross section	 The people involved in our collaboration repre- sent a cross section of those who have a stake in what we are trying to accomplish. 	1	2	3	4	5
of members 11	 All the organizations that we need to be mem- bers of this collaborative group have become members of the group. 	1	2	3	4	5
Members see col- laboration as in their self-interest	 My organization will benefit from being in- volved in this collaboration. 	4 min	2	3	4	5

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actor	Statement	Strongly Disagree	Disagree	Neutral, No Opinion	Agree	Strong Agree
Ability to compromise	 People involved in our collaboration are will- ing to compromise on important aspects of our project. 	1	2	3	4	5
Members share	 The organizations that belong to our collabora- tive group invest the right amount of time in our collaborative efforts. 	1	2	3	4	5
a stake in both process and outcome	 Everyone who is a member of our collaborative group wants this project to succeed. 	1	2	3	4	5
	15. The level of commitment among the collabora- tion participants is high.	1	2	3	4	5
Multiple layers of participation	16. When the collaborative group makes major de- cisions, there is always enough time for mem- bers to take information back to their organizations to confer with colleagues about what the decision should be.	1	2	3	4	. 5
	17. Each of the people who participate in decisions in this collaborative group can speak for the en- tire organization they represent, not just a part.	1	2	3	4	5
Flexibility	 There is a lot of flexibility when decisions are made; people are open to discussing different options. 		2	3	4	5
	 People in this collaborative group are open to different approaches to how we can do our work. They are willing to consider different ways of working. 	1	2	3	4	5
Development of clear roles and policy guidelines	20. People in this collaborative group have a clear sense of their roles and responsibilities.	1	2	3	4	5
	21. There is a clear process for making decisions among the partners in this collaboration.	1	2	3	4	5
Adaptability	22. This collaboration is able to adapt to changing con- ditions, such as fewer funds than expected, chang- ing political climate, or change in leadership.	1	2	3	4	5
	23. This group has the ability to survive even if it had to make major changes in its plans or add some new members in order to reach its goals.	1	2	3	4	5
Appropriate pace of development	24. This collaborative group has tried to take on the right amount of work at the right pace.	1	2	3	4	- 5
	25. We are currently able to keep up with the work necessary to coordinate all the people, organi- zations, and activities related to this collabora- tive project.	1	2	З	4	5

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actor	Statement	Strongly Disagree	Disagree	Neutral, No Opinion	Agree	Strongly Agree
Open and frequent communication	26. People in this collaboration communicate openly with one another.	1	2	3	4	5
	27. I am informed as often as I should be about what goes on in the collaboration.	1	2	3	4	5
	28. The people who lead this collaborative group communicate well with the members.	1	2	3	4	5
Established informal	29. Communication among the people in this col- laborative group happens both at formal meet- ings and in informal ways.	1	2	3	4	5
relationships and communi- cation links	30. I personally have informal conversations about the project with others who are involved in this collaborative group.	1	2	3	4	5
	31. I have a clear understanding of what our col- laboration is trying to accomplish.	1	2	3	4	5
Concrete, attainable goals and objectives	32. People in our collaborative group know and understand our goals.	1	2	з	4	5
	33. People in our collaborative group have estab- lished reasonable goals.	1	2	3	4	5
Shared vision	34. The people in this collaborative group are dedi- cated to the idea that we can make this project work.	• • •	2	3	4	5
	35. My ideas about what we want to accomplish with this collaboration seem to be the same as the ideas of others.	1 1	2	3	4	5
Unique purpose	36. What we are trying to accomplish with our col- laborative project would be difficult for any single organization to accomplish by itself.	1	2	3	4	5
	 No other organization in the community is try- ing to do exactly what we are trying to do. 	1	2	3	4	5
Sufficient funds, staff, materials,	 Our collaborative group has adequate funds to do what it wants to accomplish. 	1	2	3	4	5
staff, materials, and time	39. Our collaborative group has adequate "people power" to do what it wants to accomplish.	1	2	3	4	5
Skilled leadership	40. The people in leadership positions for this col- laboration have good skills for working with other people and organizations.	1	2	.3	4	5
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Instrument for evaluating dimensions of group dynamics within community-based participatory research partnerships

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Abstract

We describe the development, adaptation, and use of evaluation approaches assessing key dimensions of group partnerships. A review of relevant literature describes the rationale for the evaluation of partnership dynamics, and the selection of relevant dimensions for evaluation and assessment. Three case studies are presented to illustrate the use of this evaluation instrument in community-based participatory research partnerships to assess key dimensions of partnership process. The use of evaluation results in self-assessment and partnership development are described and lessons learned in the application of these results are discussed. Finally, we discuss the potential, challenges, and areas for further development of evaluation tools to assess group dynamics in partnership efforts.

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1. Introduction

As attention to racial and ethnic disparities in health has burgeoned, researchers, funding agencies, and community groups have sought strategies to address these differential health outcomes. One such strategy involves engaging representatives from service providing, community-based, and academic organizations who pool expertise, resources and energies to address the complex public health problems that contribute to health disparities. Funding agencies, participants and evaluators have shown considerable interest in assessing such partnerships and their effectiveness in addressing public health problems (Butterfoss, Goodman, & Wandersman, 1996; Florin, Mitchell, & Stevenson, 1993; Francisco, Paine, & Fawcett, 1993; Green & Krueter, 1992; Lasker, Weiss, & Miller, 2001; Sofaer, 2000; Steckler, Orville, Eng, & Dawson, 1992; Tarlov et al., 1987). While our focus in this article is on evaluation partnership process to address public health concerns, the methods and instruments discussed may be readily applied to community-based participatory research (CBPR) partnerships addressing housing, environmental, or other issues.

While evaluation of the partnership process itself (e.g. the extent to which partnerships adhere to key principles of collaborative inquiry and action) has been advocated (Lasker et al., 2001; Sofaer, 2000), less attention has been given in the field to how to conduct such evaluations. More specifically, evaluators interested in evaluating partnerships find few assessment instruments available to them. In this manuscript, we describe the development and adaptation of an instrument for evaluating dimensions of group dynamics within CBPR partnerships. We present three case studies of evaluations designed to assess these group dynamics. Each evaluation focused on a participatory research partnership that sought to engage communities of identity in health promotion and disease prevention activities. We discuss the development and adaptation of the evaluation instruments to assess key aspects of the partnership process (e.g. relationships among group members, leadership), and the use of evaluation results as a tool for self-assessment. discussion and partnership development. We close with a discussion of the potential, challenges, and areas for further development of such instruments for evaluation.

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2. Community-based participatory research partnerships for health promotion

2.1. Community-based participatory research partnerships

Coalition approaches to intervention and research bring together partners with diverse perspectives and areas of expertise to promote health and prevent disease, often within a defined geographic area, e.g. a region or city (Butterfoss et al., 1996; Lasker et al., 2001). CBPR partnerships are one form of coalition, in which representatives from communities of identity, professional researchers and public health service providers work together to analyze and take action to address prioritized health concerns (Israel, Schulz, Parker, & Becker, 1998).¹ Communities of identity may coincide with geographically defined areas (e.g. an urban neighborhood), or may transcend physical locations (e.g. the Black community). The point is that members share an identity or sense of connection that provides the basis for analysis of collective concerns and generation of potential actions to address those concerns (Chaskin, 1997; Steuart, 1975).

Participatory approaches to research link the partners involved in both the development of knowledge and in efforts to address mutually identified concerns. Thus, within CBPR partnerships, representatives from communities of identity are actively engaged in and influence all aspects of the research process; and public health professionals (including researchers) are part of the problem solving and action components (Hatch, Moss, Saran, Presley-Cantrell, & Mallory, 1993; Israel et al., 1998; Schulz, Israel, Selig, Bayer, & Griffin, 1998). Such partnerships share the underlying assumptions that (1) diverse partners contribute different perspectives, expertise and resources in identifying and understanding community health concerns, and (2) these multiple perspectives and resources can be effectively engaged to develop solutions to those community health concerns.

2.2. Why evaluate group process in community-based participatory partnerships?

Ultimately, evaluators and funders must be concerned with the outcomes of CBPR partnerships—that is, their ability to achieve their objectives related to categorical health outcomes or the underlying social determinants of health. Community-based participatory partnerships explicitly seek to bring together groups of people who can combine resources and ideas to create solutions to health problems. They are founded on the principle that groups that come together, develop effective working relationships, and have synergy—defined as the ability to 'combine the perspectives, resources, and skills of a group of people and organizations' (Lasker et al., 2001, 183)—can work effectively together to address commonly defined issues or concerns. Therefore, community-based participatory partnerships have explicit objectives related to partnership formation, dynamics, relationships among group members, and collective action that are considered integral to the effectiveness of the group in attaining its outcomes (Israel et al., 1995).

Comprehensive evaluation of community-based participatory partnerships, therefore, includes attention to how a partnership functioned as a group to work toward those outcome objectives (e.g. whether and how multiple perspectives were engaged in the analysis and development of solutions) as well as the contributions of those working relationships to the ultimate outcomes or objectives (Israel et al., 1995). In other words, evaluation of process objectives (e.g. characteristics of the implementation process) and impact objectives (e.g. intermediary goals considered essential to the attainment of the outcome) (Rossi, Freeman, & Lipsey, 1999) are essential if we are to understand the contributions of the partnership itself to the attainment of the outcome objectives of the group. A challenge for evaluators is to design evaluation plans, processes and tools that offer insights into these processes and their ultimate implications for the group and the outcomes of interest.

In this article, we focus on the development and use of a tool for *evaluation of the partnership process* (process evaluation), assessing the extent to which the group guiding a CBPR effort adhered to principles or characteristics associated with effective groups (Johnson & Johnson, 1982, 1997), and the impact of those processes on group members' perceptions of the group (impact evaluation). We describe the use of such evaluations as mechanisms for participants to discuss, analyze, and take action to address concerns related to the group's working relationships (e.g. groups that identify ineffective leadership or lack of trust among members may take steps to address these problems and strengthen their ability to reach long-term goals).

In the following section, we describe a conceptual framework for assessing community-based participatory partnerships. This framework draws on a review of the literature on effective groups, as well as conceptual and empirical research on coalition and partnership models, to describe relationships between a group's dynamics (process objectives), perceptions of members of the partnership itself (impact objectives) and improved community health outcomes (outcome objectives) (Israel et al., 1995; Sofear, 2000).

2.3. Conceptual framework for assessing group dynamics as an aspect of CBPR partnerships

The guiding framework for the development of the evaluation instruments described in the following case

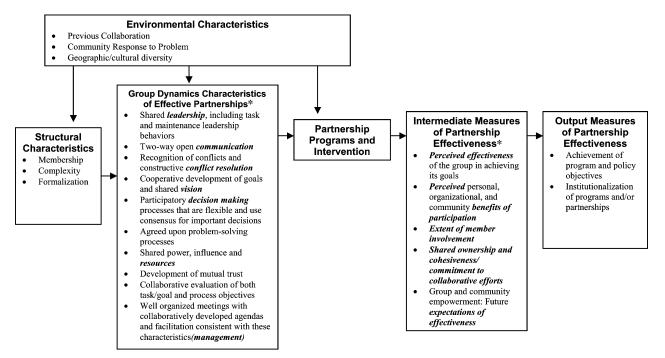
¹ Again, although our focus here is on CBPR partnerships to address health concerns, similar approaches may be applied to housing, transportation, the environment, or any number of other complex issues. The composition of the partnership and, particularly the service providers involved, may vary accordingly. However, the group dynamic principles and general framework presented here are applicable across a broad range of outcomes.

studies was the recognition that long-term partnership objectives would depend in large part on the effectiveness of the group in using its individual and collective resources to reach its goals and to satisfy the needs of group members. The areas selected for inclusion in the evaluation tool were based upon an extensive review of the group process literature at the time the first instrument was developed in 1985 (Blumberg, Hare, Kent, & Davies, 1983; Bradford, 1978; Johnson & Johnson, 1982; Shaw, 1981), and on a synthesis of the characteristics of effective groups developed by Johnson and Johnson (1982) that was used to prioritize the specific aspects of the group to assess. These components of effective groups (those that exhibit synergy) include, for example, shared leadership, open two-way communication, recognition of and constructive mechanisms for resolving conflicts, and high levels of trust and cohesion.

Fig. 1 shows these characteristics of effective groups within the context of a conceptual framework for assessing coalitions adapted from Sofaer (2000). Briefly, the ability of a partnership to reach its outcome objectives is seen as shaped by intermediate measures of partnership effective-ness, influenced by the partnership's programs and interventions. These are, in turn, shaped by the group dynamics characteristics of the partnership (called functional characteristics of the environment. The group dynamics characteristics are also shaped by the structural characteristics of the partnership,

including the members, and the environmental characteristics. The characteristics of effective groups that guided the development of the evaluation instruments described in this paper can be seen in Fig. 1 under the 'Group Process Characteristics of Partnership'. In addition, the instruments described here also assessed 'Intermediate Measures of Partnership Effectiveness', such as members' perceptions of the effectiveness, benefits, and costs of participation in the partnership, the extent of member involvement, and the extent to which members perceive the partnership to be able to be effective in the future.

The central characteristics of effective groups identified through the above review of the literature were used to guide the construction of the evaluation instruments. Specifically, items corresponding to each central characteristic (e.g. leadership, participation, communication) were drawn from existing questionnaires (Alexander, 1985; Burns & Gragg, 1981; Johnson & Johnson, 1982; Seashore, Lawler, Mirvis, & Cammann, 1983) or were developed to operationalize these characteristics of effective groups (Appendix A). These items are intended to enable partnerships to evaluate themselves in light of characteristics of effective groups (Green & Kreuter, 1992; Israel et al., 1998, 2001; Mertens, 1999; Schulz et al., 1998). More recently, the literature on assessing coalitions or partnerships has confirmed the importance of many of these group process characteristics. For example, Butterfoss et al. (1996) have shown that community leadership and



^{*} From Johnson and Johnson 1982, 1997. Italicized and bolded items were derived from Johnson and Johnson, and also included in Sofaer 2000. Other items were derived from Johnson and Johnson, and are not included in Sofaer's model.

Fig. 1. Conceptual framework for assessing group dynamics as an aspect of effectiveness of community-based participatory research partnerships (Adapted from Sofaer, 2000).

shared decision-making are linked to member satisfaction and participation in coalitions. In a review of the literature on community partnerships, Lasker et al. (2001) also describe leadership (Alter & Hage, 1993; Lasker & Committee on Medicine and Public Health, 1997), administration and management (Chaskin & Garg, 1997; Israel et al., 1998; Lasker & Committee on Medicine and Public Health, 1997), trust (Goodman et al., 1998; Himmelman, 1996; Kreuter, Young, & Lezin, 1998), conflict and power differentials (Alter & Hage, 1993; Forrest, 1992; Israel et al., 1998; Kegler, Steckler, McLeroy, & Malek, 1998) as critical aspects of the ability of a coalition to develop synergy. Similarly, partners' perceptions of the relative benefits and drawbacks of participation have been cited in the recent literature on coalitions as linked to partnership dynamics, and a key to understanding partners' level of commitment to, and willingness to invest resources in, the work of the coalition (Alter & Hage, 1993; Butterfoss et al., 1996; Lasker et al., 2001; Wandersman, Florin, Friedman, & Meier, 1987).

3. Application of evaluation instrument: three case studies

Collaborative or participatory evaluation is a form of participatory research that involves 'systematic inquiry by collaborative, self-critical communities' to assess their process and progress toward intermediate and outcome objectives (King, 1998, 59; see also King & Lonnquist, 1992; Nunneley, Orton, & King, 1997). Like other forms of research, evaluation has the potential to create shared knowledge, which can then be acted upon to improve both process and outcomes. Evaluations can assist CBPR partnerships or other collaborative efforts as a component of "a cyclic process that includes problem framing, planning, acting, observing, and reflecting in order to improve practice" (King, 1998, p. 59). In keeping with this emphasis, each of the evaluation case studies presented here included a formative approach to evaluation, seeking to provide information in a timely manner that could lead to improvements (Patton, 1997; Rossi et al., 1999). This formative approach is an essential component of participatory approaches to evaluation, offering opportunities for those trained in evaluation to work in partnership with practice-based decision makers, and to use applied social research to strengthen the groups' relationships and ability to collaborate effectively (Cousins & Earl, 1992).

The three case studies presented here describe the use of an instrument designed to evaluate intermediate objectives related to group dynamics in three participatory research interventions. Developed first within the context of a worksite participatory action research (PAR) effort, the instrument was subsequently adapted and implemented in two distinct CBPR efforts. Our emphasis is on the development and use of these instruments as a formative evaluation component in each partnership (rather than the results). We also describe the process used to share and discuss evaluation results within the partnerships, to contribute to a participatory process of self-reflection and action.

Stress and wellness project.

I liked everything from the agenda to everyone's involvement in everything. The whole thing was set up so that everyone had a say and everyone was in agreement pretty much by the time we made any moves. All decisions were made by the group rather than just one person or a couple of people saying this is what we will do. I liked that no one was the boss. We agreed to disagree. Everyone's idea was listened to, talked about, and either accepted or rejected. It was teamwork in the true sense of the word. We were all headed in the same direction. The most important thing to do is to work as a team. (Member, Stress and Wellness Committee)

Project description and objectives. The Stress and Wellness Project was a PAR project that began in the fall of 1985 and was completed in the spring of 1992. It was conducted in an automobile component parts manufacturing plant located in south-central Michigan, and was funded by the National Institute on Alcohol Abuse and Alcoholism, and by joint funds from the United Auto Workers/General Motors National Joint Committee on Health and Safety. The overall aim of the project was to understand and reduce sources of occupational stress and to strengthen the psychosocial factors thought to mediate the relationship between these stressors and health (e.g. social support, control). In accordance with the PAR design, hourly and salaried employees were actively involved in all aspects of the project, such as, data collection, interpretation of findings, program implementation, and evaluation (Israel, House, Schurman, Heaney, & Mero, 1989a; Israel, Schurman, Hugentobler, & House, 1992). The self-named Stress and Wellness Committee represented the different constituencies in the plant (e.g. hourly, salaried, skilled trades, men, and women). The Committee was established and worked in partnership with researchers from the University of Michigan throughout the research and action phases of this project. Over the six-year project period, the Committee met twice a month and held periodic day-long planning sessions.

Evaluation questions. During the course of the project, both quantitative and qualitative data were collected for the multiple purposes of (1) addressing basic research questions (e.g. to what extent are social support and influence negatively associated with levels of stress and adverse health outcomes?), (2) evaluating the outcomes of the interventions (e.g. to what extent do varying degrees of exposure to the intervention result in different impacts on occupational stress, job satisfaction and health outcomes?), and (3) evaluating the extent to which the Stress and Wellness

Committee met its group process objectives (e.g. to what extent were group interactions characterized by trust and openness?). It is this latter purpose that is the focus of this case description. (For additional information on the Stress and Wellness Project see, e.g. Baker, Israel, & Schurman, 1996; Heaney et al., 1993; Hugentobler, Israel, & Schurman, 1992; Israel et al., 1989a; Israel, Schurman, & House, 1989b; Israel et al., 1992; Schurman & Israel, 1995).

Data collection and analysis. Multiple data collection methods were used to evaluate the PAR Committee's efforts, i.e. field notes that were as close to verbatim as possible descriptions of all meetings of the Stress and Wellness Committee; in-depth exit interviews of PAR Committee members assessing the project; and five annual close-ended questionnaires examining the group's process. As described earlier, the selection of key components to assess in this survey instrument were determined based on a review of the group dynamics literature (Fig. 1), and questionnaire items were drawn from previous instruments where available, or developed specifically for this project (Appendix A). In accordance with the principles of PAR, the final decisions regarding whether to conduct this evaluation, how to collect the data, the specific items to be included in the questionnaire, and how the data would be fed back to and used by the Committee were all made in partnership by the members of the Stress and Wellness Committee (SWC) over a series of committee meetings.

During the initial meetings when the idea of conducting the survey was discussed, the researchers raised the importance of the issue of confidentiality, and asked SWC members whether they were interested in examining differences in responses based on, for example, gender, hourly and salaried employees; recognizing that such reporting might be problematic because of the small numbers of respondents (between 15 and 25 participants). After considerable discussion, the SWC decided that ID numbers should be used, that would allow the researchers to analyze the data by hourly and salaried employees' responses, with the understanding that the results would not be presented in a way that any one or few individuals' responses might be identifiable. As it turned out, after examining the results separately by hourly and salaried status, there were no major differences between the two groups, and hence the results were subsequently presented for the Committee as a whole.

The SWC decided to conduct the survey on an annual basis, and that the best response rate would be achieved by having committee members complete the questionnaire during a regularly scheduled meeting. (For members who were not present at these meetings, copies were given to them by another member of the Committee along with a stamped return envelope to the university researchers. The use of the identification number allowed the researchers to know which questionnaires were not completed and to follow-up with committee members accordingly.) The average time it took to complete the questionnaire was 30 min. The survey was administered each December over a 5 year period, with response rates ranging from 53 to 88%. Given that the SWC was interested in overall assessment of the group's functioning, not in tracking individual assessments, a decision was made to analyze the data as a group, and not track individual responses over time. In addition to the group process questions asked in the initial survey administration and in subsequent years, specific questions were also included that asked about the extent to which different activities that the SWC had implemented had helped meet the goals of the project, e.g. daily newsletter, information centers, wellness project.

Presenting and discussing results. The researchers were responsible for compiling and feeding back the results from the questionnaires on an annual basis (within 3 months of their completion). A copy of the survey instrument was distributed with the results presented (numbers and percentages) for each question, along with a listing of the number of persons that comprised the percentages presented (e.g. 50% = 10 persons). Over the years, this document included the responses for each previous year, hence allowing for a comparison of results over time. In addition to this document, a summary report was distributed each year that explained in text format the major findings for each category of questions.

At the SWC meeting in which these reports were distributed, the researchers presented a summary of some of the key results, and engaged the Committee in discussions about their reactions to the findings, e.g. agreement, disagreements, surprises, interpretations. The Committee members used this critical reflection on their process to identify areas in which the group needed to make changes in the way they work together. For example, the results of the first year in which the survey was administered indicated that approximately one-fourth of the Committee felt 'somewhat' pressured to go along with decisions of the group even though they might not agree. This finding resulted in a discussion about the group's earlier decision to use consensus decision-making, and the Committee agreed that they needed to continue to discuss and revise decisions until a true consensus was reached. In addition, in 1989, about one-third of the committee members indicated that they felt that it was 'somewhat true' that decisions that the Committee made did not get implemented. Based on this finding, the Committee discussed the lack of ongoing involvement of and support from top management on the Committee and adopted strategies to try to address that issue.

The Genesee County (broome) Team.

We became able to put the cards on the table. 'Let's do some brainstorming. Let's do some green light thinking.' There are some tough questions that you can't resolve unless you have some really tough dialogues. (Member, Broome Team)

Project description and objectives. The Detroit-Genesee County Community-Based Public Health Consortium was one of the seven community-based public health consortia funded by the W.K. Kellogg Foundation between 1992 and 1996. The overall aim of the Community-Based Public Health Initiative was to link public health researchers and practitioners with community-based organizations in communities experiencing multiple health-related problems, and to increase the responsiveness of local health departments and schools of public health to communities with the greatest health-related needs (W.K. Kellogg Foundation, 1992). The Detroit-Genesee County Community-Based Public Health Consortium was made up of three teams: the Detroit Team, the Genesee County (Broome) Team, and the University of Michigan School of Public Health Team. Each team was comprised of representatives from community-based organizations, academic institutions, and health practice organizations, and met on a monthly basis to discuss Team and Consortium business. In addition, representatives from each of the three Teams meet every other month as part of the Collaborating Group, the communication and decision-making body for the Consortium as a whole.

This case study focuses on the evaluation of the Genesee County Broome Team, one of the three arms of the Consortium. The broad goals of the Broome Team were to (1) strengthen public health education and practice by linking academic and agency professionals with people from vulnerable neighborhoods, (2) to promote the public's health by enhancing the capacity of community members and community-based organizations. The evaluation questions for the project were guided by these broad goals, and several more specific objectives that were designed to address these goals.

Evaluation questions. After in-depth interviews were conducted to assess group members' objectives for the partnership, the evaluator drafted an evaluation plan that incorporated process, impact and outcome evaluation questions. This plan was presented and discussed by the Broome Team, and subsequently revised. Those objectives and concomitant evaluation questions most relevant to this case study were related to elements of group dynamics, including mutual trust among group members, the development of linkages or relationships among members of the participating organizations, group leadership and decision making, and the extent to which group members perceived the work of the group to benefit their organizations and the community as a whole.

In addition, in the second year of the project, a subgroup formed specifically to examine the Broome Team's group process and to make recommendations regarding ways to ensure equitable participation and influence of all team members. As a result of the work of that subgroup, in which the evaluator was an active participant, a number of modifications were made to the Broome Team Group Process questionnaire.

Data collection and analysis. Data collection for the evaluation of the Broome Team included the use of multiple methods. In-depth interviews were conducted with Broome Team members in the first year of the project to capture members' hopes and expectations for the intervention, and to begin to build the overall evaluation design. In-depth interviews with Broome Team members were repeated in the fourth year of the project to capture team members' assessments and reflections on the project as it had unfolded over the preceding 4 years. Field notes were kept from monthly Broome Team meetings over the life of the project, focus groups were conducted with community members participating in various initiatives sponsored by the Broome Team, and monthly documentation forms were completed by each member organization to record activities and events.

In addition, the closed-ended group process questionnaire was mailed to all members of the Broome Team annually to assess perceptions of group dynamics and working relationships among members. Response rates were 95% (1993), 75% (1994) and 95% (1995). This questionnaire was adapted from the worksite Stress and Wellness Project questionnaire described in the preceding case study, to address the specific objectives and dimensions of group dynamics identified within the Broome Team. Like the Stress and Wellness Project questionnaire, the Broome Team questionnaire assessed the extent to which members of the Broome Team felt that their interactions were characterized by mutual trust, equity, mutual respect, reciprocal influence, and effective and equitable decision making processes. In addition, the Broome Team Group Process questionnaire assessed members' perceptions of the extent to which the Team worked together effectively to influence community concerns (Appendix A).

Presenting and discussing the results. Data were compiled and presented in summary form each year (percentages and numbers) and, in 1994 and 1995, results from the previous years were included for comparative purposes. In each of these years, the Broom Team set aside a large portion of one monthly meeting to discuss these results and consider their implications for the group. In addition, summary reports of the Broome Team process questionnaire and other evaluation results were compiled in written form on an annual basis, and distributed to all team members.

As one example of this process, in the third year of the project the Broome Team discussed differences that appeared in the analysis of results comparing relatively new members of the Broome Team with those who had been members of the team over longer periods of time. Results indicated that representatives from larger organizations were more likely to have consistent participation over time, while representatives from smaller, community-based organizations often had less consistent participation, and more changes in representatives. In addition, results indicated that newer members of the Broome Team reported less ownership over team decisions, were less likely to suggest new ideas, express opinions, point out ways to proceed when the team was stuck, less likely to take leadership roles within the team, and less satisfied with the amount of influence they had over decisions made by the Team.

Following presentation of these results, the group discussion considered the potential for the higher turnover among representatives from smaller, less well-resourced organizations, to exacerbate differences in influence and leadership between representatives from large institutions and those from smaller institutions. Team members discussed potential mechanisms to support the participation of representatives from smaller organizations, including efforts to acclimate new members to the group's history and process, and to actively encourage the engagement of those members who were relatively new to the Team.

The Detroit community-academic urban research center.

The trust and the relationships we've built have really launched the URC and helped out with all of our accomplishments. What really helped was the trust and relationship building that was done. The formalities are gone now, but business is getting done. It's comfortable. (Member, URC Borad)

Project description and objectives. The Detroit Community-Academic Urban Research Center (URC) is a CBPR partnership, with core funding from the Centers for Disease Control and Prevention (CDC). The partner organizations comprising the URC include the University of Michigan Schools of Public Health and Nursing, the Detroit Health Department, the Henry Ford Health System, the CDC, and six community-based organizations (Butzel Family Center, Community Health and Social Services Center, Friends of Parkside, Kettering/Butzel Health Initiative, Latino Family Services and Warren/Conner Development Coalition) that work within two distinct neighborhoods in Detroit. The overall mission of the URC is to conduct interdisciplinary, community-driven participatory research that improves family and community health on the east and southwest sides of Detroit, with a particular focus on addressing underlying social determinants of health (Israel et al., 2001).

The URC partnership began its work in 1995, and since that time has received over \$23.5 million in funding to develop, implement, and evaluate a number of different interventions and research projects in its three priority areas: access to quality health care, environmental health issues, and family violence (Israel et al., 2001). Each of the community-based participatory intervention research projects affiliated with the URC has its own steering committee with representation from community-based organizations, health service organizations, and academia.

Evaluation questions. Each URC intervention project has its own set of evaluation questions and corresponding evaluation plans. In addition, an evaluation of the overall URC infrastructure and group process has been underway since the inception of the partnership. This evaluation is focused on the URC Board, which is comprised of representatives from the partner organizations and principal project staff. The foci of this evaluation include URC Board activities, Board members' perceptions of and satisfaction with URC activities, achievements and process, and members' perceptions of the challenges to and benefits of this research partnership. This evaluation is both participatory (Board members, including those on an Evaluation Subcommittee, have guided the design and implementation of evaluation activities) and formative (evaluation results are routinely fed back to and used by Board members).

Data collection and analysis. Evaluation data have been collected with a variety of methods, including field notes from Board meetings, in-depth semi-structured interviews with Board members (Years 2 and 5), a review of documents and materials created by the Board, and an annual self-administered mailed survey completed by each Board member. This closed-ended survey builds on the worksite Stress and Wellness Project questionnaire and the Broome Team questionnaire described in the preceding sections, again tailored to the specific objectives of the URC. Annually, all Board members are mailed the survey questionnaire (along with a postage-paid return envelope). The questionnaire includes items (mostly with Likert scale response categories) regarding respondents' sense of ownership/belonging to the group; comfort level in expressing opinions; decision-making processes of the group; trust and openness levels; the degree to which the URC is following its own principles for CBPR; and perceived accomplishments of the group (Appendix A). The annual mailed survey has been conducted four times (in Years 2-5 of the initiative), with response rates of 100, 100, 95 and 86%, respectively. Each time the survey was administered, the resulting data were entered into a spreadsheet for analysis. With a Board membership of approximately 20 individuals representing 10 organizations/agencies, only simple descriptive statistics are used to analyze the data. However, the data are analyzed to look for differences or patterns in the responses comparing, for example, the academic and non-academic partners on the Board, and total responses over time.

Presenting and discussing results. The results of the annual survey are combined with data from other ongoing evaluation activities, and reported to the Board (e.g. formative evaluation) on an annual basis. This includes a summary of results or issues that may be in need of further attention from the Board. Members of the Evaluation Subcommittee work to identify which evaluation results will be fed back to the full Board, and to clearly identify specific issues that are raised by these results.

As an example of this process, the results of the first mailed survey (in Year 2) indicated that several Board members—especially community partners—were not sure how to place an item on the agenda for a Board meeting, and thus were not satisfied with the degree of influence they had over what was discussed or given attention at Board meetings. These findings were presented back to the Board, which prompted a frank discussion about the meeting agenda-setting process and how all Board members (not just a select few) need to be able to help craft meeting agendas. Since that time, satisfaction with what is addressed at Board meetings and how meeting agendas are developed has increased.

The most recent mailed survey results (from 2001) suggested that there is a high degree of satisfaction among URC Board member regarding group process. Results included the following: 88% indicated that Board members are comfortable expressing their points of view at meetings; 94% reported that they are satisfied with the ways in which the Board makes decisions. The majority of respondents (76%) also reported that Board members' capacity to work well together increased during the previous year, with no apparent differences in this perception between academic and nonacademic partners. There have been, however, differences in perceptions between academic and non-academic partners. For example, in 1999, 100% of academic Board members reported that participation in the URC has increased the School of Public Health's capacity to conduct CBPR. In contrast, only 38% of non-academic partners perceived that their organizational capacity has increased in this regard.

Over the years, evaluation survey results have generated much discussion at the Board meetings at which they were presented. For example, at a meeting in 2000 evaluation data stimulated a discussion of how the partnership can better extend the knowledge and skills being generated by Board activities to non-Board members in partnering organizations, and whether or not it was time for the Board to expand. These issues, along with several other topics, were considered to be very important and in need of further, in-depth discussion. Thus, Board members decided to hold a subsequent day-long retreat to further consider the major issues raised by the evaluation activities and to plan for the future. As such, evaluation data played a key role in the Board's long-range planning process.

URC Board members reported that establishing a strong infrastructure and set of processes for the partnership was a significant accomplishment in and of itself. They also reported, however, the strong belief that the development of a strong set of group processes and guiding research principles was a key facilitator in the achievement of partnership objectives (Lantz, Vireull-Fuentes, Israel, Softley, & Guzman, 2001). As such, URC Board members view the developing of partnership processes and the building of trust and solid working relationships as an essential foundation from which all other accomplishments springboard.

4. Discussion and lessons learned

In each of the three projects described above, the group dynamics questionnaire provided a structure for collecting data about members' perceptions, concerns and interactions within the partnership. Annual data collection and feedback allowed regular identification and discussion of issues and concerns which may be difficult to raise in the context of ongoing meetings, when task or content objectives may be of primary concern. Based on these experiences, in this section we discuss a number of principles and processes that may be useful for evaluators assessing intermediary group process objectives within partnerships.

Equitable engagement. Equitable engagement of all members of the partnership in all phases of the research/evaluation process does not necessarily mean that all partners engage in all aspects of the evaluation to an equal extent. A basic assumption behind a partnership approach is that each partner brings unique perspectives and skills, and that the partnership is strengthened through the application of those diverse resources toward a common goal. Thus, some members may bring considerable skill and/or interest in evaluation, while others may bring in-depth understanding of group dynamics, both of which contribute to building a strong evaluation. It may not be an efficient, or desirable, use of partnership resources to engage all members in actually conducting the interviews, entering data into a database, or conducting preliminary analyses of the results. All partners, however, have important perspectives and insights to share in interpreting the results of the evaluation, and in thinking through ways to address issues and concerns that may be brought to light through this process.

In two of the three partnerships described in this article, discussions of evaluation goals and questions were conducted by the full boards and shaped the overall design of the evaluation plan. In the third project, a subcommittee of the board was created to assist with the development of the evaluation, and this subcommittee presented the preliminary evaluation plan to the full board for discussion prior to finalization of the plan. Participatory development of the evaluation plan allowed the plan to incorporate multiple perspectives, and the group to come to agreement on priorities for evaluation of process, impact and outcomes. Once the evaluation plan had been mapped out, those with expertise in data collection and analysis applied their skills, bringing the results back to the larger group for discussion, interpretation, and decisions about action steps.

Furthermore, in each of the coalitions described here, members of the partnership were engaged in a discussion of the characteristics of groups that they had been members of in the past, and that they considered effective or worthwhile groups (Israel et al., 2001). In each case, these discussions generated many of the dimensions identified in a review of the literature on effective groups, or an coalitions that achieve synergy—mutual respect, shared leadership, effective governance. They also offered an opportunity for the group to collectively discuss what aspects of group dynamics they particularly valued, and in some cases, generated specific items to be included in the evaluation. Perhaps most importantly, these discussions provided an opportunity for the group members to 'own' the questions included in the process evaluation document, and laid the groundwork for later discussions of the results.

Selecting items for feedback to the group. The length of the questionnaires examined here argues against the verbal presentation of the full set of results to the partnership for discussion. Complete results may be better shared in a written report made available to all members, or, as in the case with the worksite Stress and Wellness Project, a written report in combination with presentation and discussion of the results. The evaluator, the evaluation subcommittee, or the partnership members themselves, may select particular items or sections of the questionnaire for a more focused group discussion. There are several possible ways that evaluators or evaluation subcommittees might determine which items or subsets of the questionnaire to highlight for presentation to the larger group.

First, one could look for items or issues that appear to have undergone substantial change between the preceding year and the current year. These shifts may reflect events or processes that have unfolded over the past several months that may or may not have been made explicit or discussed by the group as a whole. For example, a series of events that occurred between two organizations involved with one of the partnerships discussed above severely affected group trust. The process questionnaire conducted that year showed a marked drop in trust, which had previously been high and consistent, within the group. Discussion of this change, and the events that had contributed to it, led to a number of constructive suggestions for rebuilding and maintaining trust within the group as a whole.

Conversely, there may be instances when the evaluator or evaluation subcommittee chooses to highlight stability in some set of indicators, e.g. issues that surface in multiple waves of the questionnaire, or across multiple data collection methods (in the group dynamics questionnaire, field notes from meetings, and/or in-depth interviews). As an example, when questions about the budget reappeared for 2 years in a row in the group dynamics questionnaire completed by one of the above partnerships, and also appeared in in-depth interviews, the evaluator suggested that this issue be discussed by the Board.

Participant observation and field notes taken by the evaluator on an ongoing basis can be an essential tool aiding in the selection of issues or items for discussion by the group. Regular participation in board meetings and other partnership events enables the evaluator to develop insights into group dynamics, including issues that may arise at particular meetings or carry on as undertones through a series of meetings. Such dynamics may be very difficult to obtain through closed-ended data collection strategies, which offer only a snapshot at a point in time, or for longitudinal data, repeated snapshots at particular points in time. Field notes provide important information that contributes to the interpretation of questionnaire results, and can inform the selection of particular results for feedback and discussion by the group.

Finally, evaluators may choose to highlight differences in perceptions that occur across subgroups or constituencies within the partnership. For example, two of the three partnerships described in this article had representatives from a number of community-based organizations, health departments, and academic institutions. Central goals of the partnerships involved the development of equitable working relationships among these types of organizations, each of which brought qualitatively and quantitatively different resources. Therefore, their perspectives on the way that the partnership was working together might reasonably be expected to differ-and indeed, in many cases they did so. Such differential results and perceptions provide a basis for conversation and discussion about mutual and reciprocal benefits, and identification of actions that might be taken to address imbalances.

Some considerations and limitations. There are several limitations to the use of the group dynamics questionnaire we have described here. These include the focus solely on group dynamics, e.g. relationships among members of the partnership, the roles that members take in the group, and the ways that they work together. There may be other important dimensions of any particular partnership that evaluators will want to consider. Furthermore, data are collected at specified collection points, and may be influenced by recent events that could potentially overshadow longer-term dynamics and trends. The use of closed-ended items on the instruments may also limit their ability to pick up new and emergent issues that are not reflected in the items included. As a result of these limitations, we recommend that such a questionnaire be used in conjunction with other evaluation mechanisms. Those used by the partnerships described here have included in-depth interviews with partnership members, field notes of meetings, and document reviews.

The small numbers involved in most partnerships may preclude the use of anything but simple descriptive statistics in data analysis. Even with high response rates, these numbers may limit the use of tests of statistical significance to assess change over time. Rather, their utility lies in their ability to give an overall sense of critical group dynamics, especially when combined with other types of data that are collected simultaneously, and to stimulate and shape candid discussions regarding group process and the current state of the partnership among members. The results are not meant to stand alone as a metric of group dynamics.

One consideration for evaluators is whether to track change in individual respondents over time, or change in the group as a whole, or some combination of these strategies. Simple aggregates of results from two points in time can be useful for obtaining a snapshot of group dynamics, but fail to address the question of whether changes are due to events that may have unfolded in the group, changes in group composition, or events that may have affected some group members more than others. This decision may be based on turnover in the group between the two points of data collection, or on issues that emerge through other data collection efforts (e.g. meeting field notes).

For example, evaluators may anticipate that individuals who participate in a partnership over longer periods of time may perceive that they have greater influence in the process and outcomes of the partnership than newer members. This expectation may be based on an assumption that, over time, individuals develop both skills and relationships with other members of the partnership that enable them to exert influence in decisions made. This effect may be masked in examining aggregate data if, at the same time that some members develop an extended history with the partnership, new members join whose lack of history or experience within the partnership contributes to feeling relatively uninfluential. To disentangle the effects of history versus turnover of members on the overall working relationships among the partners, the evaluator may wish to examine key process indicators by length of membership (and/or intensity of participation) in the partnership. Similarly, there may be differences in experiences and perspectives, for example, between representatives who are based in community-based organizations and those housed in larger health service providing organizations or academic institutions. Breaking out responses by relevant categories can allow the partnership to examine these differences in some detail.

Care must be taken not to identify or expose individual group members when presenting results, particularly when categories are quite small (for example, if there are only two representatives from health care providing organizations). Potential breaches of confidentiality or anonymity must be guarded against very carefully. In addition to violating basic tenants of research ethics, they also have important implications for working relationships among members of partnerships. Furthermore, once respondents have been divided into categories of interest, response summaries will be very sensitive to small changes in membership (e.g. new people) as well as small changes in the assessments offered by individuals (e.g. changing perceptions on the part of the same people). Team members must take care not to overinterpret changes over time in light of these sensitivities, while at the same time being attentive to the potential implications of such changes.

5. Concluding comments and directions for future research

Public health interventions have often failed to diffuse new ideas, change behaviors, or achieve long-term acceptance. These failures may reflect an inability to obtain participants' understandings of the issues and context, and to involve community members in the design, management, and control of the research and intervention process (Fisher, 1995; Israel et al., 1989b). If public health partnerships for community change are to realize their potential to work collaboratively to improve health and quality of life, they must assess the quality of the working relationships that are central to these goals. Tools that enable partnerships to assess their own group dynamics offer one important mechanism to evaluate and take action to improve the working relationships central to effective collaboration.

Despite the limitations and caveats discussed in the preceding section, group dynamics questionnaires can be a useful evaluation tool for partnerships or other collaborative efforts whose success relies in part on the development of effective and equitable working relationships among members. Several of the group dynamics characteristics identified and incorporated into the three versions of the questionnaire used in these case studies are consistent with key factors identified in the community coalition literature as associated with the successful formation, implementation, and maintenance of coalitions (Butterfoss et al., 1996; Lantz et al., 2001; Lasker et al., 2001). As a formative evaluation tool used in an ongoing manner (e.g. annually), the group dynamics questionnaire provides a structured opportunity to talk about group interactions, and to engage group members in discussion and collective problem solving regarding the group's effectiveness. The evaluators' responsibility-and opportunity-rests in raising such issues or questions in a manner that elicits productive discussion that assist the group in meeting its objectives. Thus, further development of evaluation instruments and processes that facilitate these discussions are needed.

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Appendix A

Sample items from survey instrument for evaluating group dynamics characteristics and intermediate measures of partnership effectiveness within community-based participatory research partnerships.²

A.1. Group dynamics characteristics

Leadership and participation: task and maintenance behaviors.

How often do you suggest new ideas?

How often do you ask for additional information?

How often do you provide information?

How often do you relate personal experiences relevant to the group's tasks?

How often do you express your opinion?

How often do you pull ideas and suggestions together? How often are you friendly and support of others' ideas? How often do you point out ways to proceed when the group is stuck?

How often are you a good listener?

How often do you make jokes to relieve tension?

How often do you talk too much?

How often do you invite other members to work with you on specific issues?

How often do you place items on the agenda for discussion?

To what extent are roles and tasks shared by members?

Comfort level for expressing opinions: communication.

How much do people in the group feel comfortable expressing their point of view?

How much do group members listen to each others' points of view, even if they might disagree?

How much do you feel comfortable about expressing your opinion in group meetings?

How much is your opinion listened to?

How much are you willing to listen to others' points of view?

In the past year, has your willingness to speak and express your opinions at group meetings increased, remained the same, or decreased?

Since you joined the group, would you say group members' willingness to express their points of view has increased, remained the same, or decreased? How well the group recognizes and addresses conflicts and problems.

In working together to solve problems, how well has the group been able to identify the important issues and generate several possible solutions?

How satisfied are you with the way the group deals with problems that come up?

In your opinion, what (if any) have been the major points of conflict or disagreement within the group?

How well do you feel that these conflicts were handled by the group?

Decision-making procedures.

How true is it that it takes too much time to reach decisions?

How true is it that everyone in the group has a voice in the decisions?

How true is it that good decisions are made?

How true is it that some members of the group hold on to their ideas too rigidly?

How true is it that decisions that the group makes are changed when they get implemented?

How true is it that decisions that the group makes do not get implemented?

How true is it that everyone in the group contributes items to the agenda for meetings?

How true is it that the items on the agenda are relevant to your work?

How committed do you feel to decisions that are made by the group?

How satisfied are you with the way the decision-making process is working?

How much is the group able to make the necessary decisions in order to keep the project moving forward?

How well the group works together: problem solving processes.

How well does the group work together?

How well do you think the group has been able to work together to solve problems?

How much change has there been in how the group works together since you joined the project?

In the past year, group members' capacity to work well together has: increased, remained the same, decreased?

Level of influence and power of self and others in the group.

How much do you feel pressured to go along with decisions of the group even though you might not agree? Is your opinion listened to and considered by other group members?

 $^{^{2}}$ Copies of the questionnaires used in the three projects highlighted in this article are available from the first author.

Do certain individuals' opinions get weighed more than they should?

Does one person or group dominate the meetings?

Do certain individuals talk more at meetings than others? Are you bothered that *certain* individuals talk more at meetings than others?

Do certain individuals have more influence over the agenda at group meetings than others?

Do certain individuals have more influence over the decision-making process than others?

Are you bothered that certain individuals have more influence over the decision-making process than others? Would you like to have more input regarding the allocation of the groups' resources?

Perceived level of trust.

In your opinion, how much trust and openness exists between group members?

Over the past year, has the amount of trust between group members increased, remained the same, or decreased? In the next year, how much trust do you expect to see between group members?

Meeting organization, agenda setting, facilitation, and staffing.

How would you rate the amount of direction that the staff provide to group meetings?

How would you rate the amount of direction that the staff provide to the project overall?

How satisfied are you with the level of follow-up action taken by staff in response to decisions made by the group?

How satisfied are you with the way staff prepare and structure group meetings?

When staff facilitate meetings, how much do they do of each of the following:

Encourage participation of all group members?

Encourage open communication between group members?

Recognize possible problems with conflicts with the group?

Help to solve problems that occur between group members?

Help to clarify group meeting goals and tasks? Help to move meetings along?

How true is it that the project would continue to operate in a similar way if the involvement of staff were to end this month?

What is your level of agreement with the following statements regarding group meetings?

I find the group meetings useful

I enjoy attending the group meetings

The group meetings are well organized

The group meetings are held too frequently

The agendas of the group meetings are clear We adequately address all of the agenda items at group meetings

I am comfortable with the process for placing an item on a meeting agenda

I would like more of a voice in determining agenda items for meetings

I like where our meetings are held

A.2. Intermediate measures of partnership effectiveness

Accomplishments/impact of group.

The group has been effective in achieving its goals The group can have a positive effect on the community The group has chosen important problems to work on

How important do you think the work of the group is to the community as a whole?

How would you describe the rate of progress which the group is making in dealing with the major issues identified?

I believe that other agencies and groups in our area know about our group and its initiatives

Our group has been effective in informing policy makers and key government officials about our initiatives

General satisfaction.

Please indicate your level of satisfaction in the following areas:

The general way in which the project has developed The rate of progress the project is making in achieving its goals

The activities of the group during the past year

The progress of the group during the past year

My knowledge of the group budget, resources and how resources are allocated

Personal, organizational, and community benefits of participation.

I have increased my knowledge about important topics since participating in this group

Participating in this group has provided personal growth for me

Participating in this group has made work more enjoyable for me

Participation in this group has increased my organization's capacity in one or more areas.

Member background and meeting attendance.

When did you become a member of the group? Are you a member of any subcommittees? Which ones? Do you find these subcommittees useful? Why or why not?

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Do you find it easier to participate in the subcommittees than in the larger ones? Why or why not?

Since you joined the group, how many of the meetings have you been able to attend?

When you don't attend meetings, what are the major reasons?

Sense of ownership/belonging to the group: cohesion.

How much do you feel a part of the group (like you belong to the group)?

How much do you have a sense of ownership over what the group does?

How frequently do you think of severing your affiliation with the group?

Group empowerment.

I can influence decisions that the group makes

The group has influence over decisions that affect my life The group is effective in achieving its goals

The group can influence decisions that affect the community

I am satisfied with the amount of influence I have over decisions that the group makes

I can influence decisions that affect my community

Community empowerment.

By working together, people in my community can influence decisions that affect the community

People in my community work together to influence decisions on a state or national level that affect my community

I am satisfied with the amount of influence I have over decisions that affect my community.

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