

Collaboration:

According to the Ottawa Charter, “health promotion policy combines diverse but complementary approaches including legislation, fiscal measures, taxation and organizational change. It is coordinated action that leads to health, income and social policies that foster greater equity. Joint action contributes to ensuring safer and healthier goods and services, healthier public services, and cleaner, more enjoyable environments” (1986).ⁱ

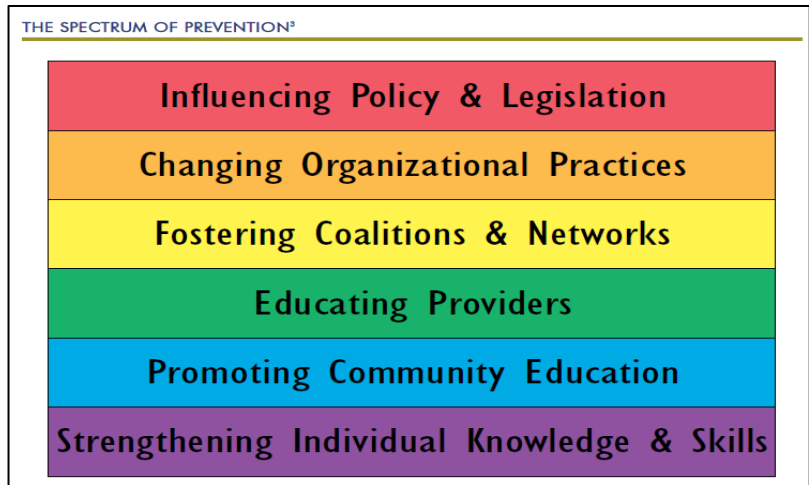


Figure 9. Source: [Developing Effective Coalitions: An Eight Step Guide](#)ⁱⁱ

CDC Collaboration Guide for the USAPI

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Figure 10. CDC Collaboration Guide for the USAPIⁱⁱⁱ

[Collaboration Guide for Pacific Island Cancer and Chronic Disease Programs](#) (by CDC, 2013)

- Pgs. 5-38: A CDC-developed Collaboration Guide for Pacific Island Cancer and Chronic Disease Programs (or the Pacific Island Collaboration Guide), to help CCC programs and coalitions and other chronic disease and school-based programs and coalitions work together; includes practical advice and tools for staff working in CCC programs in the Pacific that are funded by the Centers for Disease Control and Prevention’s (CDC’s) National Comprehensive Cancer Control Program (NCCCP) and their CCC coalition partners.

Multi-sectoral Partnerships:

Establishing good partnerships across different sectors and coalitions require clear communication pathway. The FSM National and its partners created an organizational relationship and communication chart as a guide when communicating among sectors and partnerships. Having a clear communication map that all members of the coalition and partnerships follow avoids miscommunications and reporting failures. Clear communication pathway not only avoids disagreements, but it also fosters understanding of where each coalition and partner stands in their public health work. When there's clear communication and understanding, it is easier to identify problems and appropriate solutions.

Organizational Relationship and Communication Chart between FSM National and other Partners

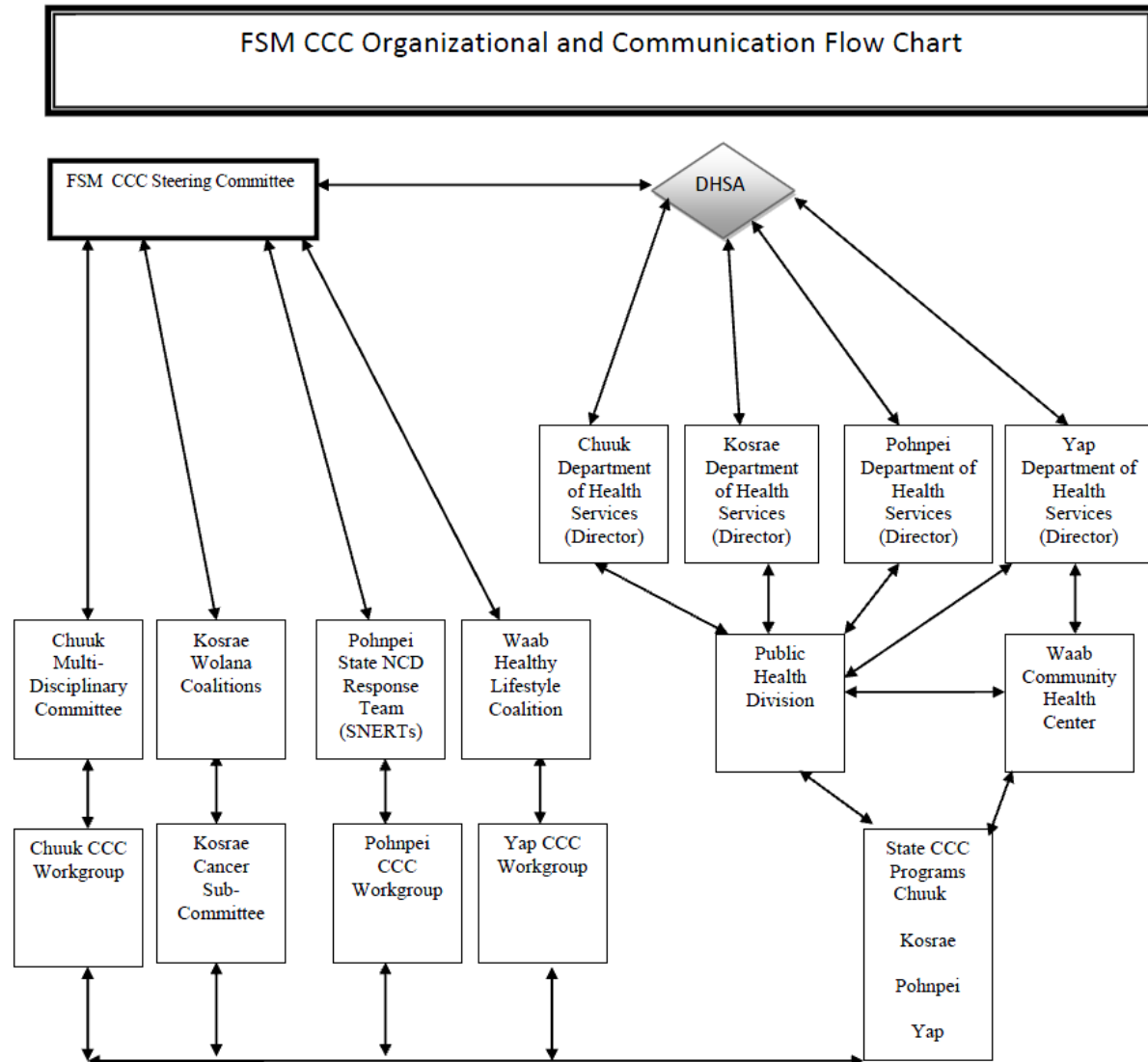


Figure 11. Organizational Relationship and Communication Chart between FSM National and other Partners

NOTE: For an outline example of multi-sectoral partnerships:

Read more on [WHO Policy Implementation Steps: Combating NCD Leadership agenda for action](#)^{iv}

[9 Habits of Successful Comprehensive Cancer Control Coalitions](#)^v

The Comprehensive Cancer Control National Partnership (CCCNP) is a group of sixteen leading cancer organizations in the US who have joined together to build and strengthen comprehensive cancer control (CCC) efforts across the nation. The CCCNP identified 9 habits that are a set of evidenced-based, comprehensive and interconnected characteristics of CCC coalitions who have been successful in maintaining an active coalition dedicated to developing and implementing a CCC plan.

Habit #1: Empowering Leadership

Successful coalitions have strong leaders who show their leadership by asking, allowing and expecting others to make decisions to move forward with coalition activities.

Habit #2: Shared Decision-Making

No one organization or person overpowers the decisions made in the coalition and mechanisms are in place so that this does not happen. Coalition members see that many perspectives, organizations and sources of information are considered as decisions are made.

Habit #3: Value-Added Collaboration

Coalition members see results from working with other members and forging alliances that otherwise, without the coalition, might not be realized. To help put this habit into action, inventory and share member strengths, and share positive outcomes that are a result of your coalition's value-added efforts.

Habit #4: Dedicated Staff

Coalition members are often volunteers who have full-time jobs, so the burden of additional work for needs to be recognized and partially offset by a dedicated staff, who will organize the ongoing progress, coordination and communication of the coalition's efforts.

Habit #5: Diversified Funding

Diversified funding helps create widespread support and involvement in the coalition's efforts because of expanded stakeholders. When coalition members have more "skin in the game" – in the form of funding or in-kind support – they are more likely to be actively involved in the work of the coalition.

Habit #6: Effective Communication

Successful coalitions communicate with members consistently, with a defined purpose and in a variety of ways. Regular communication keeps coalition members apprised of coalition work, it reminds coalition members of their role and accountability in the coalition and it calls coalition members to action when needed.

Habit #7: Clear Roles and Accountability

Make sure the various roles of coalition members and leadership are communicated both verbally and in written documents. When roles are delineated and communicated, members understand what is expected from them and what they in turn can expect from other members and groups of the coalition.

Habit #8: Flexible Structure

Successful coalitions are flexible, adapt to new opportunities and challenges and maintain a structure that facilitates implementation of the CCC plan. As new priorities and efforts are identified, assess your coalition structure to assure the strengths and resources of the coalition are aligned with its efforts (e.g. changes in workgroups, leadership, communication methods, etc.)

Habit #9: Priority Work Plans

1) Identifying priorities to work on and 2) putting work plans in place to guide work on those priorities. Successful coalitions ensure processes are in place to set priorities on a regular basis, use written work plans, and track progress. To put this habit into practice, set priorities and then have workgroups develop work plans around evidence-based strategies that convey a clear sense of expected outcomes, methods to reach those outcomes, responsibilities, and timelines.

ⁱ World Health Organization. *The Ottawa Charter for Health Promotion*. WHO, 2013. Web. 22 Nov 2013.

ⁱⁱ Cohen, Larry, et al. "Developing Effective Coalitions: An Eight Step Guide." Prevention Institute, n.d. Web. 22 Nov 2013.

ⁱⁱⁱ Centers for Disease Control and Prevention. *Collaboration Guide for Pacific Island Cancer and Chronic Disease Programs*. Atlanta, GA: Centers for Disease Control and Prevention, US Dept of Health and Human Services, 2013. Web. 22 Nov 2013.

^{iv} World Health Organization. *Combating Noncommunicable Diseases Leadership Agenda for Action*. WHO, 2013. Web. 22 Nov 2013.

^v Comprehensive Cancer Control National Partnership. *Nine Habits of Successful CCC Coalitions*. CCCNP, 2013. Web. 22 Nov 2013.