INTERACTIVE PROCESSES IN GLOBAL PARTNERSHIP:
A CASE STUDY OF THE GLOBAL PROGRAMME FOR
HEALTH PROMOTION EFFECTIVENESS

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ABSTRACT

PURPOSE: The purpose of the present study was to gain insight into the real-world functioning of a global health promotion partnership.

Partnership working is highly advocated for in the field of health promotion. However, little information is available on partnership functioning at the global level. Most of the practical research on partnership functioning has investigated partnership at the community level. Thus, the present research had two specific goals. At one level, it sought to add to the general literature on partnership functioning by expanding on existing models. Secondly, the study was also conducted to benefit policymakers and practitioners of partnership at the global level by contributing an actual case study to the international partnership literature which is, at present, based largely on rhetoric.

METHOD: A case study was conducted of the Global Programme for Health Promotion Effectiveness (GPHPE). The data used in the study was a combination of document and interview data. Documents dating back from the programme’s inception were analysed for the study and 20 informants were interviewed. The interviews lasted between 30 minutes and 3 hours (completed in multiple sessions). A semi-structured interview guide was used during the interviews and was modified as needed during the data collection. Interviews were mostly conducted over the telephone and recorded for transcription. The data were analysed to address the research objectives: 1.) Identify the critical elements of inputs, processes and outputs in the functioning of a global health promotion partnership; and 2.) Identify the effects those inputs, process and outputs have on one another in the functioning of global health promotion partnership.

RESULTS: The data from the study clearly identified elements of input, process and output and interaction between these elements within the GPHPE. Three unique inputs were identified: the partnership problem, partner resources and financial resources. The critical elements of the partnership process were identified as leadership, input interaction, roles and procedures and communication. These elements contribute to a partnership context within which maintenance and production activities take place. Depending upon how these elements interact, positive and/or negative loops of interaction are created which shape the partnership context. Three types of output were identified as resulting from the interaction of partnership inputs: additive outcomes, synergy and antagony.

The data from this case demonstrate significant interaction between the elements of partnership. Inputs directly affect partnership functioning by providing essential ingredients needed or by contributing unique obstacles. Inputs can also affect each other by recruiting more resources for the partnership. Inputs can be affected by the partnership functioning and may also be affected by the output of the partnership. Partnership processes are clearly affected by inputs, as well as the interaction of elements within the partnership context.
Process can also be affected by synergistic and antagonistic output. Output is clearly affected by the contribution of inputs and partnership processes through production.

**CONCLUSION:** The main conclusion is that existing models of partnership do not adequately describe the functioning of the GPHPE. A new model, the Interaction Model of Partnership Functioning is introduced based on the findings of the present study. Certain elements of partnership functioning which are important at the community level also appear to be important on the global level. However, the present study found the role of the partnership problem to have a significant impact on functioning. The interaction of input, processes and output, is also a unique finding of the study. The insight gained from the present study offers practical utility to practitioners planning, implementing and evaluating global partnerships.
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1. INTRODUCTION
At every level of health promotion work, from one-on-one interventions to research and advocacy, partnership has emerged as a central way of working. Partnerships are viewed as essential in health promotion, both because of the value the field places on participatory ways of working, and because partnerships are seen as essential to link inter-sector resources.

It is widely recognised, within and beyond the field of health promotion, that in today’s environment, threats to health cannot be tackled by any single organisation or sector working in isolation (Gray, 1989; Lasker, Weiss, & Miller, 2001; World Health Organisation, 1986; Zuckerman, Kaluzny, & Ricketts, 1995). In 1978, the Declaration of Alma-Ata\(^2\) described the need for “coordinated efforts” from not only the health sector but also those concerned with agriculture, animal husbandry, food, industry, education, housing, public works, communications and others to promote health. The Declaration also calls for the countries of the world to work in a “spirit of partnership” to accomplish the goals of Health for All by the year 2000 (World Health Organisation, 1978).

The Ottawa Charter (World Health Organization, 1986)\(^3\) further illuminated a need for partnership in health promotion. The Charter describes nine prerequisites for health including peace, shelter, education and sustainable resources. The implication inherent in naming these prerequisites is that promoting health requires the joint initiative of diverse actors. Accordingly, the Charter makes reference to partnership in describing each of its five action areas: building healthy public policy, creating supporting environments, strengthening community action, developing personal skills and reorienting health services.

In building healthy public policy, the Charter calls for working in partnership with policy makers in all sectors, not just health. In creating supportive environments, it describes the interconnectivity of life and encourages the “reciprocal maintenance” needed from nations, regions and communities to “take care of each other, our communities and our natural environment” (p. 2). According to the Charter, strengthening community action happens by partnering with local people. Developing personal skills is possible through the collective efforts of educational, professional, commercial and voluntary bodies and should be “facilitated in school, home, work and community settings” (p.2). In the section on reorienting health services, the Charter states: “The responsibility for health promotion in health services is shared among individuals, community groups, health professionals, health service institutions and governments. They must work together towards a health care system which contributes to the pursuit of health” (p. 3).

Following this reasoning, health promoters have been forging ahead, building partnerships for their work (Japhet & Hulme, 2004; Kickbusch & Quick, 1998; Richter, 2004). Evidence of this commitment can be seen on every level of working. An example from one-on-one health promotion could be a smoking cessation counsellor encouraged to work collaboratively with a smoker to create a

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\(^2\) The Declaration of Alma-Ata formalised the adoption of a global plan for an initiative called Health for All by the year 2000 (World Health Organisation, 1979). This initiative was the first large-scale health promotion initiative and helped to launch it as a new discipline within the new public health movement (World Health Organisation, 1986).

\(^3\) The Ottawa Charter is widely considered the definitive document on health promotion and is the first document to be produced from a WHO conference series which has continued to enrich the practical understanding of the field of health promotion (Broerskamp-Stone, 2004; Gillies, 1998; Nutbeam, 1998).
realistic and appropriate “quit plan” over which the smoker can feel ownership because of the expertise she contributed. The Healthy Cities movement provides an illustration of partnership work in community health promotion. In Healthy Cities, sectors such as urban planning, housing, education and social services work together to improve community health (World Health Organisation, 1997b). Healthy Cities national and regional networks, which have accelerated the dissemination of the approach, serve as examples of collaboration at quite complex levels of partnership (World Health Organisation, 1997b). At the international and global levels, partnerships exist for many purposes including research, training and advocacy.

The push toward working in partnership has not been limited to the action arena of health promotion. Partnership is also widely advocated in public health in general (Lob-Levyt, 2001; Reich, 2002), in nursing (Gallant, Beaulieu, & Carnevale, 2002), in community problem solving (Lasker, Weiss, & Miller, 2001), in research (Israel, Schulz, Parker, & Becker, 1998; Larson, 2003), in business (Liedtka, 1998) and human resource management (Knell, 1999).

International institutions like the World Health Organization (WHO) and the World Bank (WB) have aggressively promoted international partnerships as key for solving the problems of poverty and ill health (World Bank, 1993; World Health Organisation, 1986, 1997a, 2000, 2005). As a result of this wide-spread conviction about the importance of partnership as a way of working, there has been significant investment by governments, foundations, non-governmental organisations (NGOs) and international non-governmental organisations (INGOs) to create and fund initiatives which get diverse people and organisations working together (Bazzoli et al., 1997; Israel, Schulz, Parker, & Becker, 1998; Lasker, Weiss, & Miller, 2001; Mitchell & Shortell, 2000; Wandersman, Goodman, & Butterfoss, 1997; Zuckerman, Kaluzny, & Ricketts, 1995). Significantly, many public and private funding institutions now require projects they support to involve partnerships with other organisations (Lasker, Weiss, & Miller, 2001; Wandersman, Goodman, & Butterfoss, 1997). Public-private partnerships in health care systems are expected to solve failures and inefficiencies by creating new innovation (Lob-Levyt, 2001). Coalitions in human services are seen as key to solving the issues of homelessness and family violence (Dluhy, 1990). Partnerships in nursing and social work should lead to empowerment of clients and patients (Gallant et al., 2002; Sheppard, 2001). In human resource management, partnerships are supposed to result in higher employee commitment; greater willingness to contribute to the organisation, lower absenteeism, turnover and conflict, and better performance (Guest & Peccei, 2001).

Generally, the benefits of partnership are expected to be: increased ability to raise and distribute human and financial resources; better information exchange, increased power, credibility and recognition; decreased redundancy of effort; the joining of complementary skills and knowledge; and greater ability to work holistically and better possibilities for innovation (Japhet & Hulme, 2004; Dluhy, 1990; Scriven, 1998; Brinkerhoff, 2002d). It is, of course, possible that these are the benefits of collective working arrangements. However, these common assumptions about partnership are not necessarily backed by evidence (Dowling, Powell, & Glendinning, 2004). Scriven (1998) observes: “Despite the belief in these benefits and the increased emphasis on interagency collaboration, there is a lack of debate and evidence of the processes that enhance or obstruct joint working and a dearth of empirical research.
and theory-building on questions of intersectoral collaboration in health promotion” (p. xiii).

The limited research that has examined the inner workings of partnership, drawn almost exclusively from the literature on community level partnerships, reveal complicated working relationships that lack close resemblance to the partnership rhetoric at the global level. Some research indicates that almost 50 percent of partnerships that form dissolve within their first year (Kreuter & Lezin, 1998). The truth is partnerships can be messy (Mitchell & Shortell, 2000; Walker, Moodie, & Herman, 2004; Wandersman, Goodman, & Butterfoss, 1997). Partners may find that collective working draws away substantial resources, they may become frustrated by time-consuming consensus-building processes, they may have to compromise their positions or credibility as a result of group decisions, they can experience a loss of control, and accountability can become blurred (Dluhy, 1990; Japhet & Hulme, 2004; Dowling et al., 2004). Faith in the value of partnership unaccompanied by critical examination could have unintended consequences. Brinkerhoff (2002d) worries that “unspecified and overly ambitious expectations of partnership, coupled with the overuse of partnership rhetoric and inconsistent practice may lead to an abandonment of partnership work altogether and a forfeiting of its potential value-added” (p. 13).

With the above considerations as a starting point, the present thesis endeavoured to conduct a critical examination of a working global health promotion partnership. The purpose of conducting this research was two-fold. At one level, it sought to add to the general literature on partnership functioning by expanding upon models derived from related literatures. Secondly, the study was also conducted to benefit policymakers and practitioners of partnership at the global level by contributing an actual case study to the international partnership literature which is, at present, based largely on rhetoric.

1.1 Study Objectives
The main objective of the present research was to conduct a case study of the Global Programme for Health Promotion Effectiveness, to better understand:

1. The critical elements of inputs, processes and outputs in the functioning of a global health promotion partnership
2. The effects those inputs, process and outputs have on one another in the functioning of global health promotion partnership

2. THEORETICAL BACKGROUND
2.1 The Partnership Construct: Synergy
Despite the seeming consensus on the utility and value of working in partnership as reflected by the almost universal calls for partnership, there is surprising little agreement on what the term actually means. Guest and Peccei (2001) note: “[Partnership] is an idea with which anyone can agree, without having any clear idea what they are agreeing about” (p.207). Indeed, many commentators are of the same opinion that no universally accepted definition for partnership exists (Wildridge, Childs, Cawthra, & Madge, 2004; Buse & Walt, 2002; Huxham, 2003; Richter, 2004; Widdus, 2003).

Partnership has been examined by researchers from diverse disciplines, research paradigms and theoretical perspectives (Huxham, 2003). While one would expect this diversity of experience and expertise to strengthen the knowledge base about partnership, this has not been the case (Lasker & Weiss, 2003). Instead, these research efforts have remained fragmented (El Ansari, Phillips, & Hammick, 2001; Hardy, Phillips, & Lawrence, 2003; Huxham, 2003; John-Steiner, Weber, & Minnis, 1998; Larson,
2003; Lasker & Weiss, 2003). There is little connection between these literatures and practically no mutual recognition of research across disciplines and theoretical paradigms (Huxham, 2003).

Variously in the literatures and in practice, the term ‘partnership’ has been used to describe any number of working arrangements including communication, consultation, coordination and collaboration (Widdus, 2003; Huxham, 2003; Wildridge et al., 2004). In the fields of nursing, social work and human resources management, partnership is conceived of as primarily an interpersonal relationship. The paradigm shift in these fields in recent years reflect a movement from a one-way flow of information from practitioner to client to a more empowering dynamic (Munro et al., 2000; Gallant et al., 2002; Sheppard, 2002; Guest & Peccei, 2001; Knell, 1999). In nursing, the patient is regarded as having vital expertise about their own life and the nurse partners with them educating, facilitating and supporting them to improve their own health (Munro et al., 2000). Similarly, Sheppard (2001) defines partnership between social workers and clients by explaining “each partner is seen as having something to contribute, power is shared, decisions are made jointly, roles are not only respected but also backed by legal and moral right” (p. 32). The conception of partnership within human resources involves an organisation’s management partnering with its employees. Its basis is that partnerships in the workplace can forge joint commitment to success, build trust, address issues of security and flexibility, enable sharing of success, be a means of informing and consulting staff and can give employees voice and representation (Guest & Peccei, 2001; Knell, 1999).

In other fields, partnerships are seen as more complex structures. The economics literature conceptualises partnership as being relationships between (most typically) government and private industry. There is an exchange along the lines of risk versus responsibility (Torres and Pina, 2001; Taylor & Blair, 2002). The primary goal of partnership from an economics perspective is increased efficiency. In the field of development, partnerships can exist between non-governmental organisations (NGOs), community-based organisations (CBOs), governments, donors and the private sector. Brinkerhoff (2002d) describes an idealised view of partnership in development as “a dynamic relationship among diverse actors, based on mutually agreed upon objectives, pursued through shared understanding of the most rational division of labour based on the respective comparative advantages of each partner. This relationship results in mutual influence, with a careful balance between synergy and respective autonomy, which incorporates mutual respect, equal participation in decision-making; mutual accountability and transparency” (p. 14).

In health promotion, similar to development, partnerships can exist between governments, NGOs, community based organisations (CBOs), academia and the private sector (Kickbush & Quick, 1998). Gillies (1998) distinguishes between micro and macro partnerships, suggesting that micro partnerships work directly toward the promotion of health, whereas macro partnerships aim to affect the structural determinants of health. While it is useful to understand health promotion’s dual objectives of directly promoting health through health education and promoting healthy policy, this definition lacks the recognition that health promotion partnerships do not necessarily attempt to affect health outcomes on either level. For instance, health promotion partnerships for research may have an ultimate goal of impacting health policy but it can be a very indirect relationship.

So, various arenas have various value-laden conceptions of partnership.
Confusion arises due to the heterogeneity of the contexts in which partnership terminology is used, and the diverse activities that are labelled ‘partnership’ (Huxham, 2003).

The confusion is welcome by some since ambiguity of the meaning of partnership allows the term to be used flexibly. As Knell (1999) put it, “Partnership is not a term that carries with it any precise theoretical or practical connotation. It is this very fact that has perhaps made the word so attractive. Who could possibly be against partnership?” (p. 5). Partnership’s positive connotation has made it a particularly popular “buzzword” in many different contexts. However, it is not the only word used to describe collective working arrangements. Other terms, often employed interchangeably, are alliance, network, consortium, association, coalition. Some authors choose to treat these words synonymously (Dowling et al., 2004). Scriven (1998) for instance uses the term “healthy alliance” to cover other terms such as “collaborative” or “interagency partnership.” She writes “all of these terms refer to the same set of structures which can be defined as partnerships of organisations and/or individuals that have as common purposes the enablement of individuals or communities to increase control over and improve their health. Healthy alliances can operate at different levels including community, district, city, regional, national and international” (p.xv). Weiss, Anderson and Lasker (2002) use the term partnership “to encompass all of the types of collaboration (e.g., consortia, coalitions and alliances) that bring people and organisations together to improve health” (p. 683).

Other authors distinguish between these terms. Dluhy (1990), for instance, defines a coalition as “a time-limited organisation in which there is a convergence of interest on the part of a number of actors, both individual and organisations, and an interaction around furthering these common interests” (p.10). In his view, the network construct is a subset of the coalition construct, in that a “network is a loosely coupled group of professionals, people from the community, and agencies and organisations who band together periodically around certain issues or because of specific needs of client groups” (p. 28).

Another method of discerning various collective working arrangements from each other is to differentiate along a continuum. Alter and Hage (1993) describe three kinds of inter-organisational levels of working. Obligational networks refer to dyadic exchanges of information between organisational partners. Promotional networks are more integrated in that they work on jointly shared objectives. The most integrated approach is the systemic production network, which involves organisations not only coming together to work but producing something together. Gray (1989) distinguishes between collaboration and the concepts of co-ordination or co-operation. Building on the distinction made by Mulford and Rogers she defines co-ordination and co-operation as static patterns of interaction between organisations. “Co-ordination refers to formal institutionalised relationships among existing networks of organisations, while co-operation is ‘characterised by informal trade-offs and attempts to establish reciprocity in the absence of rules’ (Mulford and Rogers in Gray, 1989).” Gray (1989) ventures that these concepts differ from collaboration by failing to describe its “dynamic evolutionary character.” In describing collaboration in primary care systems, Walker (2000) begins with referral networks at the less complex end of a spectrum, moving to relational contracting, joint planning, and joint service provision and concludes with collaborative alliances.
at the more complex end. Walker (2000) uses Gray (1989) to define this most complex vision of collective working as “an inter-organisational effort to address problems too complex and too protracted to be resolved by unilateral action” (p.13).

Given the variability in the use of these different terms and the lack of consensus on how to distinguish between them, a more pragmatic approach to defining partnerships is needed. Rather than getting caught up in semantics, one could bypass this confusion by focusing not on what these collective arrangements are called but what they do. By looking at partnership functioning, it might be possible to derive a definition that can cut across disciplinary boundaries and overcome obstacles which have previously prevented drawing theory together. Following Gray (1989) and Walker (2000), the types of collective action called for in health promotion are at the more complex end of the continuum. That is, these partnerships call for organisations, governments, and individuals (etc.) to work together to tackle issues which they are unable to confront on their own. A successful health promotion partnership produces results greater than the sum of its parts.

Reflecting on the conceptions of partnership presented earlier, a common thread emerges. In nursing and social work, the participatory sharing would (in theory) produce better results than would an authoritarian approach. The nurse or social worker who listens to a client with care and respect gains a better understanding of the environment, symptoms, support, stress, et cetera, affecting the client’s condition, enabling the professional helper to provide better care. Likewise, facilitation, education and support promote the client’s confidence to express herself more fully, and to change health behaviours in positive ways. In the end, through the partnership, both parties gain something they would not have achieved on their own.

The idea that successful partnerships produce outcomes that could not be achieved by any of the partners in isolation is fundamental (Brinkerhoff, 2002d; Googins & Rochlin, 2000; Huxham, 2003; Kickbusch & Quick, 1998; Lasker & Weiss, 2003; Lasker, Weiss, & Miller, 2001; Liedtka, 1998; Vangen & Huxham, 2003; Wandersman, Goodman, & Butterfoss, 1997; Weiss, Anderson, & Lasker, 2002; Wildridge, Childs, Cawthra, & Madge, 2004). The number of authors agreeing on this point is surprising given how disconnected the disciplinary literatures are.

The term ‘synergy’ is often used to describe this multiplicative interaction of partners (Ball, Le Ny, & Maginn, 2003; Brinkerhoff, 2002a, 2002b, 2002c, 2002d; Lasker & Weiss, 2003; Lasker, Weiss, & Miller, 2001; Liedtka, 1998; Weiss, Anderson, & Lasker, 2002). Synergistic outcomes can be defined in biological terms, as Corning (1995) explains, “effects that can only be produced by two or more component parts, elements or individuals” (p. 2). Lasker et al. (2001) define partnership synergy by saying that it is “more than the mere exchange of resources. By combining the individual perspectives, resources and skills of the partners, the group creates something new and valuable together—a whole that is greater than the sum of its parts” (p. 184).

The concept of synergy is also frequently cited in the literature but referred to by other names like “value-added” (Berman & Bossert, 2000; Brinkerhoff, 2002a, 2002c) or “collaborative advantage” (Huxham, 2003; Lasker, Weiss, & Miller, 2001; Scott & Thurston, 2004; Vangen & Huxham, 2003). Brinkerhoff (2002c) defines value-added: “the partnership as a whole yields more than what would have resulted from the partner organisations
operating independently” (p. 225). Huxham (2003) says of collaborative advantage “something has to be achieved that could not have been attained by any of the organisations alone” (p. 403). Even more often, the concept is used but not called anything at all, in Googins and Rochlin (2000), for instance: “partnerships present the opportunity to create a formidable, mutually reinforcing system which combines the unique capabilities and resources of each party to deliver outcomes that surpass those of any one sector acting in isolation” (p. 128).

Unlike so many other concepts related to collaborative working, these researchers are clearly describing the same phenomena. Synergy seems the best term, because it suggests more than mere added value, but that some higher order of value is obtainable by effective partnership. Kickbush and Quick (1998) put it this way: well-managed partnerships should lead to synergy between partners where 2 plus 2 equals 5. From this perspective, partnerships can be defined as collective working arrangements which intend to produce synergistic outcomes; they are entered into with the intention to function at some higher order than the partners are capable of without one another. The value of this definition is that it places emphasis on partnership functioning, processes, and outcomes rather than on partnership forms.

### 2.2 Partnership Functioning


Lasker and Weiss (2003) have also devised a model for evaluating community partnerships which explicitly recognises the role of synergy. Their model connects leadership and management and characteristics of the process to proximal outcomes of individual empowerment, bridged social ties and synergy. These proximal outcomes result in collaborative problem solving and ultimately community health. Their model has garnered some support from other researchers (Baker & Collier, 2003; Bruner, 2003; Israel, 2003; Lasker & Weiss, 2003; Plough, 2003). However, it, like many other models, is highly prescriptive and derived more from literature than from practice.

A criticism of the literature on partnership functioning is that it seems biased in favour of detecting positive, and not negative results. In their recent review of literature on partnership, Dowling et al. (2004) searched diligently for studies which examined not only the potential benefits of collaboration but also costs. They searched the literature for studies looking at, what they termed negative synergy, collaborative disadvantage and value-subtracted outcomes. A possible negative outcome of partnership working may be antagony⁴ (2+2 = 3), e.g. inflated real cost and performance delay. Of the 36 studies covered in the review, only two addressed potential costs of partnership.

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⁴ Antagony has among its definitions that which denotes a contested state, or a state of opposition. Antagony is used here in its sense as an antonym of synergy.
These models of partnership also lack a fundamental appreciation of the complexity of human interaction. They assume a unidirectional view of cause-and-effect, neglecting the influence the given characteristics or properties may have on each other. For instance, Lasker and Weiss (2003) use one-way arrows connecting “leadership and management” to “critical characteristics of the process” to “individual empowerment” (among other outcomes) in a linear model which moves strictly from left to right. Research in other fields, for instance business management, Richardson (1991) alerts us to the reality that “a manager’s behaviour is not independent of worker characteristics: worker productivity can turn around and affect a manager’s leadership style” (p. 2).

Even in the model created by Wandersman, Goodman and Butterfoss (1997), Figure 1.1, which depicts partnership functioning as an organisational “open system,” loops its framework in a very general circuit, keeping the elements of resource acquisition, maintenance and productions subsystems and external goal attainment divided in separate boxes connected by one-way arrows. It seems important to entertain the possibility that causality in the human system of partnership may have an even more complex interaction of elements which, if understood, could increase our ability to create synergy within partnerships.

Figure 2.1: An open systems framework of organizational characteristics related to block organisation maintenance
2.3 The Contribution of the Feedback Loops of Systems Science

Feedback loops provide a way of exploring causality without oversimplification. Feedback accounts for the reciprocal influence elements can exert on one another. Richardson (1991) proposes that feedback loops are the unifying concept in recent breakthroughs in such fields as cybernetics, servomechanisms, macroeconometric models, management, political science, economics, social psychology, anthropology, sociology, psychology and psychotherapy. These concepts have mathematical representations; however, in social science “verbal pictures” have also been used to describe these phenomena. Concepts such as vicious cycles, self-fulfilling prophecies, homeostatic processes and invisible hands describe feedback loops (Richardson, 1991).

The concept of feedback loops consist of elements which “causally influence” each other. An attribute of polarity can be identified within a given loop providing predictive power. Richardson describes that polarity refers to the loop’s “tendency to either reinforce or counteract a change in any one of its elements” (p. 5). Polarity is expressed as either positive or negative. A causal loop that reinforces or amplifies a change in any one of its elements is a positive loop. Conversely, a loop which counteracts or diminishes a change in its elements is negative (Richardson, 1991). Richardson (1991) provides an example of a positive loop depicted in Figure 1.2 of race relations in America.

Figure 1.2
The “arithmetic” of causal loops is analogous to the multiplication of signed numbers. That is, a loop is positive if it contains an even number of negative links. A negative loop has an odd number of negative links (Richardson, 1991). As illustrated in the example in Figure 1.1, the vicious cycle or self-fulfilling prophecy of racism in America results from a positive loop of these interrelating elements. Feedback loops may also lend increased dimensionality to the analysis of partnership processes by accounting for the complexity of interaction reflected in real-world human systems.

While there may be many, as yet, unidentified interactions between the elements which comprise a partnership, one possible oversight in the Wandersman, et al (1997) model is the positioning of the “goal” at the end of the framework. The goal or task which unites the partnership might instead play a central role, affecting many aspects of the partnership. The literature on the sociology of science examining “Invisible Colleges,” which operate similarly to partnerships in sharing information and working toward research goals on a specific subject specialty, recognises the impact of the task itself on the functioning of the actors and the environment of working (Zuccala, 2006).

In attempts to identify loops of feedback within partnerships which reinforce or counteract synergistic and antagonist processes, it is important to observe the interaction of the elements of partnership which involve not only the actors and the structure of the environment, but also the goal or task that brought the actors to the partnership in the first place.

2.4 Research to explore partnership processes
The conviction that partnership is a superior way of working is not clearly supported or refuted by empirical literature. In the health promotion arena, where the value of partnering is an article of firmly established faith, such research is especially needed, not least because of the strong emphasis the field places on evidence-based practice. International partnerships for health promotion are a rapidly growing way of working. The internet has permitted the creation of partnerships spanning the globe, working at speeds and efficiencies that could not be imagined just a decade ago. Partnership models in health promotion are surely here to stay, and expand. Their quality is therefore the issue, rather than the wisdom of the partnership approach. Fine tuning the partnership model in health promotion is therefore needed. Using a learning-from-practice model, it should be feasible to identify and differentiate key elements and interactions that lead to and predictably reinforce synergistic and antagonistic processes. Such knowledge will have practical value if health promoters are able to use it to guide the formation and operation of future partnerships, aiming to maximise synergy and dampen or prevent antagony.

2.5 IUHPE research on Partnership
The International Union for Health Promotion and Education (IUHPE) and the University of Bergen have entered into a partnership to conduct a research project on these issues. The author conducted master’s thesis research consisting of a case study of the Global Programme for Health Promotion Effectiveness (GPHPE), a partnership coordinated by the IUHPE. The GPHPE conducts reviews of evidence of health promotion’s effectiveness. It has published its work in many languages, engaged in advocacy at high political levels, and arranges scientific sessions at international conferences, among other activities. Using the Wandersman, et al. (1997) model of partnership as an “open system,” an attempt will be made to map the GPHPE. Documents and interviews will also seek to identify feedback loops which may exist between these elements.
The aim is to contribute to the development of theory about partnership functioning at the global level which can have practical utility for professionals undertaking such work.

3. THE CASE
The case that was investigated for the present study is the Global Programme for Health Promotion Effectiveness (GPHPE). The GPHPE is a world-wide partnership looking at health promotion effectiveness around the globe.

The multi-partner initiative is co-ordinated by the International Union for Health Promotion and Education (IUHPE) in collaboration with the World Health Organisation (WHO) and supported by contributions from national agencies and organisations in Kenya, Switzerland, England, The Netherlands, Canada, the United States and India, among others (GPHPE, 2005).

The main aims of the Global Programme are to “raise the standards of health promoting policy making and practice world-wide by: reviewing and building evidence in terms of health, social, economic and political impact; translating evidence to policy makers, teachers, practitioners, researchers; and stimulating debate on the nature of effectiveness (GPHPE, 2005).”

GPHPE History
The GPHPE grew out of a similar initiative that had been undertaken in Europe. In 1999, the IUHPE published the culmination of an evidence-gathering project funded by the European Commission and the US Centers for Disease Control in a set of books called The Evidence of Health Promotion Effectiveness. This project gathered the expertise of the IUHPE professional network, politicians, and media and communications specialists to review the evidence for health promotion effectiveness with a special focus on practical outcomes. As recommended by the partnering policy makers, the books examine not only the health impacts of health promotion but also the economic, social and political impacts as well. The balance of scholarly evidence and practical utility of the books has made them “the most sought after references in the field (GPHPE, 2002, p. 1).”

The popularity of the books increased the awareness that more ongoing research of this kind is needed around the globe. The IUHPE decided that not only was there a need to contribute more evidence to the base but that the strong English language bias also needed to be addressed and rectified. The GPHPE was initiated to work to address these gaps. The planning began shortly after the publication of the books in 1999 and the first Global Steering Group meeting was held in Amsterdam in 2001 (GPHPE, 2002).

Originally, the plan for the GPHPE was that interested parties would be identified in global regions and that these regions would move forward in parallel using the European work as a blueprint for their work. As global links began being established and initial assessments were made, this original plan no longer seemed suitable given the differing capacities and stages of development of the various regions. Instead, the GPHPE collectively decided to allow each region to evolve at their own pace given their capacity and to meet regional needs (GPHPE, 2004b).

GPHPE Structure
The work of the GPHPE is conducted in seven regional areas: Africa, Europe, Latin America, North American, Northwest Asia, Southeast Asia and the Southwest Pacific. Each of these regions has a regional leader or in some cases, co-leaders and some regions also have a regional co-ordinator. At the global level,
there is a global leader and a global co-
ordinator.

The work of the GPHPE is overseen by the
Global Steering Group (GSG). The GSG is
comprised of representatives from each
participating region, supporting
organisations, some technical advisors and
the global leader and co-ordinator. This is
the main decision making body of the
partnership (GPHPE, 2004a).

Given this structure, the GPHPE is actually
a global partnership comprised of multiple
regional partnerships. The present study
did not delve into the functioning of
regional partnerships but focused on global
functioning.

GPHPE Products
One of the first tasks undertaken by the
GPHPE was translating the original
European Effectiveness books into several
other languages.

In 2004, a special supplemental issue of
the IUHPE journal, Promotion and
Education, was dedicated to detailing the
proceedings of a one-day symposium held
in France on the international debate on the
effectiveness of health promotion. The
event was arranged to raise awareness and
provide a forum for exchange on the
highly debated concepts of evaluation,
evidence, effectiveness and how they relate
to policy. This special issue was then
launched at another conference concerned
with these topics, held in Quebec in
October 2004 (GPHPE, 2004b).

Also in 2004, members of the GPHPE
organised and arranged a track on
effectiveness at the 18th World Conference
on Health Promotion and Health Education
held in Melbourne, Australia. At the
conference, the GPHPE was presented in
“its integral entirety.” An overview panel
symposium offered an overview of
GPHPE activities and a number of regional
sessions were also held (GPHPE, 2004b).

In 2005, another special issue of
Promotion and Education was published
on the theme of effectiveness in mental
health promotion. This was the product of
a special track within the GPHPE focusing
on unique aspects of mental health
promotion effectiveness debate.

Presently, the GPHPE is highly focused on
the production of the global monograph
that will integrate regional products and
the overall work of the GPHPE in one
publication. This publication is well
underway and is scheduled for release at
the 19th World Conference on Health
Promotion and Health Education to be held
in Vancouver, Canada in 2007.

Selection of the Case
The GPHPE was selected as the case for
this investigation into partnership
functioning for two main reasons. First, the
GPHPE is truly a world-wide programme
and therefore was selected for its potential
to lend insight into common aspects of
global partnerships for health promotion.

Second, the GPHPE was selected based on
the access the principal researcher was
given to the partnership. The supervising
researcher is the president of the IUHPE
and was able to arrange access to
documents and informants for the
conducting of the present research.

4. METHODS
The methodology chosen for the present
study was a case study design. The case
study design enables the researcher to
examine complex social phenomena within
a real-life context. The unique ability of
the case study to retain the holistic and
meaningful characteristics of real-life
events and processes is a distinctive
advantage of the approach and particularly
relevant for the present research to gain
insight into the practical experience of
partnership functioning (Yin, 1989).
4.1 The Case Study Methodology
Case study designs utilise several types of data, including observational data, interview data, audio-visual data and document data (Creswell, 2003). All these methods would have been appropriate to apply to my research questions; however, my ability to collect observational data was limited by constraints of distance and also by a lack of opportunity to observe participation at a global level during the period of the study. Audio/visual artefacts did not exist for the GPHPE. Thus, the primary modes of data collection were document analysis and qualitative interviews.

4.2 Documents
Documents were used to gather data on the functioning of the GPHPE. The Global Coordinator of the programme provided the principle researcher with all documents related to the global activities of the GPHPE. E-mail documents were not considered for data collection purposes as the labour would have been too intensive to sort the small bit of usable data from the extensive dross. Therefore, the primary document data sources were minutes of Global Steering Group meetings. These documents were used to identify and track tasks undertaken by the GPHPE, its partners and the Global Steering Committee.

4.3 Participants
Twenty participants were interviewed for the case study. The interviewees were selected by the principle researcher in collaboration with the research supervisor, the Global Coordinator of the GPHPE and the results of the initial document analysis. The interviewees were selected to include key respondents who represented every category of participant involved in the GPHPE, every region of the programme and every development stage of the project from founding members to new additions. Thus, there were respondents from the management team, from the GPHPE supporting organisations, GPHPE collaborators, regional leaders, regional coordinators, scientific and technical consultants and former partners who are no longer active members of the group.

4.4 Settings
All interviews were conducted via telephone with two exceptions. One interview was conducted in person in the respondent’s office in the afternoon. Another interview was conducted via email as the respondent was more comfortable replying in this manner given language barriers. To schedule the interviews, email contact was initiated by the supervising researcher and was followed by email contact from the principle researcher. Telephone interviews were arranged with the respondents and appointments were made at their convenience. A web site (http://www.timeanddate.com/worldclock/) was used to coordinate times between time zones.

The interviews took place at times ranging from 07:00 to 24:00 hours, depending on time zone and preference. Some respondents (I2, I3, I5, I8, and I12) received the phone calls and participated in the interviews at home. The remaining respondents were interviewed at work. Most of the interviews lasted 45-60 minutes; a few were about 30 minutes. Two respondents had such in depth experience with the GPHPE that more than one interview was required. Thus, a total of 23 interviews of 20 individual participants were conducted for the present research.

All respondents were informed of the general purpose of the study. A few of the

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5 The terms “participant”, “respondent”, “key respondent”, “informant”, “key informant” and “interviewee” are used interchangeably throughout the present thesis to refer to the people who were interviewed in the course of this study. No distinction is made between these participants.
respondents requested to be sent a copy of the interview guide beforehand, and these requests were complied with.

The interviews were recorded using a minidisk recorder and detailed notes were taken during the conversation (except in the instance of the email interview). All respondents consented to be recorded and were aware when the recording began and was stopped. On three occasions (I1, I14 and I15), the recorder malfunctioned and failed to capture a few minutes of the interview. Detailed were used to replace the missing audio data.

4.5 Data Collection
The documents were used to identify tasks and activities that the GPHPE endeavoured to undertake. The first data collection activities consisted of culling the documents, identifying partnership tasks, categorising them as production or maintenance tasks and tracking the people associated with them. This information assisted in the selection of interviewees. These data also informed the construction of some questions pursued in interviews with key respondents who had been identified as associated with a particular task.

The interviews were conducted to explore themes pertaining to partnership functioning. A semi-structured interview guide (see Appendix 1) was written beforehand and improved between interviews as better questions emerged. While these questions provided a guide, the interviews were open and questions were added and omitted in response to the dynamics of the conversation and the information spontaneously provided (Kvale, 1996).

The interview guide included questions centring on four main themes:
1. The interviewee’s history of GPHPE participation
2. Their impressions of the work of the GPHPE
3. Production of synergy and processes supporting or inhibiting it
4. Interaction of the partners, the partnership environment and the subject matter

The purpose of the interviews was to gain an understanding of the internal perception of the functioning of the GPHPE, to corroborate and elaborate on the information identified in the data extracted from the documents.

4.6 Data Analysis
In this qualitative research, data analysis was an ongoing and reflective process conducted throughout all stages of the research (Silverman, 2000b). The documents analysis began with an initial reading through of all the documents to gain an overall impression of the contents (Creswell, 2003). This was followed by a more detailed reading. The text of the documents was numbered line by line to make specific citation easy. As tasks were identified in the documents, the task was noted on an index card with the citation. Each task was assigned a number which referenced the date of the document. Any further mention of the task was noted on the original index card, with specific citation information. After this initial analysis was complete, the task cards were organised according to the function or subprocesses of the partnership system based on the extent to which they contributed to maintenance or production activities of the partnership.

Analysis of the interview data began during the interview process itself. Note-taking during the interview allowed main points to be captured even before the detailed work of transcription began. The researcher began to tally certain responses informally after reviewing the notes thus identifying broad categories of potential
interest. The next stage of analysis involved the transcription of the minidisk recordings. As Kvale (1996) notes the exercise of transforming the spoken word into text is an analytical process in itself. The principle researcher transcribed 14 interviews. A professional journalist was employed to transcribe six interviews. The journalist was hired to ensure the transcription would be completed in the within the time perimeters of the master’s thesis. Three interviews were only partially transcribed. After partial transcription, it was determined that the interviews reiterated points previously made by other interviewees. Having reached saturation, there was no need to finish the transcribing. The interviews transcribed by the journalist were carefully reviewed for accuracy by the principle researcher. During and upon completion of the transcription, the researcher was able to more formally tally responses and confirm and modify the broad categories of data relevant to the research questions.

4.7 The Role of the Researcher
Possible factors that may have biased the analysis of the study:

1) The principle researcher was appointed as a research assistant for the IUHPE, the coordinating body of the GPHPE, for the purpose of conducting this work
2) The principle researcher was aware that the contents of the present research would likely be included as a chapter in a publication of the GPHPE
3) The supervisory researcher participated in the GPHPE and was also an interviewee in this research
4) The principle researcher had no prior experience using case study research methodology

These limitations are taken up critically in the Discussion.

4.8 Timeline of Study
The proposal for this thesis was approved on 23 May 2005. Actual work commenced during the Fall term of 2005 with the preparation of the literature review. Data collection began simultaneously with the first documents gathered from the global co-ordinator, Catherine Jones, in Paris on 9 September.

The majority of the data was collected, analysed and reported during the Spring term of 2006. The document analysis was completed by 9 March. The interview guide was finalised on 21 March. All the interviews were conducted between 22 March and 13 April. The transcription of the interviews also began on 22 March and was completed 25 April. Analysis was an ongoing process during this entire period. Reporting was completed in early May.

4.9 Ethical Issues
All participants were informed of the goals of the research via email and telephone conversations. Consent to participate was given by agreeing to and scheduling a time to be interviewed. Participants were able to refuse involvement with no consequence. Participants were also able to withdraw from the study with no negative consequence and with ease. While the study’s objective was to research partnership functioning and not individuals, protection of individual privacy was a concern and participant’s identities were protected. To ensure anonymity, all identifying features were removed from the reporting of results and method. This research has examined a global partnership comprised of participants from many foreign cultures; necessary steps were taken to become educated about those cultures so context could be taken into account. To fulfill the obligation to provide the public access to these findings and to allow verification of the work, the results of this study will be disseminated in a global publication.
5. RESULTS

As stated earlier, the main objectives of the present case study were to identify the critical elements of inputs, processes and outputs of a global health promotion partnership and to examine the effects inputs, processes and outputs have on one another in the same context. Therefore, this report on the results of the case will identify the critical elements and the relationships between these elements as represented in the data collected.

The data reveal complex and sometimes cyclical interaction among many of the elements; consequently, linear reporting of the results is challenging. This report is organised according to inputs, processes and outputs, however, in the data, certain overlaps exist. This overlapping will be noted, with every attempt made to avoid redundancy.

5.1 Inputs

Three significant inputs emerged from the case study data. These were partner resources, financial resources, and the uniting problem undertaken by the partnership. The data show a high degree of interaction among these inputs. Each input will be discussed in turn and the interrelationships described.

5.1.1 Partner Resources

Two categories of partner resources emerge from the data: inputs from individual partners and inputs from organisational partners. The GPHPE relies heavily, almost completely, on the voluntary participation of its partners. Individual partners contribute their passion, their time, and relevant work they are doing in other areas of their lives. Organisational partners contribute employee time, meeting space, expertise, political connections and sometimes finances. Partner resources are essential for the functioning of the partnership. However, the data also reveal certain complications.

Individual Input

As described in Section 3.0, there is not a single person involved in the GPHPE whose time is funded solely to do work of the global programme. Even the IUHPE staff people involved in the programme have a significant portion of their time devoted to other tasks. Therefore, the GPHPE is truly reliant on the willingness and commitment of its individual partners. One informant explains this relationship in no uncertain terms:

“\(\text{(I)f it wasn’t for the commitment of the people involved in the programme it really wouldn’t (exist)— the global programme is as strong as the people involved.}\) I-1

The partners volunteer not only their time to the partnership but also their personal connections, skills and relevant work.

Many partners devote their personal time by volunteering for specific leadership roles within the global programme. The Partnership Map created for the GSG meeting in Stockholm indicates that the majority of partners on the GSG have taken on formal roles as either regional leaders, co-ordinators or as technical advisors.

In addition to time, partners also contribute their personal connections. Members may be personally connected to organisations that can provide other resources or they can be personally connected to other people who may be able to contribute to the partnership. Personal connections to organisations will be discussed a bit later as it relates to complementary professional work. The latter connection, of partners to other people, is what will be of interest here.

As described in section 3.0, the GPHPE, convened by the IUHPE, utilised the
IUHPE network to recruit many of its members. The IUHPE network is built of people who often have a long history of working together. One respondent referred to the relationships within this network as a family:

“(T)he reason why I talk about the family image is that in health promotion, remarkably, (there is) a kind of core group of people who you find on the board of the IUHPE and who pop up in the fifty years of history, etc. There is a remarkable continuity of a not too large group who have been meeting in conferences, etc. [pause to clear throat] Family. Continuity of contacts. Take for example how long do I know (specific partner). I don’t know exactly, but it may be some ten years or something. Typically, these people I meet at conferences, and then maybe once, twice a year, and then in a conference you live during the week quite closely together, so there is a certain intensity of exchange, not only of professional things, but of all kinds of personal things. And because over these years with this core group we have build a great amount of trust and mutual respect, we can easily rely on each other, and also for contributions.” I-9

These connections seem to have a recruiting and motivating effect on other partners. The mutual respect and trust these members have for one another increases their desire to work and spend time together. Not only are they colleagues, they are also friends. This is illustrated in the following interview exchange:

“HC: What do you think propels the function of the group?
I6: Friendship.
HC: Can you tell me more about that?
I6: All of these partnerships, the glue behind them is friendship, relationships and friendship. When you’re asked to do something and a friend asks you and you have a history and you want to keep that history going—you’re inclined to say yes. And they’re your friends. You like them, you like to be with them and projects like this help you to work together and be together. You know if you have a partnership with someone you don’t like or can’t get along with or feel things are not going well with, you just simply don’t do it again. And so the bad links sort of melt away and the good ones stay and get stronger and that’s why if you were to do an analysis of 30 or 40, for example, partnerships of health promotion in one way or another you would find the same constellation of characters at the core, over and over and over again with some people coming in and disappearing and a few people on each one coming that are new but you would find out that there is some kind of living organism there, that is based on people and their friendships
and their histories with one another. I never say “no” to the people I like.” I-6

Through these professional and personal links, the GPHPE manages to find and recruit people to work in the partnership. One respondent marvels at the GPHPE’s ability to work in this way:

“I think that the global programme actually involves people all over the world, that really impresses me. That they have been able to identify the key person in different parts (of the world), especially in regions where they have less contact, places where they (do not always have) mainstream health promotion programmes.” I-3

While these links have clearly served the GPHPE in some respects, a few respondents are concerned that an over-reliance this network could weaken functioning and lessen its potential impact. Functioning could be affected by a dearth of new perspectives and ideas. Limiting participation to people already engaged in the topic could decrease potential impact. Looking from this perspective, informant I-7 notes that relying on the network can limit the kinds of partners recruited:

“(I)t would be good if we could add more – different kinds of players... What we have – what we have in terms of partnership are mostly partners who I would call, what I call PLU’s – “people like us.” I’ve always thought that there's a bit of narcissism in evaluating your effectiveness and the evidence for what you do by only and mainly having people like ourselves doing the evaluation.”

Having partners all coming from similar scientific and philosophical backgrounds may decrease the potential for synergy by limiting the introduction of new perspective and insight. Informant I-2 describes what can happen:

“(Y)ou need to make sure the connections are broadening out, that communities are talking to different types of scientific communities... There has to be balance to prevent it from becoming incestuous.”

To help combat this a few informants suggest attempting to recruit new partners. Informant I-3 suggests that training people in methods of effectiveness and evaluation can be a mechanism for recruiting new participants and perspectives. Informants I-4 and I-13 suggest recruiting newer members of the IUHPE who may also offer differing views:

“I think too, that it is important that it is not just closed to IUHPE members but that it becomes a vehicle to entice new members too. To build that community of IUHPE membership. I think people say, “it is always them, just those (few) people... that get to go everywhere and are always there.” You hear that a lot. So it is important to open opportunities to new members and to young members.” I-13

Whether it is positive or negative, there is no doubt that the personal and professional connections of partners can provide a
means of recruiting other potential participants into the partnership. In this way, these connections serve as an input into the partnership’s functioning.

Another partner input is the contribution of their relevant skills and work. The majority of the partners involved in the global programme are professionally linked to issues related to gathering, documenting and increasing the evidence base for health promotion. Two examples give good illustrations of the relevance the programme’s work has with the partners’ full-time focus.

“(T)his project is related to the main research area of (my) centre.” I-16

“(T)here has been clear interest in (specific area) in this project and that is the area that I work in here at (organisation).” I-19

For some partners the lines between the work of the GPHPE and their own can become blurry. Most of the partners are working on issues related to the GPHPE so closely that much of what they do could be considered relevant. This became especially clear when they were asked in interviews about how much time they devote to the GPHPE. This response reflects the sentiment given by a number of respondents:

“It is very difficult to divide the time because I spend a lot of time doing this kind of health promotion work and looking at effectiveness is a sort of ongoing process. I try to tie and integrate things together, not just specifically for the global programme but in ways to collect evidence that can contribute also to the global programme as well. So I haven’t really worked out the divide of the time, it is very difficult to say, but it is ongoing.” I-3

The question of overlapping work responsibilities relates very closely to the contribution of organisational partners, specifically, the donation of employee work and time (of partners) to the GPHPE. This will be taken up in the next section.

While for some partners there is an obvious connection between the work of the GPHPE and their own, for other partners, it is not as clear. For instance, one respondent who does see the benefits of the GPHPE’s network has yet to see parallels in products materialise.

“Actually, I would say, it has the potential, but the work I really did in the last two years on my professional role…has so far not benefited from either participation or products from the global programme. But it has benefited from the good links with good experts who are involved in the global programme.” I-10

As respondent I-3 described above, most partners look for ways to bring work that they are doing in other areas to contribute to the goals of the GPHPE. However, some activities of the partners are strictly voluntary with no work affiliation. For instance, many partners take on leadership or co-ordination roles within the programme, or contribute unique work specifically for the GPHPE.

Relying so heavily on the commitment of volunteers does not, however, come without complications. By definition, these volunteers are participating in the partnership in addition to many other tasks
and responsibilities. The fact that they are not remunerated for their contributions may, at times, make it difficult for them to follow through on deadlines. One respondent concisely describes this:

“I’ll give you a perfect example, I am supposed to (specific task) for the global (programme) and I will get it done. Probably by the skin of my teeth and probably not meeting all of the timeline highlights that have been set out, (I will) just because I am committed to do it-- because I care about it. But it is not something that I have any agenda for in my scope of professional responsibilities.” I-8

These issues of voluntary participation and accountability are important and will be discussed in more depth in Section 5.2.

Another concern regarding the heavy dependence of the GPHPE on volunteers is the fear that such a system is not sustainable. At least two participants feel that this dependence will ultimately limit the potential growth and possibly the continuation of the programme. Respondent I-3 explains:

“(T)he main resource is the passion. But if you rely on that long term, I think sooner or later it will hamper the next stage of development, we will not move to the next stage we will remain as we are. (If) the passion is the main investment then there are two scenarios: one is the current people with passion, sooner or later, they retire and they might not find people to succeed the programme or (the current partners) run out of resources and will not go further. So, even luckily, it will just maintain as it is and then we are just stuck from that next stage of development.”

The above quote suggests sustainability may be threatened because the passion of these volunteers may not be replaced by similarly committed individuals in the future. However, another threat to the continuation and growth of the GPHPE may be the inability of these multiply committed volunteers to sustain their own ongoing participation. For instance, I-8 comments:

“I think this is an overall remark on the global programme...(it is very difficult) to sustain any kind of forward movement on a 100 percent voluntary basis, where people are juggling way over-extended professional responsibilities.”

These questions of sustainability are important findings and may have implications for future planning of this partnership.

Organisational Input

According to the document and interview data, the majority of resources obtained by the GPHPE come from organisations within which one or more of the GPHPE partners are connected. As mentioned above, organisational inputs include things like donation of employee’s time, meeting space, providing resources for travel or lending their connections to political or professional expertise.
As introduced briefly above, many partners work on issues related to the GPHPE in the course of their professional work. The extent of the GPHPE’s reliance on these overlapping interests to propel production is illustrated well by this comment from I-1:

“(M)ost of the things that happen in the global programme happen because people commit to doing something that if they come from an institution usually has great interest to their institution.”

These overlapping interests can sometimes result in projects being taken on by institutions and the individual partners within them, which contribute directly to the GPHPE. This kind of organisational contribution has been vital within the GPHPE as informant I-10 indicates:

“(T)here are, at least in some countries, organisations or universities which can really take particular products on to their agenda and really realise them. Like in (a particular area) at the time – to have a least some organisations who can commit to concrete products, is very, very important.”

Organisations support the work of the GPHPE not only by contributing employee time and products but in operational ways as well. Data from the documents indicate that a number of organisations have provided meeting space for Global Steering Group meetings over the years. Other institutions support the work of the GPHPE by supporting travel of partners to meetings.

The document and interview data clearly acknowledge the crucial role of these organisations for the functioning of the GPHPE. A few concerns, however, also emerge from the data. For instance, some informants worry that the reliance on these organisations is too unstable, which threatens the sustainability of the partnership. A related concern relates to the sometimes informal agreements between these institutions and the GPHPE.

A clear example of how reliance on these organisations can be unstable is provided by the experience of informant I-2. I-2’s organisation contributed considerably to the GPHPE for a number of years. Active in many aspects of GPHPE work, I-2 took on a leadership role within the GPHPE. At first this went well, until I-2’s organisation was dissolved and I-2 was left without an organisational base from which this role could be played. I-2 explains:

“It’s been difficult for me to get a head around this since-- I mean it’s awkward really-- but since (person within the GPHPE) suggested I take the (particular leadership position) which was extremely sweet of (that person), last year, it’s actually not that easy for me at the moment without an organisational base to develop that role from...What the global programme has successfully done is connect both interested individuals who have a personal commitment but also relevant organisations. And the problem...has to do with the lack of stability and change. I don’t know what the situation is now but even (another partner’s) department had a big issue,
big management issue going on... Almost everywhere you look the national agencies and organisations for health seems to go around cycles of being created and then restructured.”

Another concern regarding the stability of inputs from organisations is the formality of their commitment and participation with the GPHPE. The document data reveal uneven levels of engagement and formalisation of various institutional partners. It is often difficult to determine from the documents the level of formalisation. There is one exception. The minutes from the first GSG meeting in Amsterdam describe some attempts at formalisation with one organisational partner in particular. Here is an excerpt from that document:

“(Specific organisation's) role as a partner must be made clearly visible both internally and externally, globally and regionally... Both (two people within the organisation) should be informed of all developments and copied on all correspondence; however, technical issues should be addressed to (one person) and major decisions to (another person).” GSG 2001

Aside from this noted exception, the details of these organisational ties to the GPHPE are less formal. A number of the partners interviewed described the relationship between their organisations and the GPHPE as more of a personal commitment than an institutional commitment. These individuals are often able to mobilise resources within the institutions they are based; however, the organisations themselves do not commit formally to particular kinds of ongoing participation. Informant I-10 explains:

“Our status is more me as a worker in the organisation who has a role in the global programme. My organisation knows that I have that role so it is not just my own private thing, but it is not our organisation who signed up for anything or has some kind of formal agreement... I would actually love if the global programme would go down the route... let’s say to become a little bit more formal but for that there needs to be a new plan. With more clearly defined goals and so on. And then one can approach an organisation really, whether it plays a particular role.”

Other informants have noticed this informality as well. For some, it even brings into question whether or not the GPHPE should even be considered a partnership, at least in terms of having institutional partners. I-2 elaborates:

“I am not convinced it is a partnership in my mind... maybe that’s its aspiration and maybe there are quite close groups in certain regions that are a very tight partnership between maybe academic institutions and others who are working... But as a whole I don’t see the steering group as a partnership to me... I don’t think it is invested enough in the kind of glue that keeps organizations and individuals together. The partnership processes, if
HC: And what do you think are those main processes?

I2: In terms of the sort of partnership literature that I am thinking about, it would be about understanding, it’s about purpose. Do all the players understand that? Do they understand each other’s purpose? You know the whole roles and functions. (The GPHPE) is a collaboration, yes, but a partnership implies something a little bit more structured, it can still be fairly loose but something more formal and set up with the agreement. I come back to my point almost about how the organisations from which the people come from, don’t necessarily sign up to it... (In my thinking a partnership is something whereby the individuals are representing a body, and the bodies have agreed that they can get more out of working together. And the individuals, if it is working properly, understand the responsibility and what kind of management control they’ve got. I don’t think that’s the case.”

Contributions such as employee time and operational resources from these organisations are significant for the functioning of the GPHPE. Some of these organisations also provide financial resources in addition to these in kind resources.

5.1.2 Financial Resources
According to the case study data, financial resources play a crucial role in the functioning of the GPHPE. The documents demonstrate this by calling upon partners to mobilise resources both in formal roles described in Terms of Reference and as indicated in minutes from meetings. Interview informants repeatedly describe the need for financial support and the limitations when such support is not present.

The GPHPE’s Terms of Reference indicate the key role of financial resources in achieving the aims of the programme. As outlined in the document, the global steering group is therefore charged with helping to mobilise such resources. The following excerpt describes the main responsibilities of GSG members in this regard:

“Members of the Global Programme on Health Promotion Effectiveness Steering Group (GSG) have:

To share responsibility to find the financing needed to achieve the aims of the programme as described in section I.”

Specific calls for partners to assist in the acquisition of financial resources can also be seen in minutes from GSG meetings. For instance, in the following excerpt, GSG members are called upon to find out the funding priorities of their respective organisations to see if links can be made to projects within the Global Programme:

“Members of GSG are requested to provide assistance in obtaining funding for GPHPE work, particularly in (particular)
regions. An inventory of funding agencies will be created, and GSG members from national institutions are requested to obtain their agencies' funding priorities in order that regions may be paired up accordingly for technical and financial support.”

Despite the generous donations of some organisational members and whatever attempts made the GSG members to obtain funding, there is a general consensus among the interview informants that the current input of financial resources into the global programme is not enough for optimal functioning. Indeed, many partners described the lack of financial resources within the GPHPE as its main obstacle:

“I would say that one of the biggest challenges of the global programme... is to not have a financial foundation sufficient to enable it to grow and develop at an expedient rate... This was particularly evident when we were trying to get the early developments in the (particular region), I think (this area) could have been one of the frontrunners in that it had some very motivated players and it actually had a regional plan ready to develop and it was very important at the time for this to be able to find some support and get going because at the time in the region, the field was floundering and quasi-non-existent. There was (however) no capacity for the global programme to mobilise support for that. It just stagnated for a number of years and I think a lot of important momentum and potential impact was lost.”

Resources are seen as vital for a number of different reasons. In the beginning phases, resources can enable or inhibit the initial development of the partnership. In the working phase, financial resources enable production by funding time for dedicated work directly. Also in the working phase, the data indicate that financial resources can provide a framework for specific deliverables that may not exist if the work is conducted on a voluntary basis.

As the partnership matures, resources can support production directly by funding people’s time for working on GPHPE products and projects. A number of informants described the significant difference in production from activities that have direct sources of financial support and those without. A sudden influx of funding, as in the following quote, can have a big impact on production:

“I can’t even tell you the difference it makes to have the (specific) project funded...(W)e’ll advance in one year—or never mind—nine months, in ways that we never could have without.
us working every night and every weekend.” I-20

In addition to supporting work by paying for time, funding can also stimulate production by providing a framework for deliverables. It is rare that funds would be provided without certain expectations for what will be produced and when. Therefore, funding can lend an aspect of accountability for production that may stimulate goals being achieved:

“(I)f there is a specific project activity with specific funds earmarked for specific tasks and deadlines, obviously then there is a sort of responsibility and accountability to meet those expectations so that does push things.” I-1

Just as informants noted this positive relationship, the opposite relationship was also described. A lack of resources can easily result in unclear expectations for delivering products, and therefore hamper the attainment of goals:

“When there is not a budget, however small, for a shared activity, the deliverables and the time frames get murky.” I-15

These are some of the ways financial resources can enable the production aspects of the partnership’s functioning. Financial resources, however, also play a role in the maintenance processes of partnership. For instance, in a global partnership such as the GPHPE, funding for travel becomes very important for the functioning of the partnership (the role of face-to-face meeting is explored in more depth in section 5.2). While some partners are supported by their organisational bases for travel, others may not have access to such support. Informant I-14 explains how resources are needed to enable the partners to meet for dialogue and exchange:

“Inadequate resources will not do. Literally people have to visit each other, see what they are doing, to understand cultural contexts so anything of this nature, if it is launched, must be launched with significant resources. Otherwise you tend to gradually lose the momentum which is such a pity.” I-14

Funding for travel was not the only area of maintenance activities that informants thought need to be better funded. A number of informants also indicated a crucial financial need for funding coordination processes. Informant I-8 explains:

“I think where there were resources supporting somebody being responsible to move things forward it works and when it is a whole voluntary process it is very arbitrary as to whether it goes forward or not.”

Whether the finances support production or maintenance processes, every informant interviewed indicated the central role financial resources play within a partnership such as the GPHPE. The following quote summarises some of the key issues observed by the informants generally:

“The issue of resources is always a key one. So if there were more money so that people could really be all attending the steering committee meetings and if there were more resources
so that time could be devoted to delivering the deliverables that people want to do in each of the regions I think it would surely make a difference, but it’s an endless and a constant issue and question. So if you wait to have all the resources in the world, you never do anything, and if you don’t have all the resources in the world, well, whatever you do is limited and constrained by that. But I think it’s probably been the main inhibitor due to the fact that people who took the leadership in the various regions didn’t have all the same means to do it.” I-5

Interestingly, while the vast majority of informants felt that a lack of resources was an inhibiting factor in partnership functioning, a few respondents saw positive aspects to the current funding situation within the GPHPE. For instance, some noted a lack of formal funding relationships lead to increased autonomy in functioning. Informant I-5 explains that often obligations come attached to financial contribution:

“(I)t’s sure that the resourcing of the endeavour is very important, and there’s always strings attached, one way or the other to the resources. So that having as much of a free hand to do whatever has to be done properly is very important and I think that in the case of the global effectiveness project it was very present. There was not this many strings attached.” I-5

Another informant elaborates on how such “strings” can impede autonomous functioning by creating constraints. I-7 suggesting that perhaps a voluntary approach is better for this type of endeavour:

“I do feel that a project like this is best suited to being a voluntary project, for the simple reason that once you have – you know, resources don’t come unattached. And this is the problem. So if – if a government entity for example puts resources into things, it ultimately wants something that relates to that government entity. Every organisation has its own set of goals and priorities that it wants met. And therefore they're going to – any project that they fund or anything that they get involved in they are going to want to see those goals reflected, and so they are going to influence it. So its quite clear, I think in some sense it reminds me of sort of an old story where you make a list of things where you make a list of things and say well, there's my car, my house, my wife, my job, my hat, my coat, my shoes, my books, my etc. And I remember the longer that list is, the less freedom you have. Because every one of those is a constraint.” I-7

As indicated by the data presented here, financial resources are a central input for the GPHPE partnership. As specific elements of functioning are discussed in
section 5.2, the role of resources will be further explored as relevant to particular processes.

5.1.3 The Partnership Problem

In addition to the material inputs provided by partner and financial resources, the data from the present case study indicate another critical input: the partnership problem. In this context, the term “problem” refers to the external impetus for the creation of the partnership. The data in this study indicate that the problem should be considered an input on the basis that (1) the problem predates the partnership, (2) not only the partners but many other actors are deeply interested in addressing the problem, and (3) the problem stimulates offers of resources (such as inspiration and commitment) and presents challenges (such as methodological concerns about production).

In the case of the GPHPE, the problem that motivated the creation of the partnership is the lack of sufficient evidence for the effectiveness of health promotion, and the related problem that the evidence that is available is not well presented to those who need the data to support decision-making. For the partners of the GPHPE – all professional health promoters – the problem of this lack of evidence has important repercussions. Informant I-7 paints a clear picture of the problem of this lack of evidence:

“(T)here is a real need and interest among people working in health promotion to demonstrate that what they do has value. I think that’s the thing that propels most everybody who works in this area: We’re continually asked to make the case that interventions work. And we have not made that case yet, in my view. We have not made it as well as it could be made. I think it’s always something that gnaws in the back of the brain of people who work in the field of health promotion. In my view health promotion still remains a field where it’s easy for a lot of people who work in public health and medicine to dismiss it, and just say, well there’s no evidence that anything works-- and I hear that all the time. And every time you hear that you want to grit your teeth and say, but there is some evidence. So I think that propels people forward. This is a field…which still seems to be very much in question. It has not proven itself.”

The problem is significant in that it impacts the partnership’s functioning in several ways. The problem serves as a motivational and inspirational resource for the partnership. The problem creates a sense of urgency. The problem also presents challenges that complicate the partnership’s functioning. On the other hand, three of the 20 respondents did not see a strong connection between the functioning of the partnership and the problem.

The vast majority of the study’s informants indicated that their main motivation for participating in the GPHPE was because of the common problem described above. Informant I-11 describes being motivated to participate in the GPHPE because of the potential to gain more recognition for the field and perhaps more funding for health promotion work:
“Well, the motivation is that it’s absolutely obvious that there is a need for building this body of evidence if you want health promotion to be recognized with a stronger and better profile in public health policies, (and) better funded as well.”

The potential for the problem to be motivating does not stop at the individual level. The problem is what seems to motivate organisations and institutions to participate in the partnership as well. This is the case according to I-1:

“I think the key partners that make the most time available for the global programme are people and places that have a significant level of interest in the subject.”

As the few quotes given here show, the partnership problem is a central concern for health promoters. The problem is connected to the strength of the field of health promotion and possibly to its continued viability as a profession in years to come. For these reasons, some respondents see the problem uniting the GPHPE as urgent. As I-5 describes, this urgency can stimulate the functioning of a partnership:

“[There’s] definitely a sense of urgency in the field of health promotion to address those issues, and there probably was an additional element of interest due to this very topic for a variety of reasons. I think in many places, for instance, there were important cutbacks in health systems and one of the most vulnerable parts was public health and within public health one of the most vulnerable parts was the health promotion sets of programs…And the fact that then you get very vulnerable to cuts has been a driver of talking about effectiveness and trying to figure out ways to measure effectiveness of health promotion in general…So I think that there was surely an additional something that made this specific venture motivating, if you will, for people to partake in as compared to maybe other type of endeavors. Both for I would say political reasons and for knowledge development and scientific reasons about the knowledge base out of which health promotion is operating. So I think it was a good topic to rally interest.”

A sense of urgency about a particular topic is of course a subjective phenomenon. A problem that seems urgent for some may not have the same urgency for others. Regardless, the potential for a problem’s perceived urgency to stimulate and motivate participants within a partnership emerged clearly in the data of the present study.

Informant I-8 describes the interaction of these issues, even though s/he does not personally seeing the problem of health promotion effectiveness as particularly urgent:

“I think unless you have an urgency pushing an agenda forward—for example if you go back to the work in the early area of HIV be it
prevention or care or whatever, just addressing the epidemic—(these partnerships) worked regardless of funding because it was driven by an urgency to nip the thing in the bud, to support people who were ill, to find out what was going on and to prevent as quickly and as dramatically as possible expansion of it. It was a very critical situation. Something like the GPHPE is only critical because we feel, and rightly so, we need to defend our field and keep it in the attention of the funders if you would. But there are other things that are happening that do that and there other ways that people are able to maintain their livelihood in the field. There are other ways that the field is getting reported on as far as its impact because there are researchers all over the work researching in their particular areas, so there is not that critical entity that drives people and facilitates a voluntary partnership. So I guess I am saying it is somewhat working but in order for it to have the potential that it could, it needs resources. That’s my bottom line.”

Aside from having the ability to motivate and propel the functioning of a partnership, the problem also holds the potential to complicate functioning. In discussing obstacles to partnership functioning, informant I-7 began to talk about issues that present themselves, not because of a lack of other kinds of inputs, but because of the complicated nature of the problem itself:

“I’ve given the example of resources already as a real problem. But I don’t think if we had – even if we had unlimited resources – I shouldn’t say unlimited -- but even if we had very large amount of resources, we’d still have other problems...money alone or resources does not solve all your problems in this area. Because many of the problems are related to the effort itself, and that is looking at effectiveness. Many of the problems are rooted deeply in what is the nature of effectiveness and the nature of evidence and what people who work in health promotion think those words mean.” I-7

While significant evidence from the data collected suggests that the problem impacts the functioning of the partnership, there were three respondents who disagreed. These respondents tended to see partnerships as functioning similarly regardless of the problem they were united to tackle. Informant I-6 elaborates:

“Well, I think all of these programmes-- all of the international partnerships that I am involved with-- basically operate the same way. They basically have the same kinds of resources. If you take the topic away and the time frame away there is a certain way of working in partnership in health promotion internationally and the
While it was not a unanimous perception, the data pointed more significantly toward the opinion that the problem does impact partnership functioning.

Three main categories of inputs emerged from the data of the present case study: partner resources, financial resources and the partnership problem. As described, these inputs each have significant effects on the functioning of the partnership. However, a relationship between them also emerged from the data. The inputs seem to have certain effects upon each other as well. For instance, the more urgent the problem, the more voluntary participation could be generated, the less financial resources needed. Or conversely, the more financial resources present, the more partners can be enticed to participate, the more willing they would be to work on a less urgent topic. This relationship was articulated quite well by I-7 when asked if there was anything that could be added to the GPHPE to make it better:

“It would be good if we could add more – different kinds of players...But see, they’re not the ones interested in our question. This is the problem. And this is where money could probably play a role. You could buy people in some of these other areas, which we can’t do. The reason we have people working on this project is because they’re interested in it. And to a certain extent, I’m interested in people who aren’t interested in our question, and how we could get them to think about it. And we don’t have that freedom. And I think that’s sort of a drawback.”

The relationship of these inputs will be explored a bit more in the next section as they relate specifically to aspects of partnership processes.

5.2 Partnership Processes

Partnership processes refer to the throughput portion of the partnership system. The inputs enter into these processes and then outputs (see section 5.3) exit from them. Within the partnership processes, two general categories of activity were identified: maintenance tasks and production tasks. These different activities take place within the partnership context. This context can either be strong with loops of positive interaction or can be weak with loops of negative interaction. This section will begin by defining the difference between maintenance and production tasks; and will explore the critical elements of partnership functioning that contribute first positively and then negatively to the partnership context.

5.2.1 Task Type

Within the GPHPE, two kinds of tasks were noted: maintenance tasks and production tasks. The maintenance tasks involve operational activities that contribute to maintaining the partnership itself, such as writing Terms of Reference or responding to logistical correspondence. Production tasks involve work that directly relates to the problem addressed by the GPHPE. Informant I-8 describes the distinction this way:

“(There are) ways of working which are purely logistic like how the programme actually manages to communicate and interact. But there also could be ways of working which are along the (lines of) proving the technical
(aspects), getting the technical input, digesting, analyzing it, and then getting it out.”

Similarly to how the problem affects functioning (see section 5.3.1), these production and maintenance tasks can also influence functioning. As informant I-1 explains, production tasks are easier to accomplish because they are interesting and have the same sense of urgency as the problem. I-1 also mentions how finances can often overcome this barrier:

“(Responsiveness) depends if you’re asking about operational kinds of things or content kinds of things. Because usually on the content side, people are very responsive.

HC: Why do you think that is?
I1: Well, because it is the meat. It is the nuts and bolts, it is-- you know-- the interesting part. When you’re faced with a fundraising challenge or an outline challenge or an organisational challenge it is a lot less motivating to respond on a voluntary basis than when it related to the raison d’être of the whole thing which is the content. And... it goes back to the funding issue because the projects that have funding there’s not so much of a problem of the responsiveness.”

As this quote explains, the nature of the tasks being undertaken may impact the functioning of the partnership. Understanding the interaction between the task and the functioning, may enable the leadership to tweak the partnership context to best support the particular work endeavour.

In the next section, critical elements of the partnership context will be described and their interactions explored.

5.2.2 Loops of Positive Interaction
The partnership context is the environment in which the partnership interacts and works. According to the data of the present study, certain aspects of this context encourage and reinforce synergistic working. These positive processes will be discussed in this section. Four main categories of critical elements were identified: leadership, input interaction, formal roles and procedures, and communication. The critical elements within each category that support positive partnership interaction will be described and explored.

Leadership and Positive Interaction
The importance of the partnership’s leadership is quite clear. The leadership has the ability to shape the partnership context. Critical elements of leadership that create positive interaction within the partnership include: professional efficacy and good values that inspire confidence; the ability to focus partners on the task at hand; a desire to promote and embody openness, trust, autonomy and patience for working with diverse partners; skills for resolving conflict; and a certain degree of pragmatism.

An important aspect of positive leadership is that the partners respect the leader. Within the global programme, a partnership not simply of people but also convened by and partnered with organisations, the leadership is not only the individual leader also the convening organisation. According to the data, partner confidence in both these leadership
capacities is important. When asked about the key factors for good functioning, I-10 says:

“I think the key factors are (the leader)’s leadership. (The leader) is a person recognised widely in the field. Plus, I would say, having an organisation in the back that has a good reputation...the combination is very valuable.”

A number of respondents described the values embodied by the convening organisation as important for positive partnership processes. Informant I-4 describes the importance of the IUHPE reflecting the general goals of health promotion in their work in the GPHPE:

“I think its very clear that people recognize that the IUHPE is an organization that’s values really are those of global health promotion generally in looking at promoting the health of everybody, which therefore means those that are most disadvantaged should have the most attention. So the equity issue is inherent in what IUHPE does, and I think that’s recognized well, and people respect that. And feel positive about working with an organization that is attempting to do that.”

Another quality of leadership that was indicated as important was the ability to create an atmosphere of openness among the partners. Openness is a positive element in the partnership context because it fosters participation.

“I think as well that the atmosphere of the whole thing is extremely positive, because there is a real desire to respect the ways of doing things (among the partners). There’s a real openness to dialogue.” I-5

Related to openness within the partnership, is the vital element of trust. Trust, like openness, is something that is fostered. Some of the partners may come into the partnership knowing and trusting other partners. Other partners may not know people and can be given opportunities to create relationships (e.g., through face-to-face meetings). Finding mechanisms to develop trust between partners is crucial for creating a positive partnership context. Informant I-4 explains this concisely:

“(T)here has to be a trusting relationship developed. All sort of things – lots of other things can happen – but without trust, it stops. So that would be the prime thing.”

In addition to encouraging openness and trust, a leader who promotes autonomy also contributes positively to the partnership context. According to the key informants, the leadership of the GPHPE has made very good decisions in cultivating regional autonomy for production:

“I think at the global level, first of all, (the leader) has provided incredible leadership in establishing a few ground rules like each of the regions should go at their own level, they should work on a project that is related to effectiveness but they have to set the parameters about that. So the idea of not imposing on
people really sets up people to work collaboratively. They are working on their own project but they are also very interested in what is happening in other parts of the world and I think the other thing that it does is help people to want to help each other at a global level.” I-20

An autonomous structure encourages openness by allowing people to express and address their needs. Autonomy also inspires trust because the very structure of it indicates a belief in the partner to work independently. It is also possible that for the creation of synergy, there need to be some balance within the leadership between total autonomy and some level of accountability:

“It is not just the autonomy alone. If it was just autonomy you wouldn’t do anything... I think it’s the autonomy plus the leadership. There has to be touch points or places where you come together and have to report on what you’ve been doing of something rather than just going off and doing whatever you want and coming back three years later. ... (W)e’re trying to find linkages.” I-20

When working in partnership with many diverse partners, conflict is bound to arise. The leadership of the partnership must be capable of listening to the diverse perspectives and facilitating conflict resolution in open and transparent ways. The leader may at times need to contextualise the conflict, hear all the positions, and help partners to see that their needs and desires will be respected. Informant I-11 provides an analogy for how a leader must anticipate and handle these things:

“I think the weight and the authority of the leader is very important... To make everybody understand that (the conflict) is not a life or death issue, and that there is room for everybody. That the cake is big enough, that everybody is going to eat, and that everybody is going to have a good slice, and that everybody is going to enjoy the cake, and that it won’t be the dry cake for some and the creamy cake for others, you know?”

Another element of leadership to be identified as important in this global partnership is patience and skill in working with diverse partners. This particular element is especially important for the creation of synergy. If synergy is the production of something unique from the interaction of the partnership, the facilitation of diverse parties working together is key. Managing this interaction requires certain skills of a leader because it can be a complicated and time-consuming process:

“It takes a lot more time to open things up for participation. Because different groups are at different moments and have different capacities. Sometimes you have give more time to let some of them come up to speed. But it is important because otherwise you close the participation to only a few.” I-13

Opportunities for conflict are abundant within the global programme. Not only are partners representing various cultures and geographical regions, they are also often associated with their own organisational bases. So managing conflict and achieving consensus can be a true challenge for the leadership:

“I would say we had competing agendas sometimes. As much as we would come to a place to co-operation eventually, I think at times there were different visions about what this project was and should be... maybe because part of that was that people were bringing in their pre-existing work and there was a need to stay close to that work, even as we were trying to fit it into and adapt it for this project. So it was complicated in that way.” I-19

It seems the key to managing conflict is respect. Tension will inevitably arise in a partnership such as the GPHPE, especially if it is operating openly. If differences of opinion result in new ideas, then tension may even be crucial for synergy. The need to handle these differences with patience and respect are crucial in partnership leadership:

“(I've observed) tension in terms of-- not tension which would completely paralyse the programme but tensions in terms of differences in opinions or points of view or priority setting for activities. I mean it is not like it is one big group of people with exactly the same approach or view but in those tensions it has always been a respectful pursuit of each other’s opinions. It has never been a “I'm right, you’re wrong” kind of a tension. Just differing perspectives on things...I would say at some points people feel like they need to voice their diverging opinion louder than others because it might be something close to their heart, close to their work or close to their regional affiliation. I mean it is not just a divergence of opinion on content but also on places and ways things are done. But I think it has always been resolved with respect.” I-1

The final attribute of the leadership identified was a certain degree of pragmatism. The leader must know what issues should be discussed with all the partners and also recognise when their input is not needed. Perhaps, in an ideal world all partners would decide on everything, but in the GPHPE, it was found that sometimes consulting a smaller group of partners actually enabled better functioning:

“You can’t keep enlarging a group and ask everyone for (input), you have to try to be more strategic in who is requested for what kind of feedback or what kind of comments... I think it is a reality that just has to be dealt with given that this is people volunteering their time, this isn’t their main source of work, this is extra.” I-1

By fostering a context of openness, trust, autonomy and patience, leaders can set a stage for positive partnership work. The
leader also encourages a positive atmosphere by respecting diversity and resolving the tension of conflict. Additionally, a leader also may also need to be pragmatic and know when to engage the full group or to take low-level decisions with a smaller group. In these ways, the leadership can strongly influence the processes within the partnership. However, the data also suggest that this relationship is not strictly one-way. Depending upon the inputs, the characteristics of the partners, the financial resources and the problem uniting the partnership, the style of leadership required may vary as well.

**Inputs and Positive Interaction**

As described in depth in section 5.1, inputs to the partnership can have significant effect on its functioning. Partner resources, financial resources and the partnership problem can all positively influence the partnership context by providing energy, expertise, material support and urgency. The data also suggest that positive processes within the partnership can also work to recruit new resources.

Without reproducing the previous section, the positive impact that inputs can have on the partnership will be briefly reviewed. Partners contribute positively by devoting significant time, expertise and passion. Partners’ willingness to take roles of responsibility and to follow through on commitments can greatly improve the work produced by the partnership. Partners’ connections to other people and institutions can also enable positive functioning by contributing even more positive inputs.

Financial resources can positively impact the functioning of the partnership by providing the material support necessary to do the work. Financial resources may also improve functioning by lending external accountability to the partnership that can motivate production. Funding can also be used to hire certain kinds of expertise needed by the partnership.

The partnership problem, which motivated the creation of the partnership, can positively contribute to the partnership by instilling a sense of urgency and motivating partnership action. The problem motivates within the partnership context in addition to motivating externally.

The data from the present case study show that the interaction of inputs to throughputs in the GPHPE is not one-way. As described above, inputs impact partnership functioning but it appears partnership functioning also impacts the inputs. A number of respondents, when asked why they joined the GPHPE described features of the partnership that interested them, for instance the global structure:

“(I wanted) to have the opportunity to learn from the project and the work going on and then also just the opportunity to do international collaboration was definitely motivating.”

In these ways, input interaction is a central feature of partnership functioning.

**Formal Roles and Procedures for Positive Interaction**

This section deals with the shaping of the partnership context in terms of formal roles and procedures. The data from the present study indicate that having a certain degree of structure positively impacts the partnership. This section will deal with the positive influences of the environment, including the formalisation of roles; goal setting; and internal and external accountability.

The environment or structure of the GPHPE is recognised by some of the participants as particularly beneficial to the
partnership. Respondents identified both the convening environment (the IUHPE) and the functional environment (the GPHPE) as positively affecting the partnership. At the convening level, one informant feels that the autonomy of the IUHPE, free from government and financial interests, lends important independence to the functioning of the IUHPE. Informant 1-5 explains:

“\(T\)he fact that it is a non-governmental organization, which is accountable to nobody but its membership and to the world rather than being accountable to a specific government or a specific whatever -- makes a big difference.”

At the functional level, a number of respondents agree that the global structure is positive. Respondent I-1 describes the importance of people having formalised roles at all levels within the partnership and observes the structural benefits of the global steering group and executive committee:

“I would say one of the major ways of working is sort of the fact that there is a global co-ordination and this global steering group... the executive committee gets a lot of different feedback from the regional members, co-ordinators and leaders and vice versa-- gives it back to them, and then distils over all the global steering group. I think the structure lends itself-- the operational structure lends it self to being able to bring information up and then take it back down, that sounds hierarchical and its not at all hierarchical but sort of distilling arms throughout the world. I mean all on the same level, it is not an organigram in a dominating sense but more like arms reaching out to the different sort of organs.”

Another respondent highlights the positive aspects of the GPHPE structure by first trying to envision an ideal structure which could be created with more resources, but eventually the respondent sees problems with that structure and returns positively to the present structure for it’s organic, contextually appropriate structure:

“In an ideal situation, we’d be an institute, with 40 or 50 people sitting in a nice building somewhere in the world, with one person from everything, you know, highly diverse group of people all interested in the area around effectiveness, and we’d be working everyday on this. And then we’d produce... lots of papers and lots of details. There are examples of this in the world. I think of things like the Brookings Institution – where they do have a group of people who basically work on the problem. But the big challenge for us at IUHPE would be even if we took that route, and had a nice building somewhere, in a downtown (metropolitan city) or somewhere... even if we had that, we’d still have the problem then that we wouldn’t be bringing in all the parts of the globe. We’d have the same problem if we put the institute in (another major metropolitan city)... I think this is a fundamental
obstacle for moving this program ahead as fast as we would like. Of course…if (there were) unlimited resources, (we) probably would fund a small group of people in each of these regions to actually have a regional view, and then there’d be some kind of global headquarters somewhere. But then we’d be talking about a multi-million dollar project. And what we’ve got of course is a project that is a multi-million dollar project that is being run voluntarily. And that’s what the IUHPE is all about in some ways. So you know, you’ve got – essentially you’ve got a big voluntary organization here. “I-7

It seems that the kind of structure needed for positive partnership functioning may vary with different inputs. The above quote illustrates the benefits of the GPHPE structure for the geographically diverse partner represented. The quote also describes how financial resources can increase the structural options available for a partnership. It is also clear that the problem impacts the type of structure needed. Informant I-5 elaborates:

“I think it depends very much on the nature of the topic. I think that structurally, some things internationally would be better served if they were into governmental organizations, like something in the UN agencies or something. If you look at the possible partnerships, for instance, on global warming or things like that, as governments are key players into that, and as sometimes you need teeth on those things to work, a non-governmental organization would probably not be the right way to go. International governmental organizations would be better for that. So I think it depends very much on the topic.”

Another positive aspect of formal roles and procedures is having a systematic procedure for goal setting. Goal setting is an essential process for positive partnership in that it focuses production. The data suggest that the goals of the partnership motivate partners both initially and in their ongoing participation. The goals of the partnership differ from the problem uniting the partnership, in that the problem is created externally and the goals are created internally. The goals are the partnerships step-by-step answer to the need presented by the problem.

The overall goals of the partnership may serve to recruit and motivate new partners. These goals allow the partners to feel that by participating they will help tackle the partnership problem. Respondent I-1 explains:

“I think the global programme has extremely ambitious goals and that is what makes it interesting. And probably what motivates and drives people to give such time and energy into it, because it is an ambitious pursuit.”

Short-term goals also help to motivate people. Partners work between milestones on projects that they will publish or present at the next conference or meeting. These smaller goals also positively impact the
partnership by propelling ongoing production. Informant I-13 describes the motivating role of the next global conference:

“And now (the partners) are really excited for preparing for the Vancouver conference. I think that is a motivation too, that’s an incentive.”

Positive goal setting is not just about setting targets. Positive goals are created by the partnership collaboratively, ensuring they represent the desires and aspirations of the whole. Positive goals also need to strike a balance between being attainable and being ambitious.

“I guess the only other thing is— and this was definitely attempted—a realistic programme of work. And when I say realistic, I mean ambitious yet reasonable. Not too modest. I mean sometimes people say “let’s be realistic” and they don’t put the bar of ambition up high enough so it’s just—I think you need something to be striving for, but you need to be realistic about what outcomes you can actually manage to achieve with what you have.” I-8

The final element of formal roles and procedures identified in the present case study was the positive role of accountability, both external and internal. Both kinds of accountability positively influence partnership functioning by ensuring partners fulfil their commitments. Mechanisms for accountability facilitate production and work to achieve the partnership goals.

External accountability refers to accountability that originates outside the partnership and becomes part of the partnership functioning via an input. An example of external accountability would be timelines and deliverables that come attached to financial resources provided to the partnership. The positive interaction of this type of accountability has been already been discussed in this report.

The other type of accountability, internal accountability, refers to mechanisms put in place by the partnership to ensure partners follow through on their commitments. Creating Terms of Reference, protocols and setting goals are parts of the first step in accountability. The second step is following up to ensure responsibilities are fulfilled and products are being created. Informant I-8 explains:

“(I)t is not enough to just establish the protocol. You have to establish an accountability process, and responsibility for that and consequences.”

Accountability seems to be an area with which the GPHPE has struggled (see section 5.2.3). However, one respondent provides an example of how accountability has supported the global monograph project:

“(T)he monograph I think is being very well organised, well managed, good deadlines are set, expectations are there and I feel pressed to meet those demands even though I don’t always meet them. I am very confident that we are going to have a good product out of the monograph.” I-6

Formal roles and procedures can interact positively within the partnership if an
appropriate structure is created, if ambitious but realistic goals are set and if mechanisms for external and internal accountability are in place. For positive functioning, these roles and procedures need to be informed by the inputs and tailored to desired outputs. As described, there is a great deal of interaction and exchange between the elements of partnership with regard to roles and procedures.

Communication and Positive Interaction
Communication is the medium through which exchange happens in a partnership. In order for a partnership to create a positive context for their work, communication needs to be purposeful, frequent, and recognisable and must facilitate exchange. Within the GPHPE, communication presently takes place via email, newsletters, publications, through telephone calls, teleconferences and in face-to-face meetings.

Virtual forms of communication such as email, newsletters and telephone calls will be discussed in more depth in section 5.2.3. However, one respondent made some suggestions for how to positively enhance this kind of communication which are relevant for a positive partnership context. Respondent I-9 suggests increasing the visibility of GPHPE communications and making the communication more engaging:

“I would like to be updated on global program activities in a recognizable way. And recognizable, there is a problem. I can imagine that IUHPE is glad when they put information in their journal. The only thing as a user, I am getting about 10 journals every week, so to make information noticeable and relevant to me, it’s not enough that you print it in the journal, but you have to find guerrilla ways to get my attention. So you might have to add a email newsletter to it, or you might ask me to do certain things for the global program, like answering these questions you are asking me. That would establish a more direct link between myself and the global program. And then of course I would be curious certainly to know about what is going on in other regions, but that would be an update. But the contribution of the global program to the European agenda, etc., I would be very interested in that, and knowing whether what I’m doing at the national level on effectiveness still could play a role in that.”

As this quote suggests, positive communication creates opportunities for synergy. According to the data of the present case study, no mechanism for communication is more positive than face-to-face meetings.

Face-to-face meetings stimulate immediate exchange and are therefore very conducive to the production of synergy. This immediate interaction is also very effective for joint decision making and goal setting. Another benefit of face-to-face meetings is that they allow new partners to interact with one another and begin to build relationships and trust.

One respondent, I-20, was particularly articulate about how meetings enhance the positive functioning of the partnership. I-20 describes how meetings create synergistic exchange:

“It comes about, again, because I think we’re
brought together at several (meetings) and we have to do reports on what we’re doing and when you hear people reporting it kind of links—“well, oh that’s similar to what we’re doing” or “Oh boy, do they need help? I know something about that.” So often what happens is that people carry on their own projects and they don’t care so much about what’s happening in the other project because you get quite narrow minded about what you’re doing. And you’ve got enough work to do on your own. So you’re just concentrating on getting your own work done. So I think there is something important that happens in those meetings that we have at the global level that helps create some kind of synergy with people.”

Informant I-20 also describes how meetings can be a good forum for the joint-decision making needed for positive partnership functioning. In meetings, the positive leadership aspects of openness and diverse exchange really have their full impact. The following comment also reiterates the role of autonomy in a positive partnership context. I-20 describes the GSG meeting in Perugia, Italy:

“I guess something that stands out for me was when we met in Perugia and were talking about the global programme. Because it was sort of a critical point about how we were going to include or not include the regions... and what I recall about that was just the open discussion about it. Some people felt that the regions shouldn’t be involved and others felt they should and just the way (the leadership) handled that...So that particular instance stands out for me... I think all of the discussions we’ve had are, they are very open. You can be critical, and people are. And people are understanding and supportive. They help one another move along. That’s the other thing about being able to move at your own rate. There is no judgement about if you haven’t actually done a project or an effectiveness project but you’re just trying to develop capacity, there is no judgement about that.”

Lastly, face-to-face meetings are crucial for positive functioning because they provide a forum for partners to get to know one another. As described earlier, trust is a critical ingredient for a partnership. Meetings help to build trust among partners by increasing their exposure to one another. The building of these relationships enhances the partnership not simply at those meetings but it stimulates exchange beyond the meetings as well. Informant explains how face-to-face meetings catalysed a synergistic relationship with a partner on the other side of the globe:

“I mean if I hadn’t had met (specific partner) I never would have phoned her. I mean never. Even if (well-known partner) might say to me, well, you know they really need help—“Well you know that’s nice, lots of people need help.” But it’s the being with (this partner)
Communication is truly the conduit for work in a partnership. Communication among such diverse, busy people can be challenging (see 5.2.3). However, effort must be put into enhancing positive communication. The most positive type of communication, according to the study participants is face-to-face meeting. Unfortunately, such meeting is resource-heavy which has posed a problem for the GPHPE.

The Positive Loop
Leadership, inputs, roles, procedures and communication are some of the critical elements of a partnership. If these critical elements are maximised to the full extent of their potential they create a positive context. As indicated by the case data, the positive context is a system in which the elements constantly interact. Leadership shapes the kind of inputs recruited, the types of roles and procedures needed and the atmosphere in which communication takes place. The inputs determine the kind of leadership needed, what appropriate roles and procedures are appropriate and the best ways to communicate. Roles and procedures indicate who the leaders should be, how the inputs are put to work, and the timing, frequency and mechanisms for communicating. Communication is the medium through which the leaders lead, how the roles and procedures are formalised. As a result, the elements of the system feedback into one another creating a loop of interaction. Positive elements interact encouraging and reinforcing other positive interaction and elements. Thus, a loop of positive interaction is created within the partnership context.

In the next section, loops of negative interaction will be explored.

5.2.3 Loops of Negative Interaction
As described in section 5.2.2, the elements within a partnership interact with one another to create the partnership context. These elements and interactions tend to reinforce or inhibit one another. In the previous section, loops facilitating positive interactions were explored. In this section, negative elements and interactions will be explored to gain insight into how they produce a negative partnership context. As in section 5.2.2, four categories of critical elements will be explored: leadership, input interaction, formal roles and procedures, and communication.

Leadership and Negative Interaction
The data of this study reveal some critical elements of partnership that can have a negative effect on functioning if the leadership does not take proactive measures to avoid them. These negative elements are distrust, unresolved conflict, unrecognised partner contributions and dominance.

The importance of trust in the partnership context was described elsewhere in this report (see section 5.2.2). However, the impact of distrust is sufficiently profound that it requires mention in its own right. Distrust erodes away at the partnership and can inhibit its ability to function. Lack of trust and confidence can act as a dividing force, foster suspicion among partners and drain motivation to invest in the process. Informant I-8 describes these effects:
“I think that if you don’t have confidence in the partners for whatever reason and there are suspicions of personal, professional agendas getting in the way or perhaps over-riding the joint agenda, then you run into problems… If the partners are thinking that one partner is out for self-centred benefit as opposed to the benefit of a group endeavour, then it is a dividing type of situation. And so people are not going to invest in a group effort if they are wary of the motivations of members of the group.”

In addition to distrust, and sometimes exacerbated by distrust, is the issue of unresolved conflict. If the leadership is not very sensitive to tensions within the group, conflicts can sometimes go unaddressed. These tensions can undercut other partnership processes by allowing dominant partners to push the agenda and causing other partners to withdraw from the interaction. Informant I-11 describes this negative dynamic:

“(What) is typical for the partnership issue -- which is not only for the global programme-- is that people, when there is an obstacle, rather than confronting the obstacle, and discussing it and trying... to make compromises, and trying to find a resolution that is agreeable to everybody, they withdraw. They shut up. So they resolve nothing, and only those who are overwhelming a group survive, and impose their way of doing things... And then it creates a bad climate, and the people stop involving themselves. And if they were smarter, they would discuss. I’ve seen... exactly the contrary happening... it’s peacemaking. It’s just peacemaking technique. Where you say to someone you don’t need to defend yourself, or you don’t need to aggress everybody, it’s fine, I mean we discuss and we see and we make consensus. We develop a common agreement. Everybody trying to again bring a compromise so there would be a sense of – a common sense of the resolution of an obstacle. This is very important. And for me, this is very often what inhibits, is this again conflict of personalities.”

The partnership can also be undermined by a failure of the leadership to recognise partner contributions. Partners, especially voluntary partners who are contributing personal time to engage in the partnership need to feel that their work is appreciated. Informant I-13 describes the issue rather concisely:

“If you don’t recognize everybody’s contribution, people get a little tired afterwards.”

The last element, touched on briefly in regard to conflict, is the issue of dominance in partnership. Partner dominance is the other side of openness and appreciation of diversity. Many informants talked about how global input was valued, sought and incorporated into
the functioning of the GPHPE. One partner, I-5, felt concerned it might be too early to tell, that listening to input is one thing but seeing how that input manifests in output is another matter:

“(I)s (the global perspective) going to show really in the end products? Because the global monograph will be first in English – and I don’t know if there are plans to have it in different languages at this time – there is a style of writing and there are types of deadlines that are linked to producing something like that that might not be compatible with how the world operates in many part of the world. So one issue is that even if the will is there, will the outcome reflect it as much as the original intent was there, so I don’t know that. And I think it’s a main issue.”

These elements clearly interact with one another. Distrust can breed conflict, conflict can lead to the withdrawing of some partners and the domination of others, which can in turn cause contributions to go unrecognized. All of these elements undermine and inhibit participation.

Inputs and Negative Interaction
Inputs can negatively impact partnership functioning. The consequences of a lack of financial resources are discussed at length in section 5.1.2. Without funding the partnership is limited not only in the outcomes it is able to produce, but also in the ways it is able to operate. For instance, without funding for travel, meeting attendance for a global partnership can not be ensured. Without resources, the partnership is completely reliant on the input of partners for functioning.

Unfortunately, the input of partner can be problematic as well.

Perhaps the most negative aspect of relying solely on volunteers in a global partnership such as the GPHPE is that it can be difficult to enforce accountability. Because the partnership work is on the side, other priorities may take precedence. Informant I-6 explains this clearly:

“The organisation of such a (partnership) has by nature to be voluntary, friendly, non-demanding, non-confrontational and especially low in accountability. We don’t feel empowered to hold each other accountable as much as we would in our normal daily work organisation. No one is no one’s boss. We’re all here voluntarily and that creates an accountability problem.”

While this is commonly acknowledged among the study participants as unavoidable, it does obviously inhibit the work of the GPHPE. Of additional concern is this dynamic of committing to things and then not being able to follow through further disables the functioning of the partnership because of the feelings of guilt it instils in some participants. Informant I-20 explains:

“I think of these people as all volunteering their time, trying to do the best they can but I mean if the programme was resourced, it would be a totally different issue then, right? Because then you could have expectations that say, ‘Ok, we’re going to be on a teleconference and we’re going to do this and how are we going to reach out to
people. ’ I mean there are all kinds of things you could do. But I worry about the burden it puts on people and so I think that’s the cost of not having something well resourced is that you have to rely on people’s good will to do work for you. Or they worry about being ashamed when they arrive with nothing done.”

Reviewing the data, inputs have a clear reinforcing effect in the negative ways they interact. A lack of financial resources causes an over-reliance on volunteers, which in turn can damage the relationship of the partners to each other and to the partnership.

Roles and Procedures in Negative Interaction
In loops of positive partnership interaction, clear roles and procedures are defined. In loops of negative interaction, roles tend to be murky which has a number of negative effects on partnership functioning. Unclear roles can result from a lack of communication or from different conceptions of how the partnership should function. Unclear roles can result in conflicts between partners and wasting valuable face-to-face time.

A number of study respondents stated during the course of interviews they were unsure of their title or role within the GPHPE. According to partnership documents, all interviewees had established roles within the GPHPE. However, the participants did not themselves know their status. This clearly points to the role of communication regarding this issue. For instance, informant I-8, a member of the GSG according to the most recent documents, remarks:

“I don’t even know if I am still considered as being on the steering group. I think that I am probably not.”

Unclear roles may alternatively result from having different conceptions of how the partnership should function, as informant I-6 suggests:

“It is tension that comes from having different points of view about the nature of partnership.”

The consequences of unclear roles can contribute to other negative dynamics within the partnership. For instance, if the roles are ill-defined, responsibilities also get confused and that can lead to conflict. Informant I-19 recalls an experience within the GPHPE:

“Yeah, the roles weren’t defined well, and again I think that’s actually a good way to (describe) it, because I think we ran into some role and responsibility clashes a little bit along the way.”

In addition to other negative aspects of conflict within the partnership, clashes between partners as they attempt to sort out their roles can lead to time-consuming posturing. Informant 1-6 remembers feeling frustrated by this:

“I was very disappointed that we had to begin all this silly positioning with (a specific partner)...I felt a great waste of my time at least that I had to spend so much time dealing with (this) non-sense.”

As these issues indicate, having ill defined roles within a partnership can exacerbate other negative dimensions of partnership functioning.
Communication and Negative Interaction
As noted earlier, communication is the fundamental platform upon which partnership interaction takes place. Poor communication can negatively impact partnership functioning in a number of ways: it can leave people feeling overwhelmed, or left out and confused; it can exacerbate problems of accountability; and perhaps most importantly, it can reduce a partnership’s capacity for exchange and synergy.

There can be a communication problem of information overload. Too much information and paper can cause people to shut it out. Several respondents admitted feeling overwhelmed by GPHPE communication. For instance, I-6:

“(S)o much paper is generated by this project that I find myself, because I have so many projects to pay attention to, skimming and my attitude toward information from the global programme project is that (specific partner) will bring anything to my attention that I must know and everything else I skim.”

On the other hand, a large number of respondents (sometimes the same respondents) said there was not enough communication from the GPHPE. When respondents were asked about what was happening in the various regions of the GPHPE, very few could say. At this point, most respondents said that had not received information on the various programmes. For instance, informant I-9 says very simply:

“We need an update!”

A few respondents attributed their lack of knowledge, not to a lack of communication, but to an inability to “lift up” points from the information they did receive. Informant I-15 explains:

“(W)hat you’re tapping into is my ignorance of what’s happening in regions and it may be that I am not reading carefully things that are coming my way but it may also be that it is hard to lift up what’s occurring. I mean I have read the reports as they come out. But I don’t know that I have an intimate knowledge.”

This concept of “lifting up” communication may be a matter of increasing visibility. Informant I-2 describes how the GPHPE may need a bit more marketing:

“(T)he programme needs a bit more visibility and marketing, that sort of thing. It’s not really my field but I think maybe it needs a bit of a lift. I don’t know, maybe I am out of the loop but I just don’t know where regions are. So has it got a continuing and strong identity? I am not sure at the moment... (M)aybe a place has been quiet for a while but is maybe doing some really good ground work, still important stuff and we need to know about it. So when I am talking about marketing, I am not just talking about something sort of glitzy and superficial but some means of reporting.”

This lack of visibility has implications. If people are not seeing or taking in information about the GPHPE, they can not be sure of its productivity. If they do not see that it is producing anything, they
can begin to doubt its utility. Informant I-9 says:

“The output of the global program, I do not recognize. If you would ask me what has the global program produced, beyond meetings, beyond what is available in the IUHPE journal, etc., I do not recognize something. I do not remember something that is the outstanding contribution of the global program to the world that makes them deserve a Nobel Prize. You hear me say I’m not sure whether this has to do with visibility, or with productivity. I can’t judge it.”

Ineffective communication with a partnership like the GPHPE can be detrimental in ways that may not be obvious. Throughout this report, issues concerning accountability have come up. One mechanism the GPHPE could use to help their busy partners remember their obligations is a means of communicating which effectively reminds them of their commitments:

“What happens with these international partnerships is that people come to a meeting, they sit around the table they are excited about the ideas that are before them for the moment. They are also very interested in and they have an interest in showing that their organisation can contribute and has resources and power and so forth. So typically at these meetings, big plans are made... And then everybody gets on the plane and goes home and the reality of their daily existence hits them and if they don’t get reminded and reminded and cajoled into actually taking the action then it just slips away and slips away and slips away and before long everyone kind of tacitly agrees, well it’s not a top top priority so we’ll just let it slip and as long as no one is called on the carpet for it slipping then it just dies a dignified death and in my view.” I-6

Perhaps most importantly, a lack of global level exchange inhibits synergy by limiting partner’s ability to share their work and thinking. Many respondents felt that presently the GPHPE doesn’t have enough opportunities for exchange at the global level:

“I think where (there is) a sporadic -- unfortunately, very sporadic -- level of engagement is more regular communication with the global group so that people feel like they are aware of what’s going on in other places and that they could make the links and get in touch with people for more information...It is just to kind of give a tangible feel to something that is very virtual.” I-1

Certain suggestions were made my participants about how to improve this kind of exchange. A number of people talked about having a global web tool that would allow people to upload documents for exchange. People could explore independently and therefore tunnel down as far as they wanted or needed to for their own interests. Informant I-1 explains:

“(A) virtual space to have the contacts and a sharing
of documents, people being able to upload their minutes from meetings or different publications, things like that. Rather than circulating them…via email and different group lists… I see that it really could serve so many useful purposes in information sharing and real access by all of the different partners and projects to what is going on. It (can give) people more autonomous exploration of their own interests within the global programme rather than always having to rely on it going through a sort of question/answer process.”

Another suggestion for improving synergies between partners is by focusing exchange on “gap analysis”. Focusing on the gaps in partners’ work on the project may help others to find niches where they can lend their expertise. Informant I-15 describes how this may be useful:

“There may be some missed opportunities that could be remedied, like some of these exchanges, that we were talking about a moment ago. With a particular emphasis on a sort of gap analysis. What didn’t you get to do? I am not much for summative evaluations of things but what kind of things would—what are some gaps in your world? In your part of the world? And how can we reach across those gaps and are there complementary things happening that could connect them and how could be do that?”

Of course, global exchange can also happen very well in person, at face-to-face meetings as described in section 5.2.2.

Communication is a vital tool in a partnership. If mechanisms for communication are not properly in place, it can negatively affect the partners’ perceptions of the programme. Without transparency, trust suffers. Without knowledge of progress, partners can become discouraged. With too much information, people may feel bad for being unable to keep up-to-date.

Communication also interferes with functioning. Inadequate communication may lead to missed opportunities for collaboration by not keeping the partnership in the forefront of people’s minds and by not creating forums for sharing.

In sum, certain critical elements can reinforce negative loops of interaction within partnerships. As with the loops of positive interaction, the elements within loops of negative interaction reinforce one another. If too many negative elements dominate the interaction, the partnership context may become negative. Failures in the critical elements of leadership, inputs, role and procedures and in communication can multiply and overwhelm the interaction. Distrust, conflict, lack of recognition, partner dominance, lack of crucial funding, unclear roles and poor communication all work against partner exchange. If partners do not exchange, they cannot produce synergy.

5.2.4 Loop Interaction

In the present case study, the data indicate that positive loops of interaction and negative loops of interaction exist simultaneously within the GPHPE. There was not a single respondent who saw the interaction of the GPHPE as either all negative or all positive. The data also indicate that different individual partners
perceive the balance between positive interaction and negative interaction differently. Partnership interaction is a subjective reality.

Outputs may offer a more tangible indication of positive and negative interaction within the partnership. Output is discussed in the next section.

5.3 Output
Three types of partnership output were apparent from the case data of the GPHPE. These outputs were additive outcomes, synergistic outcomes and antagonistic outcomes. This section will examine each type of outcome and, where possible, will illustrate how partnership interaction translates to output. The feeding back of output back into the partnership will also be reported.

5.3.1 Additive Outcomes
Additive outcomes are outcomes that have not been enhanced at all by the partnership interaction. To describe additive outcomes mathematically the equation would be $2 + 2 = 4$. The inputs are unchanged by the throughput and so the output is also unchanged. In other words, the partners gain nothing from the interaction and they produce what they would have produced anyway.

Because the additive outcomes are barely touched by the partnership, they are difficult to detect in an inquiry such as the present study. However, one comment stands out as indicative of additive processes:

“I have no images of activities in for example (names many regions of the world) that I would label global program health promotion effectiveness activities. At the same time, I have a good and clear image of effectiveness activities in these countries, because I’m well related to key players in those areas, I know their reports, I know what they’re working on in the effectiveness arena. But I would have known that without the global program as well.” I-9

As this quote demonstrates, additive outcomes are not produced directly by either positive or negative interaction but by a lack of partnership interaction completely.

5.3.2 Synergistic Outcomes
Synergy is the combining of inputs through interaction that produces outcomes that could not have been produced by those inputs separately. Mathematically this would be expressed $2 + 2 = 5$. The concept of synergy was defined very well by informant I-13 in answering the question: what do you think is the GPHPE’s greatest accomplishment?

“I think it is bringing people together to do more than we were doing in our separate ways.”

To ascertain information about the production of synergy within the GPHPE, each respondent was asked the question: “Would you say that GPHPE integrates the input of its members to produce unique results (that could not have been accomplished otherwise)?” In general terms, the overall consensus of the respondents is that the GPHPE has produced synergy. One respondent describes the synergy produced by the GPHPE:

“I think a lot of the work that the programme produces-- I mean it is only based on a compilation of the input of its members. It wouldn’t exist without that. And I think most people
wouldn’t have the time or the mandate, nor the network to contact all those people individually and get that same result. I think all that we produce takes into account the unique input of different members otherwise we wouldn’t produce anything.” I-1

The most frequently cited example of a synergistic output of the GPHPE was the upcoming global monograph. The monograph illustrates synergy in a production task (see section 5.2.1). Informant I-11 explains in depth how the global monograph is a joint product that would not have existed without the global partnership:

“(I)t’s not that we said we are going to do a global monograph on health promotion effectiveness and we are going to do it in this way, this way, this way. We actually are commissioning the work and then... synthesizing all the knowledge that each of these specific activities integrate into the global programme, into a publication that can be widely disseminated and then benefit to large numbers which would not... necessarily have had access to these specific areas of work.”

This quote also illustrates some of the positive interactions that may have contributed to synergy in the production of the global monograph. Synergy may have resulted from a balance between autonomy, exchange and integration.

While the global monograph was often cited by respondents when asked about synergy, it was a complicated example because it had not actually been published. This was a complication due to the timing of the inquiry. Another inquiry after the release of the monograph would likely have yielded more concrete examples.

A number of respondents described synergistic output from the global programme in its work to bring issues about evidence and effectiveness onto the global health promotion agenda. Respondent I-20 explains:

“I think (the GPHPE’s) greatest accomplishment from my perspective would have to be the increased awareness in the world of the importance of health promotion to be looking at the effectiveness of its programmes. And I think there is that awareness.”

Respondents also mentioned synergistic output in relation to maintenance tasks of the partnership (see section 5.2.1). A number of products were created specifically by the GPHPE to enable its functioning on the global level. Examples are the Terms of Reference, the communication strategy and the Operational Protocol. These products reflect synergy given that they certainly would not have been produced without the partners working together. For informant I-6, the creation of these documents was the solidifying of the GPHPE idea.

“Just getting all of these different people together around a common goal and agreeing Terms of Reference and agreeing to produce for example the monograph. This is all takes the global programme beyond rhetoric and there was always a great fear in
These products, the Terms of Reference, etc. provide clear indications of how output can feed directly back into the partnership interaction. These documents influence the partnership because they are the rules governing it. The existence of these outputs increases the strength of the partnership, which in turn may attract more partner and financial input. This is illustrated by the continued expansion of the programme since its inception.

“The greatest accomplishment to date has just been a sort of level of satisfaction that I see with the global partners growing, diversifying, new people coming on board who are interested and just the ongoing enthusiasm that has been evolving around the relevance of the global programme.” I-1

While the majority of respondents saw synergistic output from the GPHPE on some level, a few respondents felt it was either too soon to tell or that more could be done to enable global exchange and therefore increase synergy. Respondent I-15 explains:

“I think there is some evidence of (synergy). I think the role of convening people around those aims and prompting folks to be engaged together has had some influence… people at least on the regional teams have thought about things and done them. There probably is another step of looping up across the regions that may still be a bit elusive.”

The data suggest that synergy can result in both production and maintenance outcomes. Synergy appears to be a product of the positive interaction of partnership processes. Synergistic outputs also seem to feed back into the partnership to further strengthen and reinforce positive processes.

5.3.3 Antagonistic Outcomes
Antagonistic outcomes occur when the partnership interaction has a draining effect. Antagonistic output is substantially less than what the inputs would have produced without the partnership process. As a math equation antagony would be represented as $2 + 2 = 3$. That is, something was lost in the process. Given the inputs of partnership, processes that produce antagony will clearly waste time (partner input) or money (financial input). Often antagonistic output manifests as no output at all.

Two clear examples of antagony were identified by the respondents of the present study. Both examples are of maintenance tasks that were talked about and planned for but that never came to fruition.

The first example of antagony in the GPHPE involves a task that had been discussed by a number of partners but failed to materialise. A good deal of meeting time was used to discuss the project and follow up was attempted, however, the project just simply never came about. One informant, present at the initial discussion describes the waste of meeting time and energy in following up.

“I think there is some evidence of (synergy). I think the role of convening people around those aims and prompting folks to be engaged together has had some influence… people at least on the regional teams have thought about things and done them. There probably is another step of looping up across the regions that may still be a bit elusive.”

But we did go to the trouble at the end of that meeting (creating a plan), that really has never been used. (People) just didn’t get back – despite prompts. I guess at some point you
stop prompting. And maybe there are a lot of other factors[everybody is busy and I just assume there are more important priorities that other people are attending to. I think a lot of this starts from being (ambitious) and being under-resourced. You know, context matters.” I-15

This example of antagony points to critical elements that have been noted previously such as a lack of resources resulting in an over-reliance on volunteers and over-stretched staff and a lack of sufficient mechanisms for accountability. This example also demonstrates how a lack of output negatively affects the partnership. First, the project was not available for the use and sharing of the partnership. Second, informant I-15 admits to reaching the “point you stop prompting” which indicates withdrawal. While this participant apparently understands that mitigating circumstances may have prevented this particular project from happening, there are hints that ongoing antagony could result in a loss of confidence in the partnership.

The second example of antagony in the GPHPE involves a task related to recruiting more financial resources. According to meeting minutes, time was spent planning for organised means of linking potential funders to potential GPHPE projects. People were named in the documents to fulfil certain responsibilities, however, this particular task was never followed through. Respondent I-6 describes how a lack of accountability impeded this work:

“(T)here was no participation in that task because I don’t even think that task ever even really got launched…(T)ypically at these meetings, big plans are made and this sounds like one of these big plans... And then everybody gets on the plane and goes home and the reality of their daily existence hits them and if they don’t get reminded and reminded and cajoled into actually taking the action then it just slips away and slips away and slips away... and in my view, at least from my involvement, that’s what happened to this task.”

The obvious impact this incomplete task had on the partnership was continued deprivation of financial resources than may have contributed to negative functioning.

Antagonistic output appears to be a result of the negative interaction of partnership processes. Antagony itself contributes nothing to the problem and indeed has a further negative impact on partnership functioning by discouraging partners, by wasting resources and by failing to make necessary contributions.

In sum, outputs are the manifestation of inputs coming together in various ways. With additive outcomes, inputs simply move past the partnership interaction untouched by it. Additive outcomes are not affected by the partnership and appear to have no effect on it. Synergistic outcomes are produced when positive processes enable collaborative exchange among inputs to create something unique and better. These outputs feed back in to the partnership and seem strengthen the interaction. Antagonistic outcomes result when inputs come together but do not produce expected outcomes. Antagony is produced when positive intention meets negative loops of interaction. These outputs may revert back in to the partnership negatively impacting the interaction.
These relationships and indeed the interaction of all the inputs, throughputs and outputs of partnership will be further explored in the next section.

6. DISCUSSION
Increasingly in modern society, partnerships are being called on to solve the most complex issues of our time. Partnerships are being formed in areas such as development, nursing, social work, public health and especially in the field of health promotion. Within the field of health promotion, partnerships exist at every level from one-on-one interventions to global programmes.

Given the popularity of partnership working, the literature examining its functioning is oddly scarce. The literature on partnership functioning that does exist examines almost exclusively partnerships at the community level. The purpose of the present case study was to gain insight into the functioning of a global health promotion partnership. Using the community literature as a point of departure, this case study analysed documents and conducted interviews in an attempt to map functioning from the real-life experience of global partnership functioning.

6.1 The Interaction Model of Partnership Functioning
The major findings of this case study have been organised into a model (Figure 6.1). The model represents the inputs, throughputs and outputs and the interaction between them, as identified through the present case study of the Global Programme for Health Promotion Effectiveness. Within the model specific interactions are numbered 1-20, these interactions represent the major findings of the present research and will be described in this section.
6.1.1 Partnership Inputs
Three types of inputs were identified from the data: partner resources, financial resources and the partnership problem. Partner resources refer to time and other operational kinds of support provided by individual partners and by organisational partners. Financial resources refer to funding that supports partnership functioning. The partnership problem is the uniting issue that brought the partners together to create the partnership.

Each of these inputs affects the functioning of the partnership. Partners contribute their time, commitment, personal connections, skills and work (#5). Partners impact functioning by recruiting resources themselves (#4 and #8) and by doing the work of the partnership. Financial resources provide support for travel, and production and external expertise (#6). Financial resources are often also accompanied by specific requirements and deliverables that also impact functioning by increasing accountability (#6). The partnership problem affects functioning directly by contributing unique challenges to the partnership’s work (#3). An example of this, from the GPHPE, could be methodological problems of measuring health promotion effectiveness. The problem affects partnership functioning indirectly by motivating the participation and commitment of the partners (#1). That is, the more urgent the problem, the more passionately partners will want to join the partnership and the more motivated they will be to do the ongoing work of the partnership. Similarly, urgent problems will have a better chance of attracting financial support (#2). The increased funding will, in turn, better support partnership functioning (#6).

There can also be direct interaction between partner resources and financial resources. Partners can help to mobilise financial resources for the partnership (#8) and finances can fund the participation of partners (#7).

6.1.2 Throughputs: Partnership Processes
The throughput portion of the partnership system refers to partnership processes. The inputs enter into these partnership processes and then outputs exit (see section 6.1.4). Two general categories of activity were identified within partnership processes: maintenance tasks and production tasks. Both activities take place within the partnership context. This context can either be reinforced with loops of positive interaction (#9) or can be diminished with loops of negative interaction (#10). This section will define the difference between maintenance and production tasks; and will then explore the critical elements of partnership functioning that contribute first positively and then negatively to the partnership context.

Task Type
Two types of partnership activities were distinguishable from the GPHPE case study data. This first type of activity relates to the ongoing maintenance of the partnership itself, maintenance tasks, and the second type, production tasks, refer to activity that produces results relating to the partnership problem. Both of these kinds of tasks take place within the partnership context and seem to be effected by positive and negative interaction within it.

The data of the case study suggest loops of interaction because positive and negative elements appear to reinforce one another and create positive and negative cycles within the partnership. Four categories of critical elements were identified as effecting these interactions: leadership, input interaction, roles and procedures, and communication.

Loops of Positive Interaction (#9)
Loops of positive interaction begin with positive leadership. There are certain
critical elements of leadership that foster positive interaction within the partnership. These elements include professional efficacy and good values that inspire confidence; the ability to focus partners on the task at hand; a desire to promote and embody openness, trust, autonomy and patience for working with diverse partners; skills for resolving conflict; and a certain degree of pragmatism. In these ways, the leadership can positively influence the processes within the partnership. However, the data also suggest that this relationship is not strictly one-way. Depending upon the inputs, the characteristics of the partners (#5), the financial resources (#6) and the problem uniting the partnership (#3), the style of leadership required may change.

Inputs also contribute to loops of positive interaction (#5 and #6). As previously mentioned, inputs to the partnership can have significant effect on its functioning. Partner resources, financial resources and the partnership problem can contribute positively influence to the partnership context by providing energy, expertise, material support and urgency. The data from this case also suggest that positive processes within the partnership can also feedback toward the inputs by acting to recruit new resources. For instance, in the GPHPE, a number of partners were motivated to join the partnership because of its global structure (#11).

Loops of positive interaction benefit from formalised roles and procedures. Roles and procedures give structure to the partnership context. This context can be enhanced by the positive influences of the environment, including the formalisation of individual roles; by goal setting; and by internal and external accountability. Again, the highly interactive nature of the partnership becomes clear here as well since determining structure, roles, goals and accountability are all dependent on the particular partnership inputs (#5 and #6).

For instance, some informants of the study explain that the structure of the GPHPE is uniquely designed for co-ordinating between its geographically diverse partners.

The last critical element identified from the case study data as contributing to loops of positive interaction was communication. Communication is the medium of exchange in partnership. Positive processes for communication include purposeful, frequent, and recognisable communication that facilitates exchange. According to the data, no mechanism for communication is more positive than face-to-face meetings. Face-to-face meetings allow for immediate, unfettered exchange that is conducive to the production of synergy. This immediate interaction also facilitates joint decision-making and goal-setting. Face-to-face meetings also allow new partners to interact with one another which enables them to build relationships and trust.

Leadership, inputs, roles, procedures and communication are some of the critical elements of that can positively contribute to the partnership context. The case data show that within the partnership system these positive elements constantly interact. As a result, the elements of the system feedback into one another, creating a loop of interaction (#9). Good leadership, structure and communication can further impact the partnership by attracting more input such as new partners (#11) and more funding (#12).

**Loops of Negative Interaction (#10)**

As described above, partnership elements interact to create the partnership context. These interactions tend to either reinforce or inhibit one another. As with loops of positive interaction, four categories of critical elements are central in negative interaction: leadership, input interaction, roles and procedures, and communication.
Just as leadership can create a positive partnership context through fostering trust, openness and other critical elements, leadership can impede functioning by allowing certain elements to fester. The data of this study reveal some elements of partnership that can have a negative effect if the leadership does not actively work to prevent them. These negative elements are distrust, unresolved conflict, unrecognised partner contributions and dominance. Distrust is a particularly destructive force as it erodes away at the foundation of the partnership. Distrust can inhibit the partnership’s ability to function by acting as a dividing force, fostering suspicion among partners and draining motivation to invest in the process. If these elements go unchecked, distrust can breed conflict, conflict can lead to the withdrawing of some partners and the domination of others, which can in turn cause contributions to go unrecognised. All of these elements undermine and inhibit participation (#11).

Inputs can negatively impact partnership functioning. Without financial resources (#6), the partnership is limited in the outcomes it is able to produce and also in the ways it is able to operate. For instance, without funding for travel, it will be difficult to ensure regular meetings of partners. A lack of resources can shift the burden of the partnership work entirely to the voluntary input base (#5). A negative aspect of relying solely on volunteers in a global partnership such as the GPHPE is that it can be difficult to enforce accountability. Over-reliance on volunteers may also contribute negatively to functioning if volunteers are unable to meet demands and feel guilt or shame as a result (#11).

Unlike loops of positive interaction, roles and procedures in loops of negative interaction tend to be unclear. Undefined roles can result from a lack of communication or from different conceptions of how the partnership should function. When roles are unclear, conflicts can arise between partners which can waste valuable face-to-face time.

Poor communication can negatively impact partnership functioning by leaving people overwhelmed, or left out and confused. Poor communication can exacerbate problems of accountability, and can reduce a partnership’s capacity for exchange and synergy. If mechanisms for communication are not in place, it can negatively affect the partners’ perceptions of the programme. Without transparency, trust suffers. Without knowledge of progress, partners can become discouraged (#5). With too much information, people may feel bad for not being able to keep up (#5). Inadequate communication may lead to missed opportunities for collaboration by not keeping the partnership in the forefront of people’s minds and by not creating forums for sharing.

Similar to loops of positive interaction, the elements within loops of negative interaction reinforce one another. Distrust, conflict, lack of recognition, partner dominance, lack of crucial funding, unclear roles and poor communication all inhibit partner exchange. If partners do not exchange, they can not produce synergy.

**Loops of interaction**

The data of the present case study suggest that positive loops of interaction and negative loops of interaction exist simultaneously within the GPHPE. No respondent interviewed described the interaction of the GPHPE as either all negative or all positive. The data also indicate that the perception of the balance between positive interaction and negative interaction was observed differently by different partners. Thus, partnership interaction appears to be experienced as a subjective reality.

**6.1.3 Output**
Three types of partnership output were identified in the case data of the GPHPE. These outputs were additive outcomes, synergistic outcomes and antagonistic outcomes.

Additive outcomes are outcomes that have not been affected by the interaction of the partnership. The mathematical description of this relationship would be $2 + 2 = 4$. The inputs bypass the throughput portion of the partnership and therefore the output remains unchanged (#13). The partners produce what they would have produced on their own. The absence of partnership interaction leaves the partnership also unchanged by these outcomes.

Synergy is the integration of inputs in interaction that produces outcomes that could not have been produced by those inputs in isolation. Mathematically this would be represented as $2 + 2 = 5$. Synergy is produced through the functioning of the partnership (#14). Examples of synergy provided from the case data suggest that positive interaction enhances the partnership’s ability to produce synergistic results. The data also suggest that the creation of synergy, or partnership success, feeds back into the partnership positively effecting functioning (#16) and thus enhancing the ability of the partnership to attract more partner input (#18) and financial resources (#19). Synergistic outcomes may also have the potential to affect the partnership problem (#20) although that was not observed in this case.

Antagonistic outcomes occur when the partnership interaction has a taxing effect. Antagonistic output is actually less than what the inputs would have produced without the partnership process. Mathematically antagonism would be expressed as $2 + 2 = 3$. That is, through the partnership process something was lost. For example, partnership processes which waste partner time or financial resources by definition produce antagonism. The data of the present case suggest that antagonistic output often appears to be no output at all. To represent this lack of contribution, antagonistic results are depicted outside of the environment (#15). While there may not be tangible results in the external environment, there is clear impact on the functioning of the partnership. Wasting time and money can negatively affect functioning (#17) by contributing to loops of negative interaction (#10) and by leading to withdrawal of partner (#18) and financial resources (#19).

6.2 Conclusions
Returning to the literature explored in section 2.0, the present study appears to contribute three unique discoveries. First, it found that certain elements of global partnerships are similar to the elements of community partnerships. Second, it recognises the role of the partnership problem in partnership functioning. Third, it demonstrates that complex interactions exist between elements of the partnership system.

Elements of Partnership
As noted in section 2.0, according to the literature on partnership the overall benefits are expected to be: increased ability to raise and distribute human and financial resources; better information exchange, increased power, credibility and recognition; decreased redundancy of effort; the joining of complementary skills and knowledge; and greater ability to work holistically and better possibilities for innovation (Japhet & Hulme, 2004; Dluhy, 1990; Scriven, 1998; Brinkerhoff, 2002d). On the other hand, partnership functioning has also been also described by some as messy (Mitchell & Shortell, 2000; L. Walker, Moodie, & Herrman, 2004; Wandersman, Goodman, & Butterfoss, 1997). Collective working arrangements have the potential draw resources, to become frustrated by time-consuming consensus-building processes. Partners
may have to compromise their positions or
credibility as a result of group decisions,
they can experience a loss of control, and
accountability can become blurred (Dluhy,
1990; Japhet & Hulme, 2004; Dowling et
al., 2004). The present case exhibits hints
of all of these observations. Positive
processes appear to lead to these benefits,
while negative processes may result in
negative outcomes. The data from this case
indicate that partnership is neither all
positive or all negative.

The literature on community partnerships
indicates certain elements that are
perceived to have significant impact on
partnership functioning. Wandersman et
al (1997) distinguish between maintenance
and production subsystems of partnership
functioning. Within these subsystems
critical elements are identified: leadership,
formalised rules, roles and procedures,
decision-making and problem resolution
processes, volunteer-staff relationships,
communication patterns, membership
commitment and mobilisation, target
activities and maintenance activities.

The Wandersman et al. work provided a
framework for evaluating the present case
so the data were examined with these
elements in mind. The data clearly pointed
to certain similarities in the impact of
leadership, roles and procedures, problem
resolution processes and communication
on the partnership. However, the original
arrangement of these elements did not
seem to fit the data of the present case. For
instance, the data from the GPHPE
indicated the creation of an overall
partnership context that was similar to the
Wandersman, et al maintenance
subsystem. Rather than envisioning those
processes to go on in a closed frame along
side production processes, the data
indicated that production took place within
this larger partnership context.

Lasker and Weiss (2003) also identify
some critical elements of the partnership
process. They describe the importance of
having diverse participants for whom
participation is feasible and promotes
exchange and the need to involve the
partners in ongoing ways including
planning and agenda setting. These
processes were also identified as
significant in the GPHPE.

Mitchell and Shortell (2000), as well as
Lasker and Weiss (2003), describe the vital
role of leadership in partnership
functioning. According to these authors,
leadership can promote participation
ensure broad-based influence and control,
facilitate positive group dynamics and
extend the scope of the partnership
process. These elements of leadership were
also found in the case study of the GPHPE.

The Partnership Problem
In reviewing the literature on partnership
for the present study, no model or concept
of partnership functioning acknowledged
any impact of the partnership problem on
functioning. The results of this study,
however, demonstrate that the partnership
problem had a tremendous effect on the
functioning of the GPHPE, especially in its
capacity to motivate inputs. The role of the
partnership problem was similar to the role
of the task or topic as presented in the
literature on invisible colleges (Zuccala,
2006).

The Interactive Partnership System
The Wandersman, Goodman and
Butterfoss (1997) model of “an open-
system framework” provided the point of
departure for the present study. According
to their model, there are two inputs of
partnership: member resources and
external resources. These two inputs move
through the two separate subsystems of
throughput for maintenance and
production. These processes then produce
output which is described as external goal
attainment. Two alternatives appear to
exist according to the model: if
throughputs are ineffective and/or if the
goals are not attained, the organisation will become inactive or conversely, if the throughputs are effective and goals are attained the products of the partnership go out into the larger environment. This also provides the inputs and so the model loops around in this general circuit (see figure 2.1).

Unlike the Wandersman, et al model, the results of the present study indicate complex relationships between all these elements of the partnership system. As indicated in the Interaction Model of Partnership Functioning (see figure 6.1), inputs not only affect functioning but are affected by the throughput and output as well, throughput is not only affected by input but also output, and the environment affects every stage. Thus, the partnership system is placed within the context of the larger environment, similar to Broesskamp-Stone’s inter-organisational networks framework.

As noted earlier, the data of this study suggest that throughput processes take place within a partnership context. Interaction also takes place at this level. Indeed, the data indicate that the partnership context is shaped by loops of positive and negative interaction. These loops resemble the feedback loops of systems science described by Richardson (1991). More specific research would be needed to identify the mathematical expression of these interactions in the GPHPE. However, certain characteristics of “verbal pictures” do emerge from the data. For instance, “vicious cycles” of distrust, conflict, withdrawal of partners and dominance of others was observed. Positive loops or “self-fulfilling prophecies” were also demonstrated in the data.

The recognition of this interaction between elements may help people planning and engaging in partnerships maximise functioning by enhancing positive elements of interaction and minimising negative elements. The knowledge that it is not only dynamics within the partnership context that impact functioning but also the resulting outcomes and the inputs themselves, may be important for partnership planning.

6.3 Methodological Considerations
The present study as the product of qualitative inquiry. As with all methods of scientific inquiry, certain threats exist to the validity and integrity of the results. While precautions are taken to avoid these threats, reporting must include complete transparencies on these matters.

Validity can be challenged when a researcher fails to deal with contrary cases and deviations or when “anecdotal” information perceived to be presented in the research findings (Silverman, 2003b). The present study made every effort to confirm results with multiple data sources in an attempt to triangulate and confirm the study findings Document data was compared to interview data and data from individual informants were checked against each other. Discrepant information was disclosed in the reporting of results in an effort to demonstrate that no data was left out of the analysis. Both of these methods were employed to improve the validity of this research (Creswell, 2003). Triangulation can also strengthen reliability (Creswell, 2003).

The role of the researcher is also significant in qualitative research as the researcher is the main instrument of analysis. Therefore, it is important to be explicit about existing bias that may influence the research (Crewell, 2003). The principle researcher was appointed as a research assistant for the IUHPE, the coordinating body of the GPHPE, for the purpose of conducting this work. Although the principle researcher had no prior knowledge of the partners of the GPHPE, during the course of the research
professional connections were made. Although every effort was made to remain objective, it is possible these relationships may have inadvertently biased the analysis. Additionally, the principle researcher was aware that the contents of the present research would likely be included as a chapter in a publication of the GPHPE. It is possible this knowledge may have also impacted the findings.

Another complicating relationship is that the supervisory researcher participated in the GPHPE and was implicated in documents in a way that made it essential he be interviewed as part of the research. It is possible his knowledge of the study’s theoretical framework may have informed his interview data and consequently skewed the results.

Lastly, the principle researcher had no prior experience using case study research methodology and it is likely the study findings suffer as a result of this inexperience.

6.4 Implications
The present study provides new insight into the functioning of global partnerships for health promotion. The findings of this research may enable health promoters to improve the functioning of present and future partnerships. There are, however, questions that could not be answered in the present study that would greatly enhance these findings. Four areas stand out as being particularly pertinent to further explore: the role of the partnership problem, the effect of the partnership context on maintenance versus production tasks, the impact of partnership output on the partnership problem and the impact of more resources on functioning.

The data from the present study indicate the central role the partnership problem plays within the partnership. The urgency of the problem can motivate inputs as well as motivating positive process internally within the partnership. More research is needed to examine these relationships. What attributes of the problem create urgency? Does it depend on the partners? Are there some problems which are more conducive to partnership working than others? All of these questions are worthy of further exploration.

The model devised from the data of the present research depicts maintenance and production activities as taking place within a partnership context. The research questions were not aimed to distinguish between how critical elements differ in their ability to affect maintenance versus production activity. It is possible that different elements support these activities to varying degrees. More information is required to understand what may prove to be a complex inter-partnership relationship.

More research is also needed to be further explore the influence of outcomes on partnership functioning and inputs. While this research points to some relationships, the GPHPE was really too new to have produced outcomes which could vigorously demonstrate these relationships. Perhaps most importantly, research needs to be conducted to measure the impact output has on the partnership problem. This issue relates directly to the motivating rationale of working in partnership and should therefore be a future research priority.

Finally, the present study indicates some clear interaction between partner input and financial input. The GPHPE was strongly supported by partner resources but under-funded. Another case study exploring a partnership, or multiple partnerships, which have a different balance between these inputs may reveal important information about how to plan and implement partnerships. While some of the evidence from the present case suggests
that more financial resources can improve functioning, there was also compelling evidence indicating that funding can complicate functioning and may lead to a loss of autonomy. More research is needed to examine the balance of inputs.

The present study reveals some new insights into partnership functioning, however, more research is clearly needed.

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APPENDIX 1

General Interview Guide

Input
1. Can you tell me briefly about the history of your participation in the GPHPE?
2. Do you remember what motivated you to become involved with the GPHPE?
3. Could you describe in as much detail as possible the ways you have been involved in the GPHPE?
   • What kinds of resources have you (has your organization) contributed to the GPHPE?
   • Have you engaged in specific activities?
   • How much time do you (does your organization) devote to the GPHPE?
4. How does the level of participation vary between the partners within the GPHPE?

Processes
5. Since we are studying how the partnership interacts on a global level, we are interested in your general impressions of the overall program and other regions as well.
   • Can you tell me about your overall impression of the GPHPE?
   • Of the African region?
   • Of Europe?
   • Of Latin America?
   • Of North America?
   • Of North West Pacific?
   • Of South East Asia?
   • Of South West Asia?
6. What do you think are the GPHPE’s greatest accomplishments?
7. Do you remember an occasion when you were particularly impressed with the functioning of the GPHPE?
8. Do you remember an occasion when you were particularly disappointed with the functioning of the GPHPE?
9. You were involved in ______. From the documents I see that ________. Is that correct? Can you tell me about your experience working on this task?
   • In regard to this task, do you think the nature of the task itself had any impact on the functioning of the partnership?
10. Would you say that GPHPE integrates the input of its members to produce unique results (that could not have been accomplished otherwise)? Can you give me an example?
11. What do you think propels the functioning of the group?
12. Can you tell me about ways of working that support this process?
13. Can you tell me about ways of working that inhibit this process?
14. Does the task the group is working on have any effect on its functioning?
15. Can you tell me about how the environment of the partnership impacts its functioning?
16. Can you tell me about how the partners impact functioning?
17. What is important for creating/maintaining a successful partnership?