[Note: guide cover is a separate file]
12 Keys to Building Caregiver Coalitions
Training Guide

AARP Foundation Caregiver Coalition Research Project

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# 12 Keys to Building Caregiver Coalitions

## Table of Contents

<table>
<thead>
<tr>
<th>Key</th>
<th>Topic</th>
<th>Page No.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Introduction</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Background</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Getting Started</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Advantages and Disadvantages of a Collaborative Effort</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Benefits of a Coalition</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Benefits for Caregivers</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Worksheet – Benefits for Caregivers</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>Benefits to Partners</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>Worksheet – Benefits for Partners</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>Benefits for the Coalition</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>Worksheet – Benefits for Coalition</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>Where Are We?</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>Exercise – Pretraining Questionnaire</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td><strong>Key 1 – Planning</strong></td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>Common Vocabulary</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>Why a Coalition?</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>Needs Assessment</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>Preliminary Stage</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>Exercise – Who Should We Invite?</td>
<td>10</td>
</tr>
<tr>
<td></td>
<td>Key Stakeholders</td>
<td>10</td>
</tr>
<tr>
<td></td>
<td>Coalition Formation</td>
<td>11</td>
</tr>
<tr>
<td></td>
<td>Types of Collaboration</td>
<td>11</td>
</tr>
<tr>
<td></td>
<td>Purpose of Coalition</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td>Coalition Scope</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td>Catalyst for Formation</td>
<td>13</td>
</tr>
<tr>
<td></td>
<td>Desirable Member Characteristics</td>
<td>14</td>
</tr>
<tr>
<td></td>
<td>Stages of Growth</td>
<td>15</td>
</tr>
<tr>
<td></td>
<td>First/Organizational Meeting</td>
<td>16</td>
</tr>
<tr>
<td></td>
<td>Organization</td>
<td>16</td>
</tr>
<tr>
<td></td>
<td>Capabilities Assessment</td>
<td>17</td>
</tr>
<tr>
<td></td>
<td>Capabilities Worksheet</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>Review of Preliminary and Capability Assessments</td>
<td>21</td>
</tr>
<tr>
<td></td>
<td><strong>Key 2 – Vision Statement</strong></td>
<td>22</td>
</tr>
<tr>
<td></td>
<td>Worksheet for Vision Statement</td>
<td>22</td>
</tr>
<tr>
<td></td>
<td>Exercise – Vision Statement</td>
<td>23</td>
</tr>
<tr>
<td></td>
<td><strong>Key 3 – Mission Statement</strong></td>
<td>24</td>
</tr>
<tr>
<td></td>
<td>Exercise – Mission Statement</td>
<td>24</td>
</tr>
<tr>
<td></td>
<td><strong>Key 4 – Goals and Objectives</strong></td>
<td>25</td>
</tr>
<tr>
<td></td>
<td>Worksheet for Goals</td>
<td>25</td>
</tr>
<tr>
<td>Key</td>
<td>Topic</td>
<td>Page No.</td>
</tr>
<tr>
<td>-----</td>
<td>-------</td>
<td>----------</td>
</tr>
<tr>
<td>5</td>
<td>Commitment and Focus</td>
<td>26</td>
</tr>
<tr>
<td></td>
<td>Action Plan</td>
<td>26</td>
</tr>
<tr>
<td>6</td>
<td>Structure and Communications</td>
<td>27</td>
</tr>
<tr>
<td></td>
<td>Meetings</td>
<td>27</td>
</tr>
<tr>
<td></td>
<td>Communications</td>
<td>29</td>
</tr>
<tr>
<td></td>
<td>Coalition Staffing</td>
<td>30</td>
</tr>
<tr>
<td>7</td>
<td>Leadership</td>
<td>31</td>
</tr>
<tr>
<td></td>
<td>Structure – Committees and Workgroups</td>
<td>31</td>
</tr>
<tr>
<td></td>
<td>Leadership Skills</td>
<td>31</td>
</tr>
<tr>
<td></td>
<td>Types of Leadership</td>
<td>32</td>
</tr>
<tr>
<td>8</td>
<td>Decision Making</td>
<td>33</td>
</tr>
<tr>
<td></td>
<td>Decision Making Options</td>
<td>33</td>
</tr>
<tr>
<td></td>
<td>Chart – Decision Options Chart</td>
<td>34</td>
</tr>
<tr>
<td></td>
<td>Turf Issues and Areas of Conflict and Resolution</td>
<td>35</td>
</tr>
<tr>
<td></td>
<td>Exercise – Identify Possible Barriers and Suggested Resolutions</td>
<td>37</td>
</tr>
<tr>
<td>9</td>
<td>Recruiting</td>
<td>38</td>
</tr>
<tr>
<td></td>
<td>Recruitment and Retention</td>
<td>38</td>
</tr>
<tr>
<td>10</td>
<td>Fundraising</td>
<td>38</td>
</tr>
<tr>
<td></td>
<td>Budget</td>
<td>38</td>
</tr>
<tr>
<td></td>
<td>Key Considerations</td>
<td>39</td>
</tr>
<tr>
<td></td>
<td>Developing a Funding Statement</td>
<td>39</td>
</tr>
<tr>
<td></td>
<td>Where to Look</td>
<td>39</td>
</tr>
<tr>
<td></td>
<td>Exercise – Where’s the Money?</td>
<td>40</td>
</tr>
<tr>
<td>11</td>
<td>Project/Activities</td>
<td>41</td>
</tr>
<tr>
<td></td>
<td>Engaging Members</td>
<td>41</td>
</tr>
<tr>
<td>12</td>
<td>Evaluation and Sustainability</td>
<td>41</td>
</tr>
<tr>
<td></td>
<td>Sustainability</td>
<td>41</td>
</tr>
<tr>
<td></td>
<td>Best Practices</td>
<td>42</td>
</tr>
<tr>
<td></td>
<td>Key Strategies</td>
<td>43</td>
</tr>
<tr>
<td></td>
<td>Evaluation</td>
<td>44</td>
</tr>
<tr>
<td>How to Recognize Success</td>
<td>46</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Exercise – How to Recognize Success</td>
<td>46</td>
</tr>
</tbody>
</table>
Appendices

Appendix A – Family Caregiving in the U.S. – Findings from a National Survey
Appendix B – Pretraining Questionnaire
Appendix C – Suggested Stakeholders
Appendix D – Needs Assessment Worksheet
Appendix E – Sample Vision Statement
Appendix F – Sample Mission Statement
Appendix G – Sample Goals/Action Plan
Appendix H – 501(c)(3) Application
Appendix I – Grant Writing Guidelines
Appendix J – Sample Funding Statement

References
INTRODUCTION

Background

Family caregivers are the backbone of the nation’s caregiving system, providing the bulk of support for family members who need help to remain in their homes and communities. Family caregivers assist family members who are suffering from illness or disability and grandchildren or other relative children who need a supportive environment. However, millions of these caregivers function in isolation, unaware of help they might find or available supports. Appendix A, Family Caregiving in the U.S. – Findings from a National Survey, identifies and profiles the impacts of family caregiving in society.

The nation’s caregiving system is less a “system” than a fragmented array of services administered by different public and private agencies with little coordination and often gaps in services. The Administration on Aging’s (AoA’s) National Family Caregiver Support Program promises significant new help to caregivers, but they cannot do it alone. Support from both public and private organizations and citizens in the community is needed.

Family caregiving coalitions can help develop new partnerships at local and state levels and present a coordinated approach to addressing the needs of family caregivers.

To address this need, the AARP Foundation in cooperation with the Administration on Aging (AoA) conducted research on existing caregiver coalitions on both the state and local levels to determine “best practices” in coalition formation. While there have been few coalitions developed on the state level specifically for caregivers, the experiences of other types of state coalitions and the experiences of local coalitions have provided valuable insights. This training guide, The 12 Keys to Building Caregiver Coalitions, is based upon the qualitative research we conducted on existing family caregiver and other human services coalitions. It is provided as a tool and reference document for organizations interested in forming caregiver coalitions, whether on a state or local level. Regardless of the scope of the coalition, this guide is intended to provide strategies for building as well as sustaining family caregiving coalitions.
**Getting Started**

**Exercise**

Think of a time in your professional or personal life when you worked with a group of people—it can be a recreational or work activity. What was that experience like? Who were the other participants? What was the goal to be achieved? How did the group pursue the goal? What was the outcome? What did the group learn and/or achieve? Record your thoughts here:

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Participants should be encouraged to identify and discuss the strengths of collaboration, the challenges faced at the organizational and personal level and strategies implemented to promote achievement of the goal. The strengths, challenges and strategies can be recorded on a flip chart for participants to reflect upon and reference during the training.

**Advantages and Disadvantages of a Collaborative Effort**

Groups interested in forming a coalition should review the advantages and disadvantages of a collaborative effort. By developing an understanding of why a coalition works, individual organizations will be able to see the benefit to the family caregiver in the community, to the coalition partners and to the coalition as a whole. Disadvantages should also be shared so that they are taken into consideration.

**Advantages**

- Allows an organization to increase its potential and have real impact on an issue
- Can develop new leaders
- Can increase the impact of each organization’s efforts and potentially reduce duplication of effort
- Can promote better understanding of the issues
- Increases available resources and potentially increases public awareness
- Broadens organization’s scope
- Builds a lasting basis for change
- Encourages networking

**Disadvantages**

- Members can get distracted from other work
- Coalition may only be as strong as its weakest link
- Keeping the coalition together may lead to catering to the lowest common denominator
- Democratic principle of one group—one vote is not always acceptable
- Individual organizations may not always get credit for their contribution
These advantages and disadvantages highlight several issues for consideration:

Collaboration vs. Competition – Those convening an initial group to discuss the feasibility of forming a coalition should be sensitive to the competitive nature of health and social service delivery systems. Funding mechanisms, insurance contracts and other environmental factors have preserved a competitive atmosphere. Existing service providers and/or collaborative efforts, which reach out to family caregivers or whose mission helps caregivers, may view another coalition in the community as competition.

Power structures – Power structures whether formal or informal (due to size, influence, range of service, etc.) exist and should be taken into account when forming a coalition.

Resource flow – Differences may exist between resources being contributed by individual partners for the good of the coalition. Collaboration supports mutual beneficial growth. Collaborative groups need to guard against being subject to the 80/20 rule where 20 percent of the partners do 80 percent of the work.

Benefits of a Coalition

Defining the benefits of a caregiver coalition can help partners recruit new members, rally existing coalition members around caregiving issue(s), and create momentum for the coalition.

Benefits for Caregivers

The coalition has been convened to address issues related to the experience of family caregivers. The benefits for family caregivers may include:

- New and improved services delivered to more caregivers
- Enhanced access to information and referral services
- Advocacy for state and federal legislation
- Support networks or groups

Can you think of other benefits for the caregiver? On the following worksheet, list benefits for family caregivers that could occur as a result of the activities of a coalition.
Benefits for Caregivers Worksheet

Please list benefits for caregivers.

Benefits to Partners

Benefits to individual partners may include:

- Enhanced knowledge of other service providers in the community
- Opportunity for networking and new partnerships
- Development of services or resources to help those served by partner
- Increased skill building and competence
- Enhanced awareness in community
- Joint work among partners toward common goals

Take a few moments and think about benefits which individual partner organizations can obtain by participating in the coalition. Record these benefits on the following worksheet.

“Let people know what it is to be a good coalition member, and some of the ways they could contribute.”

---

Benefits for Partners Worksheet

Please list benefits for partners of the coalition.

Benefits for the Coalition

The benefits for the coalition as a whole may include:

- Development of tools and services
- Effective strategic planning
- Enhanced influence in advocacy or legislative process
- Information sharing
- Communication and understanding of different roles among partners
- Ongoing vehicle for education

Spend some time thinking about the benefits for the coalition as a whole. Are there other benefits that an entire coalition can obtain? The following worksheet is provided to record these benefits:

Benefits for Coalition Worksheet

Please list benefits for the coalition.
Where Are We?
Before convening a coalition to help family caregivers, conveners should review existing demographic information about the state, region or local community and information available about family caregivers in the community. It is also important to find out if and when a needs assessment has been conducted on the needs of family caregivers or if family caregiving issues were included in a larger assessment of community needs. Even if the information is dated, it provides a starting point. Update this information with any existing information and reports on family caregiving. This information will help define the reasons that organizations and individuals are brought together and can be shared with organizations you invite to join an exploratory meeting on forming a coalition.

Some of the questions, which can be raised in this preliminary assessment, include:

- How many family caregivers are there in the area?
- What services or resources are available to the caregiver?
- What is the current level of utilization of these resources and services?
- Are there caregivers who are not utilizing services? If so what is an estimated number? Why are they not using services?
- What types of caregiving are families providing in the community?
- What are the barriers to access for the caregiver (time, cultural difficulties, filial or spousal responsibility, communication gaps, overwhelmed feelings)
- What coalitions relating to caregiving exist?
- What is the racial/ethnic breakdown?

Definition of Community
A definition of community itself should be determined early in the planning process. Community can be defined as geographically, by a set of people or organizations with common ties, by professional discipline, by ethnicity or by other affiliations. How does your intended coalition define community?

The information gathered thus far can be supplemented with knowledge from those invited to the exploratory meeting (initial planners) by asking them to complete a brief questionnaire to get their views on the need for a coalition. See Appendix B --Exploratory/Pretraining Questionnaire.
**Exercise**

Most of you should have completed the Pretraining Questionnaire prior to this session. One of the questions was your view of the need for the coalition. Reviewing the results of the questionnaire will help us as a group establish a starting point and develop an understanding for the coalition planning.

Record your notes here from our discussion of the results of the questionnaire:
KEY 1 – PLANNING

Planning is essential to the success of building a coalition. This activity precedes the very first organizational meeting of the coalition and extends throughout the existence of the coalition. Planning helps to rally those initially invited to participate, creates and validates the vision and mission and serves as a check on progress.

Common Vocabulary

Before we begin to plan, however, it is necessary to have a common understanding of certain key words that will be referenced in the planning process. Although these words may be defined differently for other projects and activities, it will be helpful if we keep in mind the definitions listed below for the purposes of this training.

- **Coalition** – Two or more organizations that work together to address family caregiving issues.
- **Needs Assessment** – A process to identify the needs of caregivers and available services in a community so that gaps in services can be identified and needed services can be provided.
- **Vision Statement** – Statement of your big picture dream of the way things should be.
- **Mission Statement** – Statement of what you are going to do to accomplish your dream—it explains your purpose.
- **Goals** – The achievable actions agreed upon by the coalition. Goals can be long term, middle term, or short term.
- **Objectives** – What needs to be done to achieve the goal.
- **Tasks** – Specific steps to achieve an objective.

Why a Coalition?

Information gathered to this point will help in assessing the need for a coalition and provide information helpful in dialogue with potential partners and contributors of resources.
Needs Assessment

A formal needs assessment is not always required. The information gathered thus far may be sufficient to identify the needs of caregivers in the community. If, however, some of the information is outdated and not adequate to identify the needs of family caregivers in the current environment, the coalition may want to undertake a needs assessment study as one of its first projects. Local colleges and universities are good resources in conducting needs assessments because of their research expertise.

Conducting a needs assessment has a cost and requires an associated budget, depending upon the type and scope of the assessment to be conducted. The budget and timeline for completion should be considered in the planning process.

The extent of the needs assessment can vary, based upon the budget and areas that the coalition has identified as containing the greatest gaps in knowledge. For example, a needs assessment may include some or all of the following:

- Survey of caregivers
- Survey of service providers
- Survey of other community groups and organizations with a voice in caregiving issues
- Focus groups
- Town hall meetings

The Needs Assessment Worksheet in Appendix D may be of assistance in identifying the kinds of information that can be helpful.

Preliminary Stage

This important preliminary stage includes:

- Preliminary assessments of:
  - Family caregivers and their experience in the state, regional or local community
  - Services available to help family caregivers at different points that fulfill different needs throughout the caregiving periods
  - The community's experience in collaborative efforts
- Definition of community
- Consideration of the advantages and disadvantages of a coalition
Once this work is done, a clearer picture is before us, which defines the reasons for collaborating and paves the way to identifying potential partners. The following is an exercise, which could be useful in identifying potential partners.

Exercise: Whom Should We Invite?

Take a couple of minutes and think about which organizations to invite to participate in a discussion about the family caregiver’s experience in your community. Think about some of the usual providers of service who may have an interest in this topic but also think of others who may be concerned about family caregivers or come in contact with family caregivers. Make a list of invitees here:

Key Stakeholders

The following is a list of types of organizations and/or individuals you may wish to invite to join a collaborative effort to address the needs of family caregivers. A more detailed description of the organization types can be found in Appendix C:

- Family caregivers
- Public and private organizations
- Voluntary health organizations
- Advocacy organizations and membership groups
- Employers
- Faith-based organizations and faith communities
- Cultural/diversity (Groups that represent different cultures within the community)
12 Keys to Building Caregiver Coalitions
Training Guide

- Nontraditional organizations and groups (Think “out of the box”)
- Existing coalitions
- AARP state offices and representatives from AARP chapters and NRTA unit members
- Medicare regional offices
- U.S. Health and Human Services Administration on Aging regional offices, state departments on aging and local AAA offices
- Political leaders
- Media
- Kinship care organizations
- Women’s groups
- Veterans organizations
- Legal service providers
- State and local government
- Colleges and universities
- State and local professional associations of educators
- Cooperative Extension Offices

Coalition Formation

Types of Collaboration

There are different types of collaboration. In order to begin to define expectations and the role of a partner, it would be good to review the different types of collaborative efforts that exist. One of the categories identified in the literature suggests the following types:

<table>
<thead>
<tr>
<th>Networking</th>
<th>Exchanging information for mutual benefit (does not require much time or sharing of turf)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coordinating</td>
<td>Exchanging information for mutual benefit and altering activities for a common purpose</td>
</tr>
<tr>
<td>Cooperating</td>
<td>Exchanging information, altering activities and sharing resources for mutual benefit and common purpose</td>
</tr>
<tr>
<td>Collaborating</td>
<td>Exchanging information, altering activities, sharing resources and a willingness to enhance the capacity of each other for mutual benefit and common purpose</td>
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</tbody>
</table>

It can be seen in the types of collaborative efforts shown that both the level of commitment and direction of sharing differ.

**Purpose of Coalition**

Preliminary meetings, assessment of the family caregiver experience and community, and a planning process, which includes the creation of a vision and mission, contribute toward the definition of a role for the coalition. In other words, what will this gathering of expertise contribute toward the support of the family caregiver? Some possible purposes for a family caregiver coalition include:

- **Advocacy** – the coalition becomes a voice with the family caregiver advocating for changes in the law and regulations. This can include working with the local, state and federal governments to effect change. The coalition may select one particular group of family caregivers (i.e., caregivers of older persons or grandparents or other relatives caring for children under the age of 18).

- **Outreach** – Outreach includes providing information, education and referral services. Information provided to caregivers may be limited in scope, depending upon the organization providing the information. Funds for outreach may be limited within organizations. The coalition may gather to improve outreach to the community.

- **Raising Awareness** – A problem of self-identification exists among family caregivers. The coalition may help tell the story of the family caregiver to raise awareness of the resources available to caregivers. Awareness building may also take place with employers and others who interact with family caregivers in their day-to-day lives.

- **Service Provision** – Coalitions may identify gaps in service delivery in the community. There should be some caution here since partners usually deliver services. A coalition may want to see if identified service gaps may best be filled by partners rather than having a coalition manage a service.

Coalitions can also be classified as grassroots, professional or community based. These categories can inform the purpose of the coalition.

**Coalition Scope**

The definition of community and an initial idea of the purpose of the coalition can help to define the scope of the coalition. Scope can be defined in several ways.

- **Geographic** – The scope of the coalition complements the definition of community. Is the community defined on a state, regional or local level? It

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3 ARCH National Resource Center for Respite and Crisis Care Services, 2002, *Building A Statewide Respite Coalition Where Do We Begin?*, p.5
may be possible for a collaborative effort to develop a network so that there is both a state and local presence with a given initiative.

- **Resource Levels** – The resources available can define the scope of the coalition’s work. This will be discussed later in the planning section.

- **Partners/Members** – The partners who join the coalition and who are willing to commit time and resources toward success may also define the scope of the coalition’s work.

The scope of the coalition may also change over time.

### Catalyst for Formation

Recent exploratory research shows that many caregiver coalitions were formed in the past five years, and few were over eight years old. The primary catalyst for forming fell into four categories:

1. **As a result of state or national legislation**
2. **As an outgrowth of a state or local task force, or educational institution focused on addressing social service needs**
3. **Groups of caregivers seeking to band together who then sought agencies and organizations to strengthen resource availability (grassroots technique)**
4. **To fulfill funding requirements specified by foundations or legislation**

The AARP Foundation National Training Project (Building Strategic Alliances) provides suggestions to consider when forming a coalition. Looking at the following suggestions from this project is a good review of the starting considerations.

- Examine the reasons to form an alliance
- Identify the issue for which unified action would seem more fruitful than individual action
- Define the scope of the situation that the alliance will address
- Circumscribe the geographical or jurisdictional territory to be included within the alliance
- Estimate the coalition’s lifespan

The same project also suggests the following factors for potential partner organizations to consider:

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4 AARP Foundation National Training Project, 2000, *Building Strategic Alliances*, p. 7-9
“Recognize what your organization stands to gain for itself from entering the alliance

Assess whether your alliance will speed up, slow down or impede your progress if your organization is already engaged in an effort to address the issue

Determine what role your organization will play in the alliance

Realize that building a successful alliance is an intense process that involves trust, time and a great deal of effort

Weigh the human and financial costs to your organization if it has been invited to join an alliance.” 5

The next step in the formation process is to compile a list of invitees for a meeting to discuss the potential coalition. When thinking of this list it is good to be as broad as possible.

Desirable Member Characteristics
As the membership is convened, it may be important to keep certain characteristics in mind.

- **Influence** – Influence can be looked at in a variety of ways. Desired partners would have influence in the community and/or influence in gathering others to the table.

- **Leader/Contributor** – Invited partners may include the leadership of an invited organization and/or those who contribute to the success of an organization. Leaders can make decisions on the extent of participation and the sharing of resources to achieve coalition goals. Contributors can help to define issues, inform content and address needs.

- **Commitment to Goals** – Partners should exhibit commitment to caregivers and to caregiver issues. This may not be apparent in the beginning but should be monitored as a coalition forms and acts. Partners who can contribute to the fulfillment of the goal of the coalition are most welcome as are those who can serve as resource partners.

- **Diversity** – This was mentioned under membership categories but should also be listed here to make sure that the overall membership represents the unique cultural and ethnic groups in the community. A profile of the caregiver in the community (not just those receiving services) should be compiled and the invitee list should be reviewed for inclusion.

5 AARP Foundation National Training Project, 2000, *Building Strategic Alliances*, p. 7-9
12 Keys to Building Caregiver Coalitions
Training Guide

- **Inclusion** – An open door approach works best. Keep asking during the initial and subsequent phases of development, “Who should be at the table?”

- **Potential Collaborative Leadership** – Invite a combination of informal and formal leaders from the community to participate in the coalition. These partners can help to provide leadership to the overall coalition, be identified for succession later on and perhaps provide leadership to individual efforts and projects of the coalition.

- **Consensus and Compromise** – A desire to work toward consensus would be a desired trait among those gathered. Therefore, the ability to develop creative solutions in partnership with others is essential. This skill may be readily apparent with some partners or technical assistance may help other coalition partners gain skills in consensus building.

- **Partner’s Needs** – Important to the recruitment and ongoing retention of partners is an understanding of each partner’s needs and/or the needs of their organizations.

The following questions are ones to ask as you begin to plan invitations and team building:

- Why choose one or the other individual or organization? What resources can they provide?
- Is this the right time for them to join the coalition?
- How can they be involved?
- Are there any barriers to recruiting these partners? If so, how can these barriers be overcome?

As potential partners are approached, it is good to have a summary of benefits for the caregiver, the partner and the coalition available so that invitations can encourage collaboration.

**Stages of Growth**

We discussed the actions necessary to get a coalition started, and in our research of existing caregiver coalitions, two primary patterns arose:

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12 Keys to Building Caregiver Coalitions
Training Guide

1) Grass roots effort starts a coalition which tries to grow and apply for nonprofit status

2) Coalitions that emerge from a task force or from a university typically begin as nonprofit and evolve into larger entities.

The implementation of the coalition centers on committed and passionate leadership, clear administrative contact for the coalition, focused solutions with identified roles and committed resources to pay for actions and activities such as conferences, cross-training and materials.  

"If you're going to get a coalition going, you're going to need money, for stamps if nothing else.”

First/Organizational Meeting

Organization

The first meeting is an important one. It will be a time when representatives who know each other meet again and a first meeting between potential partners.

Invitations

The invitation process can involve several components. The first is contact by telephone to discuss the preliminary reasons for forming a coalition to help family caregivers. This call can be initiated by the planners seeking to form the coalition or by a subsequent contact made through networking. During these calls, organizers should take note of comments, reactions and suggestions. The calls should end with a call to action.

Following the initial solicitation of interested parties, a letter summarizing the details of a first meeting should be sent out. The letter can remind the potential partner of areas of common interest and possible mutual benefits.

Agenda and Meeting

The first meeting should have the characteristics of all subsequently scheduled meetings and include:

- Start and end on time
- Have an agenda
- Use a sign-in sheet
- Provide handouts

7 AARP Foundation, Building and Maintaining Coalitions For Aging, Mental Health, Substance Abuse, & Primary Care, An Experience-Based Guide, pp. 7-10
Make sure everyone has an opportunity to talk

Record minutes and distribute minutes before the next meeting

Have a comfortable meeting space and simple refreshments

Make sure decision making strategies are implemented appropriately

Choose a facilitator to lead difficult discussions if appropriate

**Introductions**

Have each share their name, organization and title and answer the question of how their organization helps family caregivers or why they are interested in family caregiver issues. Allow time for this process. Persons by nature of affiliation want to share what they know, who they are, and what their organization has accomplished or is actively working on that addresses family caregiver issues. This introductory experience allows them to share that information up front and may minimize interruptions later in the coalition formation process. It is also a great introduction of the expertise, both personal and professional, that exists in the room. You may even have had a brief bio constructed on each attendee and their affiliation prior to the first meeting of the potential partners.

This introduction exercise should also take place at the beginning of the strategic planning process and for new partners at the first meeting they attend.

**Setting the Ground Rules**

The ground rules are to be identified by those gathered. The facilitator can begin the dialogue to identify the ground rules. Make sure that compromise and consensus building are mentioned in some way. If not, the facilitator should encourage the group to identify them as ground rules.

**Subsequent Meetings**

Subsequent meetings should have the characteristics listed above. A review of actions identified at the previous meeting should take place.

**Capabilities Assessment**

A survey should be conducted after the first meeting to assess the internal capabilities of the coalition. Suggested questions may include:

- What issues face the family caregiver today?
- What services does your organization provide to help the family caregiver?
Or what services do you refer family caregivers to for assistance and support?

What strengths does your organization bring?

What strengths do you as an individual bring?

What barriers do you see to the work of a coalition such as this? What solutions would address these barriers?

What previous experience have you had with collaborative efforts?

The capabilities and capacities of the coalition help define realistic and achievable goals.

The following worksheet will help the coalition gather information on capabilities:

**Coalition Capabilities Worksheet**

**Capabilities**

1) List the services provided by the individual coalition partners.

2) List the strengths each partner (organization) brings to the coalition.

3) List the strengths each partner (individual) brings to the coalition.

4) What time, talent or funds can partners contribute to the work of the coalition?

5) If events or projects have been completed by the coalition, what did evaluations or feedback tell the coalition about their talents or strengths as a group?
Areas for Development

1) What resources does the coalition not have access to?

2) What are some of the challenges faced by the coalition?

3) What are some of the external environmental factors that affect the work of the coalition?

Areas for Growth

1) What opportunities are present in the community that could help the coalition achieve its mission?

2) Are there organizations that should be invited to join the coalition?

3) Are there recent events (laws, requests for proposal, grant awards, etc.) that could contribute to the coalition’s mission?
Challenges to the Coalition

1) Are there other collaborative efforts or organizations that might view the work of the coalition as a threat?

2) Have there been recent changes in legislation or budgets that impact the effectiveness of the coalition?

3) Is the awareness level on the issue of family caregiving where it should be?

The partners should complete this capabilities review as a group. The dialogue may help inspire or remind partners of information that may be helpful to the coalition’s work. The entire group should review the information listed to see if there is consensus and if anything is missing.

Information from this capability assessment can be added to the preliminary assessment gathered as part of the formation process. The coalition may view the internal/capability assessment as a fluid process and revisit it periodically when planning projects and activities.

Before beginning a formal planning process the following should be taken into consideration:

- You may not want planning to be the very first activity of the coalition. Remember that success can be dependent upon the concurrent processes of action and formation. So perhaps it would be good for the coalition to work together on a specific achievable event or project, such as a more formal needs assessment project or educational conference.

- Consider the length of the planning process. State an end date so that those involved are convinced of the reality of a final product. Also, in light of time availability of partners, give thought to how the planning meeting(s) or activity will take place (frequency, duration etc.).

- Hospitality is important. Have food, refreshments, breaks, etc.
Consider who will facilitate the planning process. An outside facilitator may be best. Even if the coalition has convened in a neutral setting, the informal leaders who have brought together the group initially may not be the best to facilitate planning.

Facilitators should be skilled in explaining each step so that those gathered understand, keep the process moving along, encourage participation from every person, act as a conversation traffic cop, make sure everyone is heard and no one monopolizes the airwaves, make sure all terms are defined (most important for family caregiver participants), that statements are clarified or summarized, and intuit and gauge how the members are feeling about the process by asking questions.

Have stationary and audiovisual materials available for the process.

**Review of Preliminary and Capability Assessments**

The facilitator or member of the group should be invited to present the information from the preliminary and capability assessments completed at the beginning of the coalition process.

Those gathered should be invited by the facilitator to confirm, suggest revision or add to the assessment information. The idea in this step is to work toward a picture of the family caregiver, how she or he is doing in the community, and what services or resources are available to help.

Family caregivers do not self-identify well and therefore their needs are not revealed in current service statistics. Some of the estimates and projections suggested in the preliminary assessment can help to define unmet needs.

The gaps identified can indicate possible areas where collaboration in a state, region or community can assist family caregivers. Identified environmental factors and a picture of the family caregiving experience in a given community contribute to assessing the need for a community-based coalition and may indicate some initial directions for the coalition, including advocacy for legislation or educational outreach or planning to meet unmet needs. The information gathered would also help in the solicitation of funding as well as educating potential collaborators. The work you do will also identify possible areas of importance for recruiting partners.

The review of previous collaborative efforts may indicate a competitive environment. As a result, those convening a coalition may need to spend time building trust and creating cooperative working relationships.

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8 AARP Foundation National Training Project, *Building Strategic Alliances*, 2000, 24-25
9 AARP Foundation National Training Project, 2000
This review process summarizes what is known by the partners and by the group as a whole and can serve as a valuable introduction to the visioning process.

**KEY 2 – VISION STATEMENT**

*Importance of Vision and Mission*

Coalition partners need to develop agreement and have a clear understanding of why the coalition exists and their role in the coalition if they are going to be effective participants. Mechanisms to achieve these goals include the process of developing a vision and mission for the coalition and goals for action.

A clearly stated vision and mission helps all partners feel vested in coalition activities. The vision and mission identify the benefits of joining the coalition, contribute to clearly defined goals and support working relationships between the partners.

*Vision Statement*

A coalition needs a vision. Without one, why bother? A vision is a global concept, our dream of the way things ought to be and a mental image of what success would look like. It is the pursuit of this image of success that will motivate the partners of a coalition to work together. The authority and vision of a few people cannot shape and drive your coalition—it must be a powerful and shared vision.

**Vision Statement Worksheet**

*Take a few minutes and record answers to the following questions:*

*What are the top three dilemmas experienced by family caregivers today?*

1. 

2. 

3. 

“We’ve made a point in most cases with our partners to develop formally a MOU so that expectations are the same on both sides.’
List five services that could help the family caregiver.

1.

2.

3.

4.

5.

The questions you answered on the worksheet are intended to start your thinking about a vision for the future.

✿ Exercise: Vision Statement

Please read the following question and then write down two responses below.

If your hopes and dreams came true, what would this community look like five years from now with respect to the family caregiver? In other words, what changes or improvements would enhance the family caregiver’s experience?

1.

2.

See Appendix E for Sample Vision Statement.
KEY 3 – MISSION STATEMENT

Mission Statement

If the vision statement is the articulation of a group’s dream for a bright future, then the mission statement is its declaration of purpose. Your mission is what you are going to do to accomplish your dream and why.

A clear mission statement lets outside people know what general activities your coalition will undertake and who will be the beneficiaries. It explains the problem or need your coalition is trying to address and the common values, principles or beliefs guiding it. It communicates the essence of the coalition and what makes it unique. If you encounter resistance to this exercise, emphasize the benefit of the process to the exercise.

Exercise: Mission Statement

What are the two most important things that have to happen or be accomplished in order to bring about the change/improvement identified in your vision with respect to the family caregiver? Relate the mission statement to the vision statement developed by the group. Members can be ambitious and daring here.

1.

2.

Partners should participate in a facilitated discussion about the two things they recorded during the mission statement exercise. Dialogue with the facilitator and
partners will help to group similar responses and prioritize which statements are important for consideration as part of the coalition’s mission statement.

A mission statement that incorporates or captures what has been shared should:

- Describe what will be accomplished and why
- Be concise (preferably one sentence in length)
- Be outcome oriented, stating a broad goal or goals that will be achieved
- Be generally worded enough to allow a broad number of strategies
- Give a general idea of the strategies that will be used to make a vision a reality.

The coalition partners should agree on the vision and mission statements. See Appendix F for Sample Mission Statement.

**KEY 4 – GOALS AND OBJECTIVES**

The goals of the coalition will define the achievable actions agreed upon by the coalition.

To this point, the partners have developed a vision and mission and identified external and internal factors and resources, which can affect the work of the coalition. Partners should then develop goals to prioritize the actions to be taken that are consistent with the vision and mission statements and capabilities of the coalition.

The following worksheet asks the partners to list two goals for the coalition.

**Goals Worksheet**

`List two goals for the coalition:`

1) 

2) 

The partners should share their written goals.
Exercise for Setting Goals

A facilitated discussion will help identify similarities and differences to help partners reach consensus on goals.

Partners should then review the goals as a group and indicate whether the goals are short term (within 12 months) or long term (one year or more).

Partners should also be invited to review the goals in terms of influence (“I”) and control (“C”) according to the following categories:

- **I and C** – Coalition has both influence and control in accomplishing this goal
- **I and not C** – Coalition has influence but no control in accomplishing this goal
- **Neither I nor C** – Coalition has no influence and no control in accomplishing this goal.

Following this evaluation of the goals, the partners should be asked to vote on the goals by selecting the two goals for the coalition of those listed.

Keep all of the recorded goals. Some may be helpful in future planning even if not selected during this process.

Appendix G contains a sample goals statement.

KEY 5– COMMITMENT AND FOCUS

**Action Plan**

An action plan is a blueprint that lays out the steps necessary to ensure efficiency, accountability and success. The next exercise helps partners of the coalition to formulate an action plan. This exercise should be done when energy is high. This could be done outside of the strategic planning meeting(s) as a way for momentum to be established.

To guide the partners the worksheet included in Appendix G is a Sample Goals/Action Plan.
The worksheet includes:

- The selected goal(s)
- Objective(s) to achieve the goal
- Actions/Tasks to achieve objective
- Responsibility
- Timeline
- Resources Needed
- Communication (Who should know what)

Scenario – Commitment and Focus

The coalition has been meeting monthly for six months, but attendance has been dwindling. What could you do to increase attendance?

KEY 6 – STRUCTURE AND COMMUNICATIONS

The operations of the coalition contribute to its success. In this section, information will be shared on leadership options, decision-making strategies, meetings, the importance of communication, staffing the coalition and recruitment and retention.

Meetings

Ground Rules

The importance of meetings and regular communication cannot be overemphasized for the success of a coalition. Some of the important points regarding meetings can be found in the beginning of the section on planning, including the establishment of ground rules, an agenda and timely communication.

Adapted from AARP Foundation National Training Project, 2000, Building Strategic Alliances
While some of the following was shared previously it is a good review. Meetings can be kept effective by:

- Adopting a regular meeting schedule
- Setting an agenda – include an opportunity for all to send in ideas for the agenda
- Minutes that provide a timely and complete description of what occurred so that those who could not make it are informed
- An opportunity in the agenda for a select number of partners to talk about their organization and what they do
- Updates on all active projects
- Continually:
  - Keep the vision and mission in mind
  - Ask who is not at table and identify how to invite
  - Seek consensus
  - Address disagreement

**Meeting Characteristics**

Upon meeting, expectations should be defined. A review of some of the facts from the assessment can help those gathered reconnect with the reasons they are meeting. The ARCH National Resources Center has documented what they found to be the common characteristics of a successful coalition, which can also be applied to meetings:

- Common goals and sense of purpose
- Joint decision making
- Shared power and responsibility
- Trust and open communication
- Personal integrity and flexibility
- Self-evaluation
- Teamwork
- Recruitment and orientation

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★Best Practice★

Print the vision and mission statements at the top of every set of minutes.

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11 ARCH National Resource Center for Respite and Crisis Care Services, 2002, *Building A Statewide Respite Coalition Where Do We Begin?*, 7
Communications

Regular and consistent communication is important to the success of the collaboration. Practical ideas for internal communication include:

- Establish a listserv so that emails can be used effectively for communication. One individual who will screen requests and send out information should control the listserv.

- Develop a contact list, which contains name, title, organization, street address, city, state, zip code, telephone number, fax number and email address. This list should be shared at each meeting and circulated to make sure the contact information is up to date.

- Share the phone numbers and email addresses of the leadership so that partners can contact the coalition between meetings.

- If possible establish a Web site or Web page for the use by coalition partners. This site could have bulletin boards for idea exchanges on current active projects and also have an area to post resources from technical assistance activity or from current projects.

External communication is also important to share the successes of the coalition:

- Have partners identify those in the community who should receive information include philanthropic sources, government, other collaborative efforts in the region, faith based organizations, professional and voluntary health organizations.

- Establish and utilize an email list for coalition updates and invitations to events and programs.

- Solicit the public information and relations service from one or more of the partners to extend information to the media.

- As mentioned, media should be invited to be a partner on the coalition.

- Plan for and have information ready to address opposition which may come from other collaborative efforts or organizations in the community.

- Create communication strategies that help promote partners in external communication.

“You need to be in constant communication with people.”

“We do teleconferences … talk about particular issues and it’s usually recorded and they can come back and listen to it if they missed that meeting.”
Coalition Staffing

Paid Staff versus Volunteers

Determining how the work of the coalition gets accomplished has been identified by coalitions as a key issue.

Paid staff or volunteers can support infrastructure and the work of the coalition.

The number of employed staff is dependent upon the available infrastructure funding. In most coalitions there is dependence on volunteer staff or in-kind contributions of partners. Leadership should be identified for the coalition to allow for a consistent presence with those in the external environment regardless of levels of funding and number of paid staff.

Coalitions should maximize the ability for partners to contribute in-kind services to complete identified actions and programs. The individual and organizational strengths identified during the internal assessment may serve as a guide to connect opportunity and resource.

For example, if there is a need for public relations work to report on the success of an event or to promote an upcoming program, the need should be presented to the partners to see if there is a partner whose organization could contribute their strength in public relations. Partners may be able to contribute in-kind services to support the infrastructure needs of the coalition.

Some partner organizations have a volunteer corps to support them. Does the work of the coalition serve as an opportunity to engage these volunteers?

Other partner organizations may have the resources to help co-sponsor events as a way of enhancing awareness of their organization in the community.

Partner organizations should also be reminded of the value of the coalition and its work so that they can identify opportunities that may arise within their organizations and that can be enhanced through coalition involvement.
KEY 7 – LEADERSHIP

“The leadership of the community coalition is usually not found in a single charismatic individual. Rather, successful coalitions disperse their leadership and develop it among the members of the coalition.” (Thomas Wolff, *A Practitioner’s Guide to Successful Coalitions*)

Structure – Committees and Work Groups

The structures found in the research of best practices varied from formal to informal. Some coalitions prefer a formal approach with elected partners filling specific roles of service for the coalition. Others prefer an informal approach to leadership with shared roles in leading initiatives or leadership that evolves from the ongoing development of the coalition. Subcommittees or work groups may be established to complete the work of the coalition. Leadership and partners of the coalition should help subcommittees with meeting management.

Some suggested structures included:

- Rotating Chair and Cochair positions
- Executive Committee
- Working committees as needed for projects/programs, needs assessment and fiscal affairs.

Structure should allow for both the growth of the coalition in areas such as relationship building and support the work of the coalition. To make the work of the coalition subcommittee or working group effective, suggested actions include creating workforces with clear goals, objectives and realistic work plans, including measurable indicators of success. Coalition leadership should review the progress of workgroups or committees. Each group working on an initiative should report back to the entire coalition on progress and resource needs.

Leadership Skills

Successful leadership skills include:

- Allowing opportunities for members to present their services without having the agendas of individual organizations overshadow the coalition’s agenda
- Involving other partners in the work and formation of the coalition early on
- Clarifying expectations
- Inviting others to join
12 Keys to Building Caregiver Coalitions
Training Guide

- Inspiring others, building confidence and cooperation
- Providing organization to the work of the coalition
- Serving as a good communicator
- Developing new leaders
- Managing resources
- Building consensus

Collaborative leaders, according to Chirslip and Larson, “inspire commitment and action, lead as problem solvers, build broad based involvement and sustain the participation of the partners.”\(^\text{12}\) The abilities “to resolve conflicts constructively, communicate clearly and honestly, facilitate group interaction and develop leadership in others”\(^\text{13}\) are also important.

Key to success for collaborative leadership is the building and maintaining of relationships.\(^\text{14}\)

**Types of Leadership**

There are a variety of kinds of leadership evident in organizations. Coalitions seem to flourish with a collaborative form of leadership. One specific type of leadership is servant leadership.

If there is to be encouragement of sharing of resources and skills for the betterment of fellow partners on the coalition, the servant leader model may best apply. In this model, the leader serves the coalition and in so doing contributes to the growth of other partners. According to Robert Greenleaf, there are ten characteristics of servant leadership\(^\text{15}\):

- Listen (Be receptive to what other people say)
- Heal (Look for ways to heal emotional hurts)
- Persuade (Don’t coerce)
- Conceptualize (Provide opportunities to generate concepts)
- Develop (Build opportunities for other people)
- Dream (Dream of future activities)
- Trust and build (Help build trusting relationships)

\(^\text{13}\) Wolff, 184.
\(^\text{14}\) Wolff, 173-191.
The leadership of the coalition should be evaluated periodically to make sure that it is collaborative. Inspired commitment and action and broad-based involvement by coalition partners are signs of effective leadership.

KEY 8 – DECISION MAKING

*Decision-Making Options*

There are various ways to make a decision within a coalition including:

- One person or team leader makes the decision
- A minority of members, such as a committee, makes the decision
- A majority decision is made that is binding for all
- Consensus decision making where all members matter and everyone has to be willing to live with the decision
- Unanimous decision making where all the partners matter and all must fully agree with the decision.

Different types of decision making may be required by different situations. The following chart shares different types of decision making:
### Decision Options Chart

<table>
<thead>
<tr>
<th>Option</th>
<th>Pros</th>
<th>Cons</th>
<th>Uses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spontaneous Agreement</td>
<td>- fast, easy</td>
<td>- too fast</td>
<td>- when full discussion is not critical</td>
</tr>
<tr>
<td></td>
<td>- unites</td>
<td>- lack of discussion</td>
<td>- trivial issues</td>
</tr>
<tr>
<td>One Person</td>
<td>- can be fast</td>
<td>- lack of input</td>
<td>- when one person is the expert</td>
</tr>
<tr>
<td></td>
<td>- clear accountability</td>
<td>- low buy-in</td>
<td>- individual willing to take sole</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- no synergy</td>
<td>responsibility</td>
</tr>
<tr>
<td>Compromise</td>
<td>- discussion</td>
<td>- adversarial</td>
<td>- when positions are polarized;</td>
</tr>
<tr>
<td></td>
<td>- creates a solution</td>
<td>- win/lose</td>
<td>consensus is improbable</td>
</tr>
<tr>
<td>Multi-Voting</td>
<td>- systematic</td>
<td>- limits dialogue</td>
<td>- to sort or prioritize a long list of</td>
</tr>
<tr>
<td></td>
<td>- objective</td>
<td>- influenced choices</td>
<td>options</td>
</tr>
<tr>
<td></td>
<td>- participative</td>
<td>- real priorities</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- feels like a win</td>
<td>- may not surface</td>
<td></td>
</tr>
<tr>
<td>Voting</td>
<td>- fast</td>
<td>- may be too fast</td>
<td>- trivial matter</td>
</tr>
<tr>
<td></td>
<td>- high quality with dialogue</td>
<td>- winners and losers</td>
<td>- when there are clear options</td>
</tr>
<tr>
<td></td>
<td>- clear outcome</td>
<td>- no dialogue</td>
<td>- if division of group is OK</td>
</tr>
<tr>
<td>Consensus Building</td>
<td>- collaborative</td>
<td>- takes time</td>
<td>- important issues</td>
</tr>
<tr>
<td></td>
<td>- systematic</td>
<td>- requires data and member skill</td>
<td>- when total buy-in matters</td>
</tr>
<tr>
<td></td>
<td>- participative</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>- discussion-oriented</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- encourages commitment</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

16 Note: Reproduced with permission from author Ingrid Bens, M.Ed, from *Facilitation at a Glance!, a condensed version of Facilitation with Ease!, AQP/Participative Dynamics, Cincinnati, Ohio/Sarasota, Florida. 1999.*

Scenario - Decision Making

The coalition has decided to hold an annual caregiver education conference. The date has been set, but there is disagreement about where the conference should be held. The university (which is a coalition partner) conference facility and a local conference hotel (not a coalition partner) have been recommended. The conference hotel is more centrally located and has ample parking, while the university facility is larger but is located outside the central city and has limited parking. The university facility is free, and the conference facility is available if credit is given in the marketing material. What could you do to reach a decision?

Turf Issues and Areas of Conflict and Resolution

Turf issues can occur within the coalition and are possibly related to structure, membership, opportunities, and organizationally and personally held values.

The following are areas where conflict can occur and resolution of conflict can be discovered.

Vision and Mission – The importance of a vision and mission were defined in the key to planning section. The lack of a clearly defined vision or mission can lead to conflicts among partners. Participation in the planning process, orientation to an established vision and mission or equal participation in any refinement of the vision and mission can contribute to resolution. A focus on shared goals versus differences among partners contributes to cooperation.

Expectations – Differing expectations as to the purpose of the coalition and of roles within the coalition can lead to conflict. Resolution can be found by clearly defining roles for participation in the coalition.

Competition for Funds – Another possible area of conflict can come about in the pursuit of funding. In communities or in the pursuit of certain goals (i.e., assistance to family caregivers) there can be limited sources of funds and/or several organizations may desire to pursue a given source of funds. Coalitions should have a conversation about how these situations will be viewed and addressed by the partners in the coalition. The result could be formally established guidelines or an informal agreement.

Faith-Based Organizations or Culture – The held beliefs of a faith-based organization or faith community or those from a different culture may become
evident in the work of the coalition. Opportunities should be provided for these differences to be shared and time spent on finding consensus if possible.

Ethical Issues – Practice within partner organizations supports the vision and mission of those organizations. There may be times that the ideas or plans of the coalition come in conflict with the policies of a partner organization. Time should be spent sharing these differences and developing workable solutions if possible.

Gaps in Communication – If communication is not complete and timely, there could be conflict that arises from gaps in communication. Partners may choose to withhold information to pursue opportunities. The importance of open communication should be accepted as a ground rule for partners. Leadership of the coalition should monitor communication and address situations where communication is not open and timely.

Decision Making – As noted in this section, there are various types of decision making. Decision making can be influenced by the partners’ differences in power in a community, territory of service, services offered and level of funding. Leadership should as much as possible encourage an environment where joint decision making is pursued by the coalition. Consensus building is a skill, which may be new to some members of the coalition. Technical assistance or skill development in reaching consensus may be needed. Leadership must also identify times when other forms of decision making are appropriate.

Consistent meeting schedule and effective meeting techniques – If meetings are not scheduled on a regular basis or meetings are not managed well to support a growing sense of trust among partners and collaboration, there can be conflict. Leadership and partners can create an environment of trust and opportunity for progress with a regular schedule of meetings and good meeting management strategies. Effective meeting management can also monitor the expression of personal interests and assure that the personal interests do not dominate the dialogue or agenda of the coalition. If there is considerable conflict over a given issue or activity, the coalition may choose to vote anonymously to avoid confrontational dialogue and to minimize the perceived power of other partners.

Sharing organizational services – There may be a lack of knowledge among partners of the services offered by other partners participating on the coalition. Partners at each meeting should allot time for the sharing of information. The sharing should be limited to the work of the coalition and not become an opportunity for advertising or promoting all services. Opportunities should be provided for participating partners to present their agenda or reason for participating in the coalition so that the shared knowledge of the coalition increases over time.

Power and Responsibility – Most partner organizations have a hierarchical structure. The coalition for success should invoke a highly participative and more
equal structure among all of the partners. Leadership should make sure that all partners have an equal role on the coalition.

Shared Leadership – Formal leadership roles as shared previously may not be the best type of leadership for a coalition. Formal roles may contribute to conflict between leaders and other partners of the coalition. To minimize this opportunity for conflict, leadership of the coalition may be shared by:

- Rotating facilitation and leadership of meetings
- Promoting leadership by different partners of activities
- Developing leadership of the coalition

Agree to Disagree – There will be times that there will be disagreement and consensus cannot be reached. The coalition should have a ground rule, which allows for the coalition partners to agree to disagree.

Membership – Conflict could evolve if there are gaps in the membership of the coalition. Leadership and other partners should be encouraged to suggest new partners who may have strengths that can help the coalition reach consensus or contribute toward planned activities.

🌿 Exercise: Identify Barriers and Suggested Resolutions

Participants should split up in groups and make a list of barriers and suggested resolutions that could arise in a coalition.
KEY 9 – RECRUITING

Recruitment and Retention

Due to changes in levels of interest within partner organizations or the creation of new objectives and actions there will be changes in membership. Of importance in regard to recruitment and retention are:

- Adopt active listening skills to identify areas of concern with current partners
- Utilize the contact network of existing partners to invite new partners
- Have an orientation packet with an annual summary of activity available for coalition partners to use with their own organizations and also with potential partners
- Periodically do an internal assessment to see how the coalition is doing and assess the satisfaction of a coalition partner.

 Scenario - Recruiting

ABC Utility is a key employer in the area. The coalition leadership (conveners) sent them a letter inviting them to a meeting to discuss being part of the coalition, but they have not responded. What could you do next to get them interested in participating?

KEY 10 – FUNDRAISING

Budget

In order to plan effectively for the work of the coalition it is necessary to create a budget, which identifies categories of expense and estimates cost and revenue. The calculation of costs should include funds for the infrastructure work of the coalition. This indirect cost should also be included each time the coalition plans a project.
Key Considerations

- **When** – Fundraising should be ongoing. Waiting until grant funds are exhausted is too late. As soon as one grant or source of funding is obtained, coalition members should be looking for the next. When the coalition is a result of a state initiative, funds may have been part of the state budget. However, because the funds are part of the state budget, they may be subject to budget cuts.

- **Who** – Some coalitions assign the fundraising responsibility to a paid staff member – if one is available. Others may assign the responsibility to a partner with fundraising experience. Still others may share the responsibility based upon the project or activity.

  The best approach is one that works best for the coalition. However, if a particular organization within the organization is the primary fundraiser, that organization may have or be perceived as having more control over the project or activity funded.

- **501(c)(3)** – Many grant opportunities are only open to organizations that have a 501(c)(3) tax exempt status, and this may limit the fundraising options. As a result, obtaining a 501(c)(3) status may be a project the coalition chooses to undertake to improve its fundraising capability. The Application for Recognition of Exemption, IRS Package 1023 is in Appendix H of this Guide.

- **Grant Writing** – Grant writing can be time consuming and difficult for those who do not do it on a regular basis. However, many organizations use The Common Grant Application Format, and it may be helpful to become familiar with this format. However, you should always contact grantmaking organizations directly to get their individual forms. Similarly, The Catalog of Federal Domestic Assistance publishes basic guidelines for preparing a grant that are available on the Internet. A printout of these guidelines is contained in Appendix I.

Developing a Funding Statement

Going through the exercise of putting down on paper the reasons organizations or individuals should give your coalition money is a good first step to starting your fundraising project. In doing this, you will have a statement that you can amend based upon the requirements of the funding source, but you will have the basic information available in one place. The Funding Statement utilizes the information developed in your planning process and presents it in a logical format so that it is easy to see the benefit of funding your coalition’s activities. A Sample Funding Statement is included in Appendix J.

Where to Look

Sources of funding exist in many places. A coalition should not be totally dependent upon any one source of funding. The coalition should utilize its
collaborative strength to identify available funds. Keep in mind that there may be some protection of turf here. Partners whose power position is fortified by a long-standing stream of funding from certain sources or newer partners seeking to establish themselves may both feel a sense of protectiveness over information related to funding or may see a possible conflict between their own plans for funding and that of the coalition.

**Exercise  Where’s the Money?**

*Take a few minutes to think about all the sources of money in a given community, which could support a coalition dedicated to helping family caregivers. Make a list of these sources here:*

<table>
<thead>
<tr>
<th>Funding Types</th>
</tr>
</thead>
<tbody>
<tr>
<td>In-Kind</td>
</tr>
<tr>
<td>Grants</td>
</tr>
<tr>
<td>Dues</td>
</tr>
<tr>
<td>Donations/Gifts</td>
</tr>
</tbody>
</table>

**Share the story**

As mentioned in external communications, develop stories of success in reaching goals and convey those messages and stories to funding sources in the local community.

“We work to spotlight and applaud good efforts.”
KEY 11 – PROJECTS/ACTIVITIES

Engaging Members

It is important to have a project or activity to keep members interested and involved. While meetings are important, there needs to be a project or activity that the group can work on together in a collaborative way. Each project or activity may have a separate budget, funding source, and committee structure. The activities the coalition has the resources and ability to undertake are important to review frequently and to obtain consensus of the members during the planning process.

KEY 12 – EVALUATION AND SUSTAINABILITY

Sustainability

Some coalitions are established for a specific purpose and time and dissolve upon completion of a given goal or objective—this may be more common in community organizing type activities. Other coalitions are established as ongoing structures. The strength of the collaborative effort and mutual benefit gained by partners fortifies the energy level of the coalition. Continually refining goals and objectives is important for caregiving coalitions that wish to continue their work in the community. Sustainability of either type of coalition is dependent upon several factors.

Best Practices

Best practices from the AARP Family Caregiver Coalition Exploratory Research include:

- Keep members involved
- Maintain a level of activity by planning and hosting annual or semiannual events, defining roles for participants
- Expand stakeholders if necessary as they relate to the mission
- Rotate leadership and administration of the coalition
- Gather input from those served by the coalition and utilize feedback with coalition
- Invite outside experts as speakers
- Provide technical assistance gained during projects to coalition members
Keep the focus realistic
Connect the topic with the needs and mission of existing or potential partners
Have a project or product which the coalition can work on together
Celebrate victories
Gain political and community support
Give recognition

Key Strategies
Key strategies can include:

- Nurturing partners by providing skill development, connections, communication vehicles, leadership roles and participation. There needs to be a give back to the members for their participation.
- Providing multiple levels of participation in the work of the coalition. Partners should share in the process and the outcome.\(^{17}\)
- The Community Work Station offers that attention should be paid to the 6 R’s:\(^{18}\):
  - Recognition (Recognize partners for their contributions)
  - Respect (Respect partners’ values, culture, ideas, and time)
  - Role (Clearly defined roles make partners feel valuable)
  - Relationships (Partners want the opportunity to build networks)
  - Reward (Partners expect the rewards of being part of a coalition to outweigh the costs)
  - Results (Partners respond to visible results that can be attributed to their participation in the coalition)
- The pace of development should be appropriate.\(^{19}\) A coalition does not want to overextend resources or go beyond its mission. Maintaining focus is important to success as is not overextending the resources of the group.


\(^{19}\) Mattessich, 2001
Continually monitor:
  - Leadership
  - Clarity and relevance of mission and vision
  - Receptivity of community
  - Feedback of coalition and from events/programs
  - Need for technical assistance and support
  - Financial resources
  - Outcomes
  - Division of labor
  - Visibility and public support

“It’s helpful to be able to talk to people from other collaborations on occasion, because you do get some ideas and some energy from that...”

Scenario – Sustainability

The coalition has been meeting for about a year, but one of the partners appears to be directing the work of the coalition towards the goals of the partner’s own organization. Because the influence is subtle, it is difficult to pinpoint. What could you do to make sure the coalition’s work is not just an extension of the goals of one organization?

Evaluation

What Is Evaluation?

Evaluating the work of a coalition involves gathering information and interpreting it to answer questions you have about the coalition’s work. It is a process that helps you measure your success in achieving your goals and objectives, and it can suggest ways to improve over time.

Why Evaluate the Coalition’s Work?

The answers to key questions can tell you if your coalition is on track, or needs to get back on track to meet its goals and objectives. The information can be used to help motivate coalition members, to build case statements when seeking funding or to market your coalition to the community.

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A Closer Look

The coalition’s vision, mission, goal statements, and action plans are obvious starting points for developing questions you want to answer.

It may be helpful to look at one example of evaluating an activity. Suppose one of your coalition’s goals is to hold an annual community conference for caregivers. You create a planning committee that picks a date, and plans an agenda, recruits speakers, invites organizations to set up information displays, requests resource materials to hand out, seeks publicity, plans registration, refreshments and so forth. After the conference is over, how will you know if your conference was a success?

In order to evaluate the success of your conference, you need to answer the following questions early in the planning process:

- What does success look like to you, your planning committee, the coalition and the caregivers? In other words, what is your vision, mission and goals for the conference?

- What are the specific activities planned for the conference? The answer to this question will help identify what you need to measure to find out if your conference was a success. Here are some suggestions:
  - How many people do you want to attend the conference?
  - How important is it to keep the participant cost low or no charge?
  - Do you need to raise funds for the conference, or need sponsors?
  - How many exhibitors do you want to have? Who?
  - What do you want participants to say about the conference (had fun, received information, know where to go for help, etc.?)

- How will you go about collecting the information you need to answer your questions? You could:
  - Have people register for the conference to count attendance
  - Set a nominal target registration fee and try to meet that goal within the conference budget
  - If you need to raise funds, set a fundraising goal and target donors, sponsors and exhibitors
  - Identify the types of exhibits you want, determine how many you can accommodate and then recruit to fit your needs. Track how many exhibitors actually exhibit on conference day
  - Conduct a conference evaluation for participants. This will require you to identify what you want to deliver to participants so you can measure
whether they received it (e.g., information, opportunity to network, printed resources, fun or social time).

- Who will analyze the information and report back to the coalition members? How will you compare your conference goals with the information you collect?

- How will you use this information? For example, will you use the information to improve next year’s conference or to pick a new goal?

Evaluation is an ongoing process of learning what works for your coalition and what doesn’t work for your coalition. It should be used to keep on track, improve performance and perhaps choose new goals. It should never be a punitive process or one that leads to blaming others.

If a local college or university is not already a coalition partner, you might want to approach one for help. At the same, you could invite them to be part of your coalition.

There may be times when your research question addresses the outcome or impact of an activity. For example, if the coalition produces an information guide for family caregivers, you may want to know if the guide led to a greater utilization of supportive services by family caregivers? Or, did the information provided help the family caregiver access more respite services? Answering these types of questions is difficult for a number of reasons. The ability to measure the impact or outcome of an activity requires sophisticated research techniques that are applied to “mature programs” by professionally trained researchers. As we move forward in addressing the needs of family caregivers there may be opportunities to measure the impact of caregiver interventions. If that need arises, the coalition will need to identify partners, such as university researchers, to design and implement the research and analyze and report the results.
HOW TO RECOGNIZE SUCCESS

Successful coalitions have characteristics listed throughout this training guide. In the discussion of the “12 Keys,” the important factors contributing to success are highlighted. As a reminder, the “12 Keys” are listed below:

- Key 1 – Planning
- Key 2 – Vision Statement
- Key 3 – Mission Statement
- Key 4 – Goals and Objectives
- Key 5 – Commitment and Focus
- Key 6 – Structure and Communications
- Key 7 – Leadership
- Key 8 – Decision Making
- Key 9 – Recruiting
- Key 10 – Fundraising
- Key 11 – Project/Activities
- Key 12 – Evaluation and Sustainability

Exercise: How to Recognize Success.

Think about what you would consider a success for the coalition. Write down five ways you envision success and why.

1. 

2. 

3. 

4. 

5.
APPENDIX B – EXPLORATORY/PRETRAINING QUESTIONNAIRE

Caregiver Coalition Participant Questionnaire

Date______________________________

I. Participant Information

Name ________________________________ Title ______________________________

Organization_____________________________________________________________

Address_______________________________________________________________

Phone _________________________ Email ________________________________

II. Scope of Coalition (Check as many as apply)

☐ Local  ☐ County/Regional  ☐ Statewide  ☐ Multistate

III. Purpose of Coalition (Check as many as apply)

☐ Advocacy  ☐ Information/ Education  ☐ Services  ☐ Community Awareness

☐ Networking  ☐ Legislative  ☐ Other ________________________________

IV. Brief Statement of Need for Coalition (Your view)

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________
APPENDIX C – SUGGESTED STAKEHOLDERS

Family caregivers – Include those to be served and those who are family caregivers in the categories defined (kinship care, care for older persons). Because of their personal care responsibilities, there may need to be discussion here as to how to invite family caregiver participation. For example, should a family caregiver who has recently completed the journey of caregiving be invited? Are there ways to solicit input from caregivers? What work does the coalition need to do to facilitate the family caregiver’s participation (i.e., orientation to terminology, making sure communication is two way, affirming needs identified in assessment)?

Public/Private – Be sure to invite those from both the private and public sectors of support for family caregivers. Government agencies and service providers from other organizations such as nonprofit organizations or faith-based organizations should be invited.

Stakeholders – Invite those in the community who are providing services to care recipients or caregivers. This would include health systems, hospitals, physician practices, social service agencies, legal services organizations, Area Agencies on Aging and home health providers.

Voluntary Health Organizations – Voluntary health organizations such as the Alzheimer’s Association, American Cancer Society, American Diabetes Association, MS Society, etc. Each of these organizations most likely has a local presence and may bring strengths in advocacy and supportive services for care recipients and caregivers experiencing different diseases, disabilities or chronic illness.

Advocacy Organizations and Membership Groups – Look to advocacy organizations for diseases and disabilities, but also include organizations that have caregivers as members for other reasons of affiliation such as senior groups, fraternal groups and chambers of commerce.

Employers – Statistics show that a large number of caregivers are employed. Inviting employers in the region helps extend awareness and contributes to creative approaches and sharing of resources. Include small, moderate and large-sized employers; include those in different industries or areas of service; include those who may have a business interest in caregiver issues (e.g., financial planners, long term care insurance providers); include those with creative Human Resources policies that are supportive as well as those who do not have such support.

Faith-Based Organizations and Faith Communities – Invite representatives of denominational leadership, especially social service agencies within faith-based organizations; invite faith leaders from the community as defined and try to identify not just pastoral leadership but also the leadership of outreach or health initiatives.
Cultural/Diversity – Diversity is an essential category of inclusion. A view of the overall community population helps define the goals for inclusion from different communities, which comprise the overall community defined for the coalition. What cultural groups, geographic or civic communities, etc., exist and need to be included?

Out of the Box – Think outside of the box. What other groups are in the community? Entertainment, the arts, education, parent groups, health and fitness organizations, etc. should be considered for membership.

Existing Coalitions – In the needs assessment we mentioned the need to review the history of other collaborative efforts in the community to serve as a barometer of how collaborative can function. Existing coalitions should also be invited to send representatives to the meeting.

AARP State and Local Organizations – Invite representatives from the AARP state office, AARP chapters and NRTA unit members. AARP’s contacts with those 50 years of age and older can help reach out to the care recipients and family caregivers in your community.

Medicare Regional Offices – Medicare regional offices are involved in the dissemination of helpful information to family caregivers. Inviting representatives from the Medicare regional offices can help identify family caregiver needs and provide a venue for the Medicare offices to disseminate valuable information.

U.S. Health and Human Services Administration on Aging Offices – For state coalitions, consider extending an invitation to the Administration on Aging regional offices to participate in the coalition. The Administration on Aging is home to the National Family Caregiver Support Program and can provide valuable information to states reviewing and developing effective means of outreach. State and local Department on Aging and AAA offices should also be contacted.

Political Leaders – Invite political leaders from all levels of local, state and federal government. While specific committee appointments or platforms may not specifically mention caregivers, the invitations should be extended.

Media – Media in a community, including print, Web, radio and television, should be invited. Partners may have expertise in services or caregiver issues. Media leaders are available in communities as experts in information dissemination.

Kinship Care Organizations – Invite representatives from any kinship care organizations in your state or community. A growing number of grandparents are raising grandchildren and representatives of these organizations can help identify the needs of this population and help inform content for outreach.
Women’s groups – Women, according to research, provide the majority of in-home care in our country. Include representatives from women’s organizations including advocacy organizations like the League of Women Voters and organizations formed around women’s health issues.

Veterans Organizations – Veterans are represented in those receiving care at home. The dissemination of information and supportive services via veteran’s organizations may be a good idea in your community. Look for Veteran’s Affairs health service providers, American Legion, Veterans of Foreign War and other veteran’s organizations. Inclusion of representatives from these organizations can also help define care recipient, caregiver and family needs in your community.

Government – Representatives from state and local government offices that have activities relating to caregiving issues can be valuable partners.

Universities and Geriatric Education Centers – Gerontology, Social Services, Human Services, Research, and other university departments with an interest in aging and intergenerational issues should be contacted. With their expertise in research, they may be especially helpful in Needs Assessment and evaluation activities.

State and Local Professional Associations of Educators – School board associations, state teachers associations, state principal associations, school guidance counselors, special educators, etc., can address issues important to grandparents and other relatives raising children.
APPENDIX D – NEEDS ASSESSMENT WORKSHEET

The following worksheet can be helpful in identifying the kinds of information that will be valuable in a needs assessment

Needs Assessment Worksheet

Part 1: Family Caregivers

<table>
<thead>
<tr>
<th>Information Needed</th>
<th>Possible Sources</th>
</tr>
</thead>
<tbody>
<tr>
<td>▪ How many family caregivers are estimated in the community?</td>
<td>▪ U.S. Census Bureau 2001 Supplementary Survey Tables: <a href="http://factfinder.census.gov/servlet/DatasetTableListServlet?ds_name=DSS_2001_EST_G00&amp;type=table&amp;lang=en&amp;program=DS&amp;S&amp;ts=78656054559">http://factfinder.census.gov/servlet/DatasetTableListServlet?ds_name=DSS_2001_EST_G00&amp;type=table&amp;lang=en&amp;program=DS&amp;S&amp;ts=78656054559</a></td>
</tr>
<tr>
<td>▪ What cultural groups are represented among the caregivers? What are the percentages?</td>
<td>▪ CDC Behavioral Risk Factor Surveillance Survey: <a href="http://apps.nccd.cdc.gov/brfssQuest/ResultsView.asp?StartPg=1&amp;EndPg=10&amp;TopicID=44&amp;fromyr=Any&amp;toyr=Any&amp;Text=&amp;Join=AND&amp;SUBMIT1=+Go+">http://apps.nccd.cdc.gov/brfssQuest/ResultsView.asp?StartPg=1&amp;EndPg=10&amp;TopicID=44&amp;fromyr=Any&amp;toyr=Any&amp;Text=&amp;Join=AND&amp;SUBMIT1=+Go+</a></td>
</tr>
<tr>
<td>▪ What is the estimated number of family caregivers receiving services?</td>
<td>▪ Administration on Aging: <a href="http://www.aoa.gov/prof/Statistics/statistics.asp">http://www.aoa.gov/prof/Statistics/statistics.asp</a></td>
</tr>
<tr>
<td>▪ What is the relationship between the caregiver and recipient?</td>
<td>▪ Individual State Departments of Aging</td>
</tr>
<tr>
<td>▪ Spouse</td>
<td></td>
</tr>
<tr>
<td>▪ Parent</td>
<td></td>
</tr>
<tr>
<td>▪ Grandparent/kinship</td>
<td></td>
</tr>
<tr>
<td>▪ Individual with development disabilities</td>
<td></td>
</tr>
<tr>
<td>▪ Relative</td>
<td></td>
</tr>
<tr>
<td>▪ How long on average has the family caregiver been providing care? (months, years)</td>
<td></td>
</tr>
<tr>
<td>▪ What percentage of family caregivers in the community are employed?</td>
<td></td>
</tr>
<tr>
<td>▪ Full Time</td>
<td></td>
</tr>
<tr>
<td>▪ Part Time</td>
<td></td>
</tr>
<tr>
<td>▪ Contractual</td>
<td></td>
</tr>
<tr>
<td>▪ What percentage of caregivers are providing care long distance?</td>
<td></td>
</tr>
<tr>
<td>▪ What are the primary conditions or illnesses of the care recipients?</td>
<td></td>
</tr>
</tbody>
</table>
### Needs Assessment Worksheet

**Part 2: Services**

<table>
<thead>
<tr>
<th>Information Needed</th>
<th>Possible Sources</th>
</tr>
</thead>
<tbody>
<tr>
<td>• What organizations in the community are providing care, services and support?</td>
<td>• National Family Caregiver Support Program Resource Room:</td>
</tr>
<tr>
<td></td>
<td><a href="http://www.aoa.gov/prof/aoaprog/caregiver/ca_reprof/state_by_state/state_contact.asp">http://www.aoa.gov/prof/aoaprog/caregiver/ca_reprof/state_by_state/state_contact.asp</a></td>
</tr>
<tr>
<td>• What services are being provided?</td>
<td>• AARP</td>
</tr>
<tr>
<td>• information and referral</td>
<td>• Administration on Aging</td>
</tr>
<tr>
<td>• respite</td>
<td>• Alzheimer’s Association</td>
</tr>
<tr>
<td>• caregiver support groups</td>
<td>• American Society on Aging (ASA)</td>
</tr>
<tr>
<td>• in-home services</td>
<td>• Area Agencies on Aging (AAA)</td>
</tr>
<tr>
<td>• case management</td>
<td>• Caregivers</td>
</tr>
<tr>
<td>• counseling/social work</td>
<td>• Chamber of Commerce</td>
</tr>
<tr>
<td>• meals on wheels</td>
<td>• The Children’s Defense Fund</td>
</tr>
<tr>
<td>• transportation</td>
<td>• Colleges and Universities</td>
</tr>
<tr>
<td>• financial assistance</td>
<td>• Community Organizations</td>
</tr>
<tr>
<td>• legal advice/assistance</td>
<td>• Educational Organizations and Associations</td>
</tr>
<tr>
<td>• health services</td>
<td>• Family Caregiver Alliance</td>
</tr>
<tr>
<td>• other</td>
<td>• Generations United</td>
</tr>
<tr>
<td>• What are the unmet needs identified by the professionals providing care?</td>
<td>• Health Providers</td>
</tr>
<tr>
<td>• How are services supported financially?</td>
<td>• Home and Community-based Services</td>
</tr>
<tr>
<td>• Where or what is the initial point of contact for services?</td>
<td>• Kinship Care Services</td>
</tr>
<tr>
<td>• Are urban, suburban and rural areas well served?</td>
<td>• Legal Aid</td>
</tr>
<tr>
<td>• Are all cultural and ethnic groups well served?</td>
<td>• Legal Counsel for the Elderly</td>
</tr>
<tr>
<td></td>
<td>• Local Networking Groups</td>
</tr>
<tr>
<td></td>
<td>• National Alliance for Caregiving</td>
</tr>
<tr>
<td></td>
<td>• National Association of Area Agencies on Aging</td>
</tr>
<tr>
<td></td>
<td>• National Council on Aging (NCOA)</td>
</tr>
<tr>
<td></td>
<td>• National Family Caregiver’s Association (NFCA)</td>
</tr>
<tr>
<td></td>
<td>• National Respite Coalition</td>
</tr>
<tr>
<td></td>
<td>• Nonprofit Organizations</td>
</tr>
<tr>
<td></td>
<td>• Respite Programs</td>
</tr>
<tr>
<td></td>
<td>• Social Services</td>
</tr>
<tr>
<td></td>
<td>• United Way</td>
</tr>
</tbody>
</table>
### Needs Assessment Worksheet

#### Part 3: Community

<table>
<thead>
<tr>
<th>Information Needed</th>
<th>Possible Sources</th>
</tr>
</thead>
<tbody>
<tr>
<td>▪ Are there other collaborative efforts/groups active in the community? If so:</td>
<td>▪ Networking</td>
</tr>
<tr>
<td>▪ What are their missions?</td>
<td>▪ Professional contacts</td>
</tr>
<tr>
<td>▪ How long have they been in existence?</td>
<td>▪ Business contacts</td>
</tr>
<tr>
<td>▪ Do any address caregiving issues? If so, what issues?</td>
<td>▪ Coworkers</td>
</tr>
<tr>
<td>▪ How are the communities defined that are served by these groups?</td>
<td></td>
</tr>
<tr>
<td>▪ Would any of these groups consider you a competitor?</td>
<td></td>
</tr>
<tr>
<td>▪ Who is participating in the existing collaborative?</td>
<td></td>
</tr>
<tr>
<td>▪ What challenges/difficulties have these groups faced?</td>
<td></td>
</tr>
</tbody>
</table>
APPENDIX E – SAMPLE VISION STATEMENT

Family caregivers in our state (or community) are able to live balanced lives and have the caregiving supports and services they need.
APPENDIX F – SAMPLE MISSION STATEMENT

To improve the experience of the family caregiver through a one-stop source for information and referral/access to service.
APPENDIX G – SAMPLE GOALS/ACTION PLAN

Goal: To provide information to family caregivers about services available at the state level.

Objective(s):
- Develop State Information Guide for Family Caregivers

Action(s):
- Develop criteria for information to be included in guide
- Develop tool to be used for inventory of services for caregivers
- Develop list of contacts/agencies to solicit for information
- Complete inventory of information and services helpful to family caregivers
- Contact state organizations that did not respond
- Draft information guide
- Send draft listings out for review and proof edit
- Identify method(s) of distributing guide
- Compile and make changes
- Print and disseminate

Responsibility:
- State Department on Aging
- AARP State Office
- State Senior Volunteer Corp Office
- Media

Timeline:
- Criteria, tool, list ........................................... End of first quarter
- Inventory and follow up ...................................... End of second quarter
- Method of dissemination, draft, edit .............. End of third quarter
- Print and disseminate ....................................... End of fourth quarter

Resources:
- State and Philanthropic funds
- Volunteer Hours
- In-kind contributions of partners

Communication:
- Monthly update to State Coalition
- Update to state agencies contributing information
APPENDIX J – DEVELOPING YOUR FUNDING STATEMENT

In order to sell your coalition to potential funders, you will need to present information on who you are, the need for your coalition, the benefits of your coalition and the benefits of financially supporting your coalition, whether through sponsorship, grants or government allocations.

An effective coalition is achieved through the engagement of the stakeholders including opinion leaders, policy makers, organizations, formal and informal caregivers, and community members. You will need to sell your coalition to both gain momentum to develop the coalition and to sustain it. Some sample statements on the mission, need, goals and benefits of coalitions have been provided to assist in positioning your coalition for potential funders.

Mission

Our coalition consists of 22 organizations representing the nonprofit, private and government sectors. Our mission is to improve the experience of the family caregiver through a one-stop source for information and referral/access service.

Need

The family caregiver is the primary source of support for those individuals needing assistance or care in our communities. While the informal family caregiver may be providing the largest amount of assistance as a group serving those in need, family caregivers are unorganized, vulnerable to changes in the health care industry and receiving less support as increasing numbers of individuals are needing care.

With the growing numbers of people who need support to live on their own and children being raised by others, private and public organizations are now offering many different options in the home and community. Public and private agencies offer a range of programs and services with no one agency able to meet all the needs of a caregiver. Social service organizations and public agencies generally have little interaction with each other, even if they are trying to serve the same consumers.

Our coalition recognizes the value of the family caregivers and their need for support, and the need for relevant research to assist decision makers on policy and best practices. Our coalition wants to strengthen the areas of availability, quality, standards and accountability.
**Goals**
Our coalition has four primary goals (your coalition may have more or less and should reflect your mission); Service Provision, Advocacy, Outreach and Awareness.

**Service Provision**
Our coalition serves to promote greater cooperation among all agencies delivering services to a community. Just as the family caregiver cannot be the sole provider, one agency cannot be the single solution. Our coalition links resources and agencies to expand capacity for service delivery in our state.

**Advocacy**
We serve as a voice for the family caregiver, advocating for changes in public policy and legislation. Our coalition proactively creates and introduces research, polices and best practices for decision makers. Our members serve as consultants to state and community leaders, promoting relevant research on caregivers and new innovations in service delivery.

**Outreach**
Our coalition markets information to community providers and family caregivers to increase accessibility and visibility of available services. A single service delivery organization does not have the incentive, scope or resources to provide the full spectrum of support services available in a community to the family caregiver.

**Awareness**
Our coalition generates visibility for caregiving issues, addressing the problem of self-identification among family caregivers and the overall lack of understanding in the public at large. Given the progressive demands of caregiving, many family caregivers do not recognize themselves as serving in a caregiving role. Our coalition raises awareness on caregiving issues, promoting resources available to caregivers and targeting information to employers and community members who have interaction with the family caregiver.

**Benefits of a Coalition**
The current service delivery system is fragmented and vulnerable to the constant changes in the health care system. One organization’s efforts cannot effectively address the challenges of the family caregiver alone. Through our coalition, we can significantly raise the visibility of caregiver issues, mobilize resources and advocate for funding and expansion of services. Benefits would include identifying a single point of entry and enhancing and enforcing quality of care.

**Benefits for the Family Caregiver**
Direct benefits for the family caregiver include improved support services, access to information and referral services, advocacy for state and federal legislation and
development of support groups. The family caregivers will be removed from isolation and recognized as a unified group to better position themselves for improved and additional support services.

Benefits to the Funder
By becoming a financial supporter of our coalition, you are becoming a partner in our efforts to improve the well-being of family caregivers in our state. We serve as a catalyst to improve services provided to caregivers, and we rely on the generosity and commitment of leaders in our state to support these ongoing efforts.

As a state coalition, we are in a position to leverage our resources to have a larger impact on state policy and legislation, impacting the quality of service delivery at the local level. Every dollar of your donation has a wider reaching effect by contributing to research, developing best practices and solidifying a fragmented network to support the family caregiver.

As a donor, you will be recognized in our publications, special events and media opportunities. You will have access to additional information sharing with our member organizations and receive quarterly updates on the progress toward our goals. Your donation is tax deductible to the fullest extent of the law.

“The second donation begins with the first thank you.”
REFERENCE


