

Measurement Approaches to Partnership Success (MAPS)
QUESTIONNAIRE AND FACILITATION GUIDE

2023

Table of Contents

Development of the Measurement Approaches to Partnership Success (MAPS) Questionnaire 3

Description of the MAPS Questionnaire: Conceptual Framework and Key Components 3

Purpose and Description of the MAPS Facilitation Guide 6

Using the MAPS Questionnaire: Data Collection and Analysis 6

Considerations for Sharing and Reflecting on MAPS Data Results Using the MAPS Facilitation Guide 7

 Facilitation Tip 1: Open ended questions 7

 Facilitation Tip 2: Consider the Size..... 8

 Facilitation Tip 3: Reflective Questions 8

Dimensions, Definitions, Sample Display of Results, Questionnaire Items, and Reflective Questions ... 8

MAPS Questionnaire: Precursor Characteristics Related to Partnership Outcomes and Success 10

 Reflective Questions for Precursor Characteristics Related to Partnership Outcomes and Success. 11

MAPS Questionnaire Dimension A: Equity in the Partnership..... 12

 Reflective Questions for Equity in the Partnership 13

MAPS Questionnaire Dimension B: Reciprocity 14

 Reflective Questions for Reciprocity 14

MAPS Questionnaire Dimension C: Competence Enhancement 15

 Reflective Questions for Competence Enhancement 15

MAPS Questionnaire Dimension D: Partnership Synergy 16

 Reflective Questions for Partnership Synergy 16

MAPS Questionnaire Dimension E: Sustainability 17

 Reflective Questions for Sustainability 18

MAPS Questionnaire Dimension F: Realization of Benefits Over Time 19

 Reflective Questions for Realization of Benefits Over Time 19

MAPS Questionnaire Dimension G: Achievement of Long-Term Partnership Goals/Outcomes 20

 Reflective Questions for Achievement of Long-Term Partnership Goals/Outcomes 21

Additional General Reflection Questions for Partnership Consideration 21

Questions Related to Next Steps and Future Strategies 22

Concluding Comments 23

References 24

Acknowledgements..... 26

MAPS Contributors 27

 MAPS Research Team 27

MAPS Community and Academic Expert Panel29

Appendix A: MAPS Questionnaire..... **Error! Bookmark not defined.**

Development of the Measurement Approaches to Partnership Success (MAPS) Questionnaire

Community-based participatory research (CBPR) has received growing support and recognition as an effective way to examine and address social determinants of health that lead to health inequities.¹⁻⁹ The use of CBPR involves partnerships between community members and academic researchers that build on existing community strengths and resources and embrace principles of equitable engagement, co-learning, power sharing, and capacity building. CBPR partnership work often focuses on increasing understanding of shared issues of concern between partners and translating research findings into interventions and policy change.⁶

There are numerous conceptual frameworks to understand and evaluate how CBPR partnerships function^{4,5,10-16} along with measures designed to assess key dimensions of these conceptual models.^{14,16-20} With few exceptions,²⁰ however, most measures are not adequately tested and validated.¹⁷⁻²¹ In addition, most measurement development has focused on newly forming CBPR partnerships with much less emphasis on defining and measuring *success* in *long-standing* CBPR partnerships and their ability to achieve outcomes. To address this gap in the literature, we conducted the Measurement Approaches to Partnership Success (MAPS) study, a six-year, multi-phased CBPR project aimed at developing and validating a questionnaire in long-standing CBPR partnerships.

Description of the MAPS Questionnaire: Conceptual Framework and Key Components

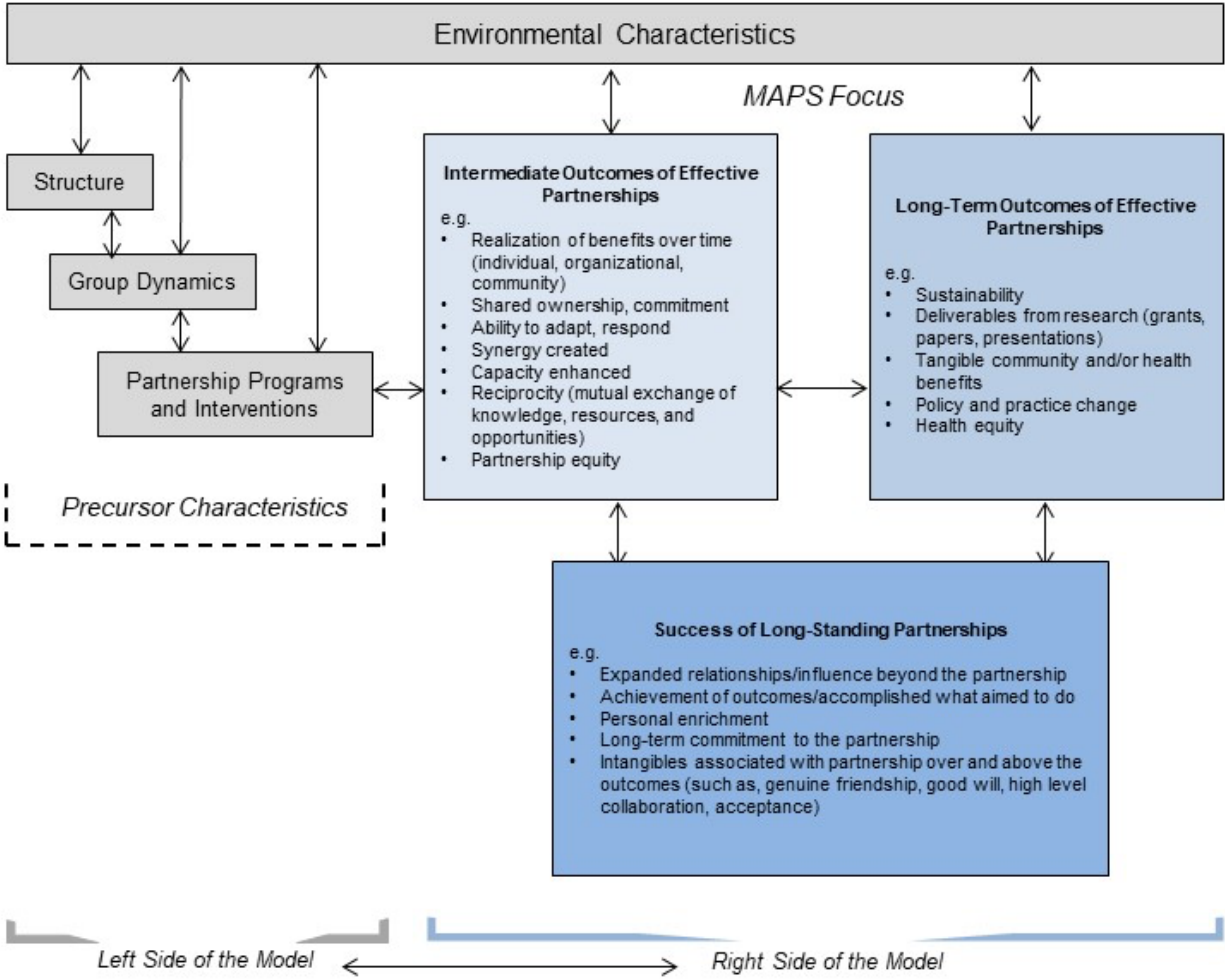
The objectives of the MAPS study, a project of the Detroit Community-Academic Urban Research Center (see Acknowledgements), were to: 1.) clearly define dimensions and indicators of success in longstanding CBPR partnerships in existence 6 years or longer; 2.) develop items for and validate a questionnaire to measure these dimensions and indicators; and, 3.) disseminate the questionnaire for use in evaluating CBPR partnership success.²²

The MAPS study was guided by the conceptual framework presented in Figure 1 below, and includes elements associated with intermediate outcomes, long-term outcomes, and success of CBPR partnerships. Intermediate outcomes of effective CBPR partnerships, shown in the center box, include,

for example, benefits of participation, synergy, and reciprocity. Intermediate outcomes, in turn, influence long-term outcomes of effective partnerships, such as sustainability and health equity. The MAPS framework extends the earlier model to further define and understand dimensions that contribute to success of long-standing CBPR partnerships that include but may go above and beyond intermediate and long-term outcomes.²²

The validated MAPS Questionnaire includes 81 questions that measure seven key dimensions, associated with elements on the right side of the model. Described more thoroughly below, these are associated with intermediate and long-term outcomes and success of CBPR partnerships. In addition, several of the partnership characteristics and dynamics on the left side of the model that have been studied and measured extensively (e.g., trust, power, communications)^{5,13} are assessed with an abbreviated set of 28 items that were included in the MAPS Questionnaire. Although the dimensions on the left side of the model were not the focus of the MAPS validation study, we include them as part of the complete MAPS Questionnaire and Facilitation guide given their value in examining precursor characteristics that contribute to partnership outcomes and success.

Figure 1: MAPS Conceptual Framework for Understanding and Assessing Success in Long-Standing Community-Based Participatory Research Partnerships



Adapted from original model by Israel, Lantz, and Schulz^{14, 16, 22}, drawing upon the work of Lasker & Weiss¹², Sofaer¹⁵, and Wallerstein and colleagues¹³.

Purpose and Description of the MAPS Facilitation Guide

The purpose of the MAPS Facilitation Guide is to help partnerships share and interpret the results of the MAPS Questionnaire, to identify areas of strength and areas for improvement from evaluation findings, and to apply findings and promote dialogue to enhance partnership success and sustain authentic partnerships aimed at addressing health inequities. The Guide is organized by the seven dimensions of the MAPS Questionnaire: Equity in the Partnership; Reciprocity; Competence Enhancement; Partnership Synergy; Sustainability; Realization of Benefits Over Time; and Achievement of Long-Term Partnership Goals/Outcomes. The Guide includes definitions of each of the seven dimensions, a list of the individual questionnaire items for that dimension, an example of how to present summary means for each dimension, and guidelines, questions, and examples of how to discuss, interpret, and apply results within partnerships using a participatory process.

Using the MAPS Questionnaire: Data Collection and Analysis

The MAPS Questionnaire is self-administered and is available in a Word version and as a fillable PDF. For each item in the MAPS Questionnaire, respondents are asked to select one answer along a five-point scale that asks them to “agree”, “somewhat agree”, “neither agree nor disagree”, “somewhat disagree”, or “disagree” with the statement.

Ideally, as was the case for the validation study of the MAPS Questionnaire, all partners within a CBPR partnership should complete the MAPS Questionnaire to provide a more comprehensive assessment. Data should be de-identified to protect the anonymity of the participants. Because of the length of the MAPS Questionnaire and time needed to complete it (average time 35-40 minutes), partnerships may choose to allot time during a partnership meeting for completion of the entire questionnaire or complete parts of it. Given that each of the seven MAPS dimensions was validated separately, partnerships can use the entire MAPS Questionnaire or assess each of the MAPS dimensions on its own, as long as all items within each of the dimensions are included. For example, the entire questionnaire might be administered for a comprehensive assessment of the partnership on

an annual basis or at longer intervals (e.g., every other year), while more frequently evaluating specific dimensions that may require additional attention.

The MAPS Questionnaire is designed to provide a mean value on the items of a dimension (e.g., partnership synergy, reciprocity, realization of benefits over time), or the summative mean of all seven dimensions. Partnerships can record and summarize the responses and there is no specific software needed for tallying results. Examples are provided below.

Considerations for Sharing and Reflecting on MAPS Data Results Using the MAPS Facilitation Guide

How partnerships share, interpret, and use the MAPS Questionnaire findings using the MAPS Facilitation Guide depends on what works best among the partners involved. There is not one “right” way to feedback, interpret, and apply data from the MAPS Questionnaire. Engaging in a collaborative process that fosters equitable participation of all partners, however, is key. Here are a few things partnerships might want to consider as they plan their process for feeding back, interpreting, and applying findings.

Facilitation Tip 1: Open ended questions

Posing open-ended questions can facilitate reflection and generate group dialogue. Starting with big picture and initial reactions when presenting the data invites

conversation rather than imposing interpretation. General questions include:

- What is your initial reaction to the results?
- What jumps out to you when you look at the results?
- What, if anything, in the results surprise you?
- What would you like to further explore?

Grounding the conversation in partnership strengths, principles, and common goals

Grounding the MAPS discussion in a partnership’s strengths, values, guiding principles, and norms for working together creates an opportunity to build on their own “story” and what they value as a partnership. Reaffirming a partnership’s commitment to common goals also provides a foundation for reflection and action.

Facilitation Tip 2: Consider the Size

The size of the partnership is also an important consideration for data feedback and participatory processes. For larger partnerships, providing multiple group processes, for example, involving individuals, pairs, and small groups, may help foster everyone's participation. In smaller partnerships (six or fewer), it can be difficult to ensure anonymity of the data in the report, even though responses are unidentified. Thus, small partnerships may need to be especially attentive to group processes that allow and respect individual viewpoints while fostering safe, open, and transparent communication.

Facilitation Tip 3: Reflective Questions

More specific reflective questions for each dimension, included below, are provided for partnerships to consider in facilitating discussion of the results within their partnership. Given the time needed to fully reflect on and address the findings, these discussions may need to occur over several meetings. Ideally, in accordance with CBPR principles, the presentation and discussion of findings and action strategies will be co-facilitated by community and academic members of the partnership.

A partnership may choose to establish an evaluation subcommittee or working group, that includes community and academic partners and meets in between meetings of the larger group/decision-making body. This subcommittee or working group could be responsible, for example, for deciding how to present the results, which questions to ask for engaging the partnership in reflecting on and interpreting the findings, how to prioritize action steps based on the results, and who co-facilitates those discussions.

Dimensions, Definitions, Sample Display of Results, Questionnaire Items, and Reflective Questions

Each of the MAPS Questionnaire seven dimensions and their items are listed below. As mentioned above, 28 items were also included to assess the left-hand side of the conceptual framework (e.g., trust, communications) but were not validated as part of this study (these items 1-28 are also included in the overall MAPS Questionnaire in Appendix A). As partnerships may find these

items useful in evaluating the relationship of partnership structure (item 3), group dynamics (items 2 and 4-9), and partnership programs and interventions (items 10-11) to items of success across Dimensions 1-7, we address them below and provide reflective questions for discussion.

MAPS Questionnaire: Precursor Characteristics Related to Partnership Outcomes and Success

The following 28 questions provide information about the three key dimensions of your partnership's structure, group dynamics, and programs and interventions that are known to be associated with partnership success, also referred to as precursor characteristics. The items are further divided into 12 key areas that may be useful in determining their relationship to the validated success outcomes of the MAPS Questionnaire: shared vision/principles/goals (items 1-4); trust (items 5-7); partnership infrastructure (items 8-9); role of leaders (items 10-11); shared leadership (items 12-13); leadership (item 14); shared power (items 15-17); conflict (items 18-20); individual partner characteristics (items 21-22); role of the partners and partnerships in the community (items 23-24); community knowledge (items 25-26); and, partnership evaluation (items 27-28).

Individual Process Items

(numbering below corresponds to items on the Questionnaire)

1. Partners share a clear understanding of the issues the partnership is trying to address.
2. Partners agree on the goals and objectives of the partnership.
3. Partners are committed to the partnership's priorities.
4. The partnership follows an agreed upon set of CBPR principles.
5. Partners can rely on the people that they work with in the partnership.
6. Partners have confidence in one another.
7. Partners trust one another.
8. There is a structure in place for making decisions (for example, operating procedures, by-laws).
9. An infrastructure is in place to support the partnership (for example, paid or unpaid staff).
10. Leaders of the partnership take responsibility for moving the partnership forward.
11. The leadership encourages active participation of both community and academic partners.
12. The partnership facilitates active participation of both academic and community partners in leadership roles.
13. Leadership is shared between community and academic partners.
14. The partnership has a process for ensuring ongoing leadership.
15. Partners equitably influence the work of the partnership. MAPS Questionnaire
16. Community partners are involved throughout the research process.
17. The partnership takes time to reflect on issues of power and privilege within the partnership.
18. The partnership recognizes that conflicts occur from time-to-time.
19. The partnership works together to address conflicts when they occur.
20. Partners see conflicts as opportunities to address issues within the partnership.
21. Partners demonstrate humility when working together.
22. Partners are passionate about their work together.
23. Partners create connections between the partnership and the community.
24. There is a history of positive collaboration among members of the partnership.
25. The partnership values the community's knowledge (for example, community skills and expertise).
26. Community knowledge is integrated throughout the partnership's work.
27. The partnership evaluates its collaborative processes.
28. The partnership applies evaluation results to improve the partnership.

Reflective Questions for Precursor Characteristics Related to Partnership Outcomes and Success

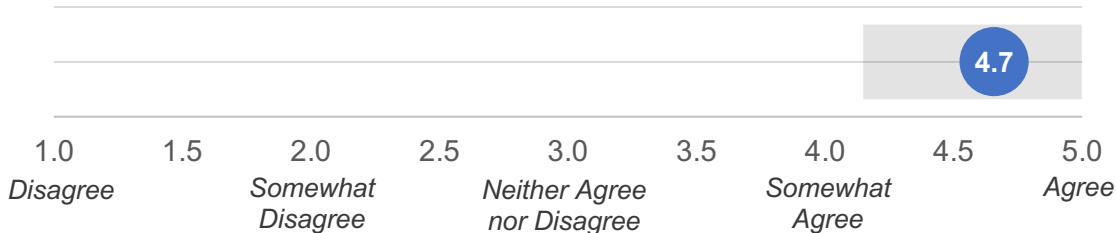
- To what extent do the partners in our partnership share a common vision for how and why our partnership does its work?
- How does our partnership's structure (infrastructure) support our work?
- What strengths and weaknesses currently exist related to our partnership's group dynamics (trust, overall leadership, shared leadership and power, interaction style, and conflict resolution)?
- To what extent do we value and integrate community knowledge in our current programs and interventions in the community?
- How can we continue to evaluate our partnership to improve our structure, group dynamics, and programs and interventions?

MAPS Questionnaire Dimension A: Equity in the Partnership

Definition: An environment has been created that:

- (a) *enhances open, equitable, collaborative, and authentic relationships (i.e., relational equity) and;*
- (b) *sharing of power and resources within the partnership (i.e., structural equity)*

Example summary statistics for the **Equity in the Partnership** section of the MAPS Questionnaire are displayed below. Participants mean (average) response is shown in the blue circle and the range of responses from the partners in the partnership is shaded in gray.



Individual Equity Items

(numbering below corresponds to items on the Questionnaire)

- 29. Mutual respect exists in the partnership.
- 30. Overall, there is a high level of trust between partners.
- 31. Partners have authentic relationships with partners whose backgrounds and perspectives are different from their own.
- 32. Partners get to know and care about each other.
- 33. There is genuine goodwill among members of the partnership (for example, members are welcoming and open).
- 34. Friendships have been established between community and academic partners.
- 35. Overall, partners still like each other after a long time in the partnership.
- 36. Community partners are equitably engaged in decision-making processes.
- 37. The partnership incorporates each partner's knowledge and expertise.
- 38. Community partners take leadership in developing research agendas.
- 39. Partnership decisions are made through a consensus decision-making process.
- 40. The partnership enables partners to be transparent about their own institutional/organizational obligations.
- 41. Partners are willing to negotiate on important decisions.
- 42. Partners are comfortable speaking up even when they disagree.
- 43. Partners have a feeling of ownership in the partnership.
- 44. In general, partners are proud of the work of the partnership.
- 45. All partners are treated fairly.
- 46. Community and academic partners have equitable power within decision-making processes.
- 47. Community partners have control over decisions on how resources (for example, funding, personnel) are distributed within the partnership.
- 48. The partnership strives to compensate partners equitably for their contributions.
- 49. To the extent feasible, academic partners make institutional resources available to community partner organizations.
- 50. To the extent feasible, community partners make resources available to academic institutions.
- 51. The distribution of resources within the partnership is fair.

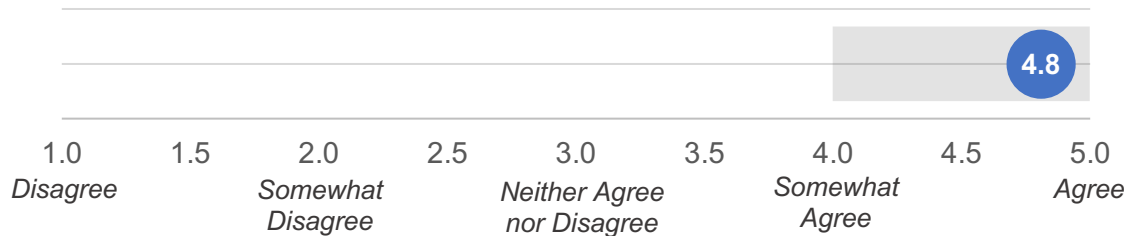
Reflective Questions for Equity in the Partnership

- What will allow our partners to honestly express their own perspectives and hear those of others?
- What are our current strengths and weaknesses related to creating open, collaborative, and authentic relationships within our partnership?
- What strengths and weaknesses currently exist within our partnership related to developing equitable relationships?
- What, if any, capacities have we developed that create an atmosphere of shared power and resources in our partnership?
- To what extent does our partnership share power and resources?

MAPS Questionnaire Dimension B: Reciprocity

Definition: The mutual exchange of knowledge, resources, and opportunities between partners over time.

Example summary statistics for the **Reciprocity** section of the MAPS Questionnaire are displayed below. Participants mean (average) response is shown in the blue circle and the range of responses from the partners in the partnership is shaded in gray.



Individual Reciprocity Items

(numbering below corresponds to items on the Questionnaire)

52. Partners are a resource for each other.
53. Partners incorporate the ideas, skills, and abilities of one another.
54. Partners recognize each other's expertise.
55. The exchange of expertise among partners may vary at different points in time in the partnership.
56. Over time, all partners exchange their expertise within the partnership.
57. Partners support each other outside of partnership activities (for example, attend events, celebrate partners' achievements, provide letters of support).

Reflective Questions for Reciprocity

- How do we recognize and incorporate the knowledge and expertise of all partners?
- To what extent do partners feel their knowledge and expertise is recognized and incorporated within our partnership?
- To what extent do partners provide new opportunities for each other?
- In what ways, if any, does membership in our partnership expand access to resources?
- How can we make the most of our mutual strengths to support each other?

MAPS Questionnaire Dimension C: Competence Enhancement

Definition: The partnership enhances partners' competence (e.g., skills, knowledge, expertise) to leverage resources, share power, and combine diverse perspectives in order to conduct CBPR and make changes in the community.

Example summary statistics for the **Competence Enhancement** section of the MAPS Questionnaire are displayed below. Participants mean (average) response is shown in the blue circle and the range of responses from the partners in the partnership is shaded in gray.



Individual Competence Enhancement Items

(numbering below corresponds to items on the Questionnaire)

58. The partnership provides the opportunity for all partners to enhance their knowledge and skills.
59. The partnership enhances the skills of community partners to conduct CBPR.
60. The partnership enhances the skills of academic partners to conduct CBPR.
61. Partners gain knowledge and skills that are transferable outside the partnership.
62. Membership in the partnership enhances partners' credibility.
63. Being a member of the partnership enhances partners' ability to leverage resources from each other's organizations.
64. The partnership enhances partners' ability to advocate for change in the community.
65. The partnership enhances partners' ability to advocate for change in academic institutions.
66. Community partners engage in dissemination of the partnership's work to academic audiences (for example, in peer-reviewed publications and presentations).
67. Academic partners engage in dissemination of the partnership's work to non-academic audiences (for example, policy briefs, community meetings).
68. Community partners have enhanced capacity to protect the community from potential research exploitation.

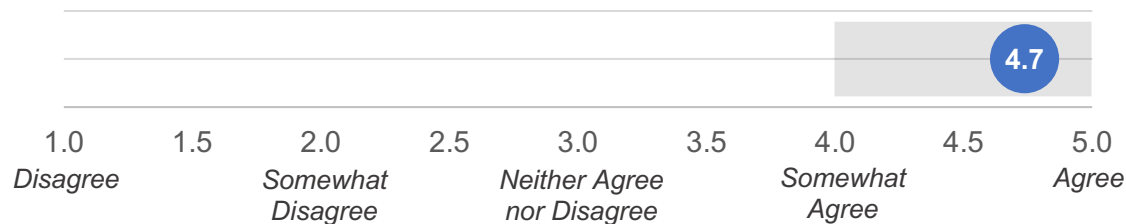
Reflective Questions for Competence Enhancement

- In what ways does our partnership work toward enhancing partners' skills, knowledge, and expertise to conduct CBPR?
- To what extent has our partnership enhanced the competence of partners within the partnership?
- To what extent is our partnership equipped to leverage resources and share power to make changes in the community?
- How does our partnership combine the diverse perspectives of the partners?

MAPS Questionnaire Dimension D: Partnership Synergy

Definition: Community and academic partners accomplish more together than could be accomplished alone to make changes identified by the partnership.

Example summary statistics for the **Partnership Synergy** section of the MAPS Questionnaire are displayed below. Participants mean (average) response is shown in the blue circle and the range of responses from the partners in the partnership is shaded in gray.



Individual Partnership Synergy Items

(numbering below corresponds to items on the Questionnaire)

69. Working together, the partnership accomplishes more than partners could accomplish separately.
70. By working together, partners develop innovative ways to address issues identified by the partnership.
71. The partnership combines diverse perspectives (for instance, diverse ideas, knowledge, and cultures) to make changes identified by the partnership.
72. The partnership influences the way partners think about and do their work.
73. Partners have experienced a change in perspective by engaging with each other's ideas.
74. The partnership integrates partners' capacities such that "we're better together than alone."
75. The partnership has relationships with other partnerships which enables them to enhance and extend each other's work.

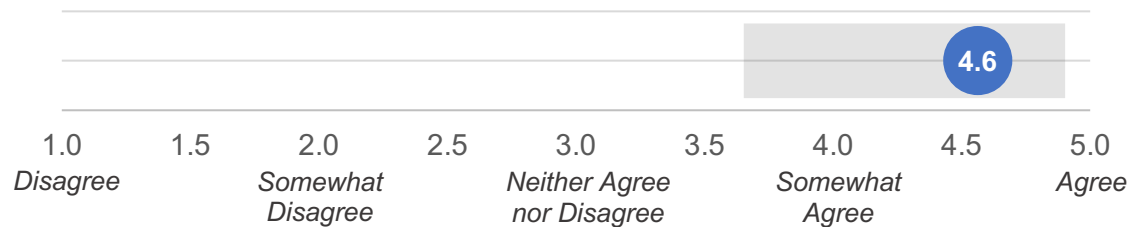
Reflective Questions for Partnership Synergy

- In what ways, if any, has our partnership shifted from a focus on individual needs to the needs of the group as a whole?
- How is the work of our partnership as a whole strengthened by partners thinking and working together collectively?
- To what extent do the partners in our partnership feel they are contributing to the accomplishments of the partnership?
- In what ways, if any, do the community and academic partners accomplish more working together than could be accomplished alone?
- Do the accomplishments of our partnership reflect collective goals?

MAPS Questionnaire Dimension E: Sustainability

Definition: The ability of the partnership to maintain its activities, relationships, and impact -- which may encompass any or all of the following: the partnership continues beyond the initial funding period, relationships built among the partners continue over time, the work of the partnership endures, capacity is built among the partners, and/or capacity is built in the community to bring about change.

Example summary statistics for the **Sustainability** section of the MAPS Questionnaire are displayed below. Participants mean (average) response is shown in the blue circle and the range of responses from the partners in the partnership is shaded in gray.



Individual Sustainability Items

(numbering below corresponds to items on the Questionnaire)

76. The partnership has continued beyond the initial project.
77. The partnership has persisted over the long haul, with or without funding.
78. The partners have stayed engaged in the partnership over time.
79. The partnership adapts to changing conditions (for example, fewer funds, changing political climate, change in partnership members).
80. An infrastructure is in place to sustain the partnership (for example, paid or unpaid staff).
81. The partnership has a structure in place for addressing changes in leadership over time.
82. External relationships have been established (for example, with funders, decision makers) that help the partnership endure.
83. Partners are committed to pursuing ongoing funding opportunities for the partnership.
84. Partners want to continue working together over time.
85. Relationships between partners continue over time.
86. The partnership has leveraged funding to extend the work of the partnership.
87. New projects have been developed among some members of the partnership.
88. Relationships are created with additional partners to develop projects beyond the initial partnership.
89. The partnership's work in the community persists over time.
90. Partners have the capacity to sustain the partnership's work outside the partnership.
91. The partnership has achieved visibility in the community.

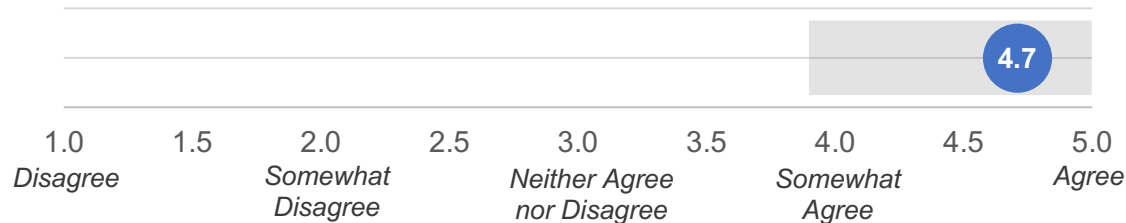
Reflective Questions for Sustainability

- To what extent do we consider ways to develop and sustain relationships among the partners including orienting new partners and recognizing departing partners?
- To what extent and in what ways would the partnership continue if funding were no longer available?
- How, if at all, would members of the partnership continue to work together even if the initial partnership ended?
- To what extent, if at all, have partners enhanced their capacity in ways that will enable them to continue to engage in CBPR efforts even if the initial partnership ended?
- How do we handle unanticipated changes (e.g., transitions in group membership, loss of funding) that might threaten the work of our partnership?

MAPS Questionnaire Dimension F: Realization of Benefits Over Time

Definition: Upfront investment in the CBPR partnership is beneficial to partners over time.

Example summary statistics for the **Realization of Benefits Over Time** section of the MAPS Questionnaire are displayed below. Participants mean (average) response is shown in the blue circle and the range of responses from the partners in the partnership is shaded in gray.



Individual Realization of Benefits Over Time Items

(numbering below corresponds to items on the Questionnaire)

92. Benefits to community partners have increased over time (for example, funding opportunities, increased skills).
93. Benefits to academic partners have increased over time (for example, funding opportunities, increased skills).
94. Over time, the benefits of conducting CBPR in the partnership outweigh the costs.
95. Partners take on costs of participation at times because they value the partnership.
96. Investment in the partnership is worth it because it pays off down the road.
97. Partners take into consideration each other's pressures outside the partnership (for example, organizational funding, job promotion).
98. At times partners are willing to go along with decisions they don't totally agree with because they trust it will work out in the long run.
99. Partners have become more knowledgeable and better able to work together to create community impact.

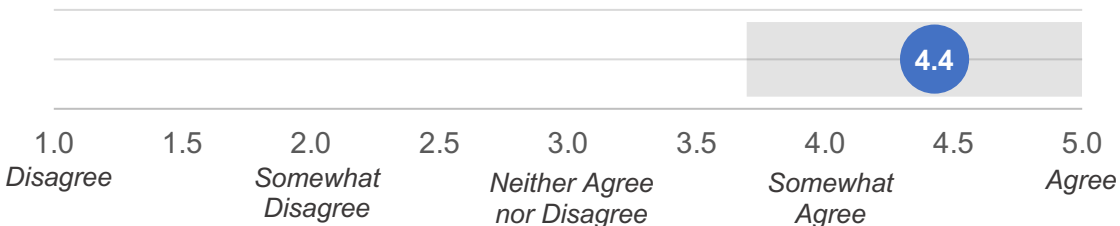
Reflective Questions for Realization of Benefits Over Time

- To what extent, do partners feel the time and effort they expend in the work of the partnership is worth it?
- In what ways do partners feel their needs are recognized by our partnership?
- In what ways have the benefits of participation in our partnership developed/changed over time?
- To what extent, if at all, have the benefits of participation increased over time?
- To what extent has the partnership created a shared vision that benefits all partners?
- How have partners invested in the partnership and in each other in ways that go beyond the work of the partnership?

MAPS Questionnaire Dimension G: Achievement of Long-Term Partnership Goals/Outcomes

Definition: The ability of the partnership to conduct and utilize research generated within the partnership to meet its own goals and objectives at various times, including the ultimate aim of health equity in the community at-large.

Example summary statistics for the **Achievement of Long-Term Partnership Goals/Outcomes** section of the MAPS Questionnaire are displayed below. Participants mean (average) response is shown in the blue circle and the range of responses from the partners in the partnership is shaded in gray.



Individual Achievement of Long-Term Partnership Goals/Outcomes Items

(numbering below corresponds to items on the Questionnaire)

100. The work of the partnership has created shared power among the partners.
101. The broader community's knowledge and expertise is incorporated into the partnership's decision making.
102. The partnership achieves research goals that it sets out to accomplish.
103. The partnership has used research findings to change policy.
104. The partnership's research advances the goals and objectives of both community and academic partners.
105. Community partners use the partnership's research findings to meet aims of their own organization.
106. The work of the partnership results in changes in community residents (for example, in knowledge, attitudes, behaviors).
107. The work of the partnership results in improved health in the community.
108. The work of the partnership positively influences outcomes related to the conditions in the community that affect health and health risks (in other words, social determinants of health).
109. The work of the partnership advances opportunities for everyone in the community to achieve their highest level of health (in other words, health equity).

Note: *If your partnership is interested in assessing power dynamics separately from health outcomes, we found through conducting additional statistical analyses in our study, that items 100 and 101 capture power sharing, items 102-105 reflect how research is utilized in the partnership, and items 106-109 reflect changes in the community that have occurred because of the work of the partnership.*

Reflective Questions for Achievement of Long-Term Partnership Goals/Outcomes

- In what ways have we achieved long-term outcomes?
- What relationships/strategies have contributed to our success?
- In what ways, if any, has our partnership generated/utilized research to meet partnership goals?
- In what ways, if any, has our partnership generated/utilized research to achieve health equity goals in our community?
- What have we learned from our work together?

Additional General Reflection Questions for Partnership Consideration

Based on discussion of a partnership's data using the MAPS Facilitation Guide, the following additional questions may help partnerships collectively identify past and current priority areas the partnership wants to strengthen or sustain in the future, within or across dimensions.

- What does [success] look like in our partnership?
- What are our greatest strengths?
- What are our greatest challenges?
- Are we seeing the changes in the community we want?
- What might we do differently?
- What have we learned here that might be valuable in the future?
- What critical events occurred in our partnership this past year?
- What capacities have we developed that create an atmosphere of shared power and resources in our partnership?
- What already exists today (think in terms of successes, relationships, capacity, resources) that we could build on to create the future we want for our community?

Questions Related to Next Steps and Future Strategies

- What improvements can we make in how the partnership operates?
- What are ways we might support enhancement of partner competence in the partnership?
- Are there new areas we should consider that will improve partner competence?
- What will we do to further create an open, equitable, collaborative, and authentic environment in our partnership?
- What further skills are needed to equip partners to leverage resources, share power, and combine diverse perspectives?
- How can we continue to strengthen our capacity to create synergy in our partnership?
- How can we overcome some of the challenges that might negatively impact our partnership's sustainability?
- What kinds of outcomes do we want for our partnership work moving forward?
- What advice would we give to others who are pursuing similar goals?

Concluding Comments

As noted earlier, the purpose of this document is to: 1) describe the conceptual framework that has guided the development of the Measurement Approaches to Partnership Success Questionnaire; 2) present the definitions and questionnaire items for each of the seven outcome dimensions included in the instrument; 3) explain how to summarize and present the results; 4) provide reflective questions for a partnership to discuss each of the seven dimensions; and 5) share broader reflection questions and questions related to next steps and future directions. It is our intent that this document will provide an accessible and meaningful way for CBPR partnerships to assess the effectiveness of their efforts and to take necessary steps for improving their partnership functioning through the application of the MAPS Questionnaire and Facilitation Guide.

References

1. Closing the Gap in a Generation: Health Equity through Action on the Social Determinants of Health: Commission on Social Determinants of Health Final Report. World Health Organization, Commission on Social Determinants of Health; 2008:246.
2. Braveman P, Egerter S. Overcoming Obstacles to Health in 2013 and Beyond. Robert Wood Johnson Foundation; 2013. www.rwjf.org/content/dam/farm/reports/reports/2013/rwjf406474.
3. Minkler M. Linking Science and Policy Through Community-Based Participatory Research to Study and Address Health Disparities. *Am J Public Health*. 2010;100(S1):S81-S87. doi:10.2105/AJPH.2009.165720
4. Cacari-Stone L, Wallerstein N, Garcia AP, Minkler M. The Promise of Community-Based Participatory Research for Health Equity: A Conceptual Model for Bridging Evidence With Policy. *Am J Public Health*. 2014;104(9):1615-1623. doi:10.2105/AJPH.2014.301961
5. Wallerstein N, Duran B. Community-Based Participatory Research Contributions to Intervention Research: The Intersection of Science and Practice to Improve Health Equity. *Am J Public Health*. 2010;100(S1):S40-S46. doi:10.2105/AJPH.2009.184036
6. Israel BA, Coombe CM, Cheezum RR, et al. Community-Based Participatory Research: A Capacity-Building Approach for Policy Advocacy Aimed at Eliminating Health Disparities. *Am J Public Health*. 2010;100(11):2094-2102. doi:10.2105/AJPH.2009.170506
7. Viswanathan M, Ammerman A, Eng E, et al. Community-Based Participatory Research: Assessing the Evidence. In: AHRQ Evidence Report Summaries. Vol August. 99th ed. ; 2004:1-8.
8. Chen PG, Diaz N, Lucas G, Rosenthal MS. Dissemination of Results in Community-Based Participatory Research. *American Journal of Preventive Medicine*. 2010;39(4):372-378. doi:10.1016/j.amepre.2010.05.021
9. Mercer S, Green L. Federal funding and support for participatory research in public health and health care. In: Minkler M, Wallerstein N, eds. *Community-Based Participatory Research for Health: From Process to Outcomes*. 2nd ed. Jossey-Bass; 2008:399-406.
10. Butterfoss FG, Kegler M. The community coalition action theory. In: *Emerging Theories on Health Promotion Practice and Research: Strategies for Improving Public Health*. Jossey-Bass; 2009:237-276.
11. Currie M, King G, Rosenbaum P, Law M, Kertoy M, Specht J. A model of impacts of research partnerships in health and social services. *Evaluation and Program Planning*. 2005;28(4):400-412. doi:10.1016/j.evalprogplan.2005.07.004
12. Lasker RD, Weiss E. Broadening Participation in Community Problem Solving: a Multidisciplinary Model to Support Collaborative Practice and Research. *Journal of Urban Health: Bulletin of the New York Academy of Medicine*. 2003;80(1):14-60. doi:10.1093/jurban/jtg014
13. Wallerstein N, Oetzel J, Duran B, Tafoya G, Belone L, Rae R. What predicts outcomes in CBPR? Published online 2008. doi:10.13140/RG.2.2.25894.11844

14. Israel BA, Lantz PM, McGranaghan RJ, Guzman JR, Lichtenstein R, Rowe Z. Documentation and evaluation of community-based participatory research partnerships: The use of in-depth interviews and closed-ended questionnaires. In: Israel BA, Eng E, Schulz AJ, Parker EA, eds. *Methods for Community-Based Participatory Research for Health*. 2nd ed. John Wiley and Sons, Ltd; 2012:369-403.
15. Sofaer S. *Working Together, Moving Ahead: A Manual to Support Effective Community Health Coalitions*. City of New York University, Baruch College, School of Public Affairs; 2001.
16. Schulz AJ, Israel BA, Lantz P. Instrument for evaluating dimensions of group dynamics within community-based participatory research partnerships. *Evaluation and Program Planning*. 2003;26(3):249-262. doi:10.1016/S0149-7189(03)00029-6
17. Sandoval JA, Lucero J, Oetzel J, et al. Process and outcome constructs for evaluating community-based participatory research projects: a matrix of existing measures. *Health Education Research*. 2012;27(4):680-690. doi:10.1093/her/cyr087
18. Granner ML. Evaluating community coalition characteristics and functioning: a summary of measurement tools. *Health Education Research*. 2004;19(5):514-532. doi:10.1093/her/cyg056
19. King G, Servais M, Kertoy M, et al. A measure of community members' perceptions of the impacts of research partnerships in health and social services. *Evaluation and Program Planning*. 2009;32(3):289-299. doi:10.1016/j.evalprogplan.2009.02.002
20. Oetzel JG, Zhou C, Duran B, et al. Establishing the Psychometric Properties of Constructs in a Community-Based Participatory Research Conceptual Model. *Am J Health Promot*. 2015;29(5):e188-e202. doi:10.4278/ajhp.130731-QUAN-398
21. VanDevanter N, Kwon S, Sim SC, Chun K, B Free CEED Coalition, Trinh-Shevrin C. Evaluation of Community–Academic Partnership Functioning: Center for the Elimination of Hepatitis B Health Disparities. *Progress in Community Health Partnerships*. 2011;5(3):223-233. doi:10.1353/cpr.2011.0032
22. Israel BA, Lachance L, Coombe CM, et al. Measurement Approaches to Partnership Success: Theory and Methods for Measuring Success in Long-Standing Community-Based Participatory Research Partnerships. *Progress in Community Health Partnerships*. 2020;14(1):129-140. doi:10.1353/cpr.2020.0015

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Measurement Approaches to Partnership Success (MAPS) Questionnaire

Measurement Approaches to Partnership Success (MAPS) is a project of the Detroit Community-Academic Urban Research Center (Detroit URC) and is guided by the Detroit URC Board. The MAPS Questionnaire was developed in collaboration with multiple community and academic community-based participatory research (CBPR) experts and was validated in long-standing (in existence \geq 6 years) CBPR partnerships. Whether your partnership is newly developed, in its early or middle stages of development, or of long-standing, the MAPS Questionnaire can be useful in capturing quantitative information about your partnership's structure and processes, including partnership functioning, leadership, and overall outcomes.

The MAPS Questionnaire is laid out in the following sections:

PARTICIPANT INFORMATION	32
PRECURSOR CHARACTERISTICS RELATED TO PARTNERSHIP OUTCOMES AND SUCCESS	10
MAPS DIMENSIONS of CBPR PARTNERSHIP OUTCOMES AND SUCCESS	37
SECTION A: Equity in the Partnership.....	37
SECTION B: Reciprocity.....	40
SECTION C: Competence Enhancement	41
SECTION D: Partnership Synergy	43
SECTION E: Sustainability	44
SECTION F: Realization of Benefits Over Time	46
SECTION G: Achievement of Long-Term Partnership Goals/Outcomes	48

We estimate that the questionnaire will take **approximately 40 minutes** to complete.

Development and Conditions of Use

Developed by the MAPS team and expert panel under the leadership of Barbara L. Brush, PhD, Barbara A. Israel, DrPH, MPH and Laurie Lachance, PhD, MPH
Schools of Nursing and Public Health and the Detroit URC, University of Michigan, 2022.

For use and/or adaptations of this document, please credit Barbara L. Brush, PhD, Barbara A. Israel, DrPH, MPH, and Laurie Lachance, PhD, MPH, Schools of Nursing and Public Health, University of Michigan, 2022.

The MAPS Questionnaire is intended to be used along with the MAPS Facilitation Guide. For further information about the MAPS project and the Questionnaire and Facilitation Guide, see:

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PARTICIPANT INFORMATION

Please answer each question below as accurately as possible by selecting or filling in a response in the space provided.

1. Thinking about your participation in this partnership, which of the following best describes your affiliation?

- | | |
|--|--|
| <input type="checkbox"/> Community-based Organization | <input type="checkbox"/> Community Member |
| <input type="checkbox"/> Academic Institution | <input type="checkbox"/> Funding Agency |
| <input type="checkbox"/> Government Agency | <input type="checkbox"/> Research Organization |
| <input type="checkbox"/> Health and Human Service Organization | <input type="checkbox"/> Other: _____ |

2. Approximately how many years have you, personally, been a partner in this partnership? Please round up to the nearest number of years.

_____ YEARS

3. Approximately how long has your organization/academic institution been a member of the partnership? Please round up to the nearest number of years or enter N/A if not applicable or you do not know.

_____ YEARS

4. What is your role/title in your organization?

5. To what extent can you make decisions on behalf of your organization in relation to this partnership?

- To a Great Extent
- To a Considerable Extent
- To a Moderate Extent
- To a Minimal Extent
- Not at All
- Not Applicable

6. Overall, how actively involved are you in the partnership?

- To a Great Extent
- To a Considerable Extent
- To a Moderate Extent
- To a Minimal Extent
- Not at All
- Not Applicable

7. Please estimate how much experience you have using a CBPR approach, including within this partnership and others.

- A Great Amount
- A Considerable Amount
- A Moderate Amount
- A Very Little Amount
- No Prior Experience

PRECURSOR CHARACTERISTICS RELATED TO PARTNERSHIP OUTCOMES AND SUCCESS

The following items are characteristics that facilitate the partnership’s ability to achieve intermediate, long-term, and success outcomes.

Using the 5-point Likert-type scale: “Agree,” “Somewhat Agree,” “Neither Agree nor Disagree,” “Somewhat Disagree,” and “Disagree,” please circle your level of agreement with each item below based on your experience as a partner in your community-based participatory research (CBPR) partnership.



	AGREE	SOMEWHAT AGREE	NEITHER AGREE NOR DISAGREE	SOMEWHAT DISAGREE	DISAGREE
1 Partners share a clear understanding of the issues the partnership is trying to address.	5	4	3	2	1
2 Partners agree on the goals and objectives of the partnership.	5	4	3	2	1
3 Partners are committed to the partnership’s priorities.	5	4	3	2	1
4 The partnership follows an agreed upon set of CBPR principles.	5	4	3	2	1
5 Partners can rely on the people that they work with in the partnership.	5	4	3	2	1
6 Partners have confidence in one another.	5	4	3	2	1
7 Partners trust one another.	5	4	3	2	1
8 There is a structure in place for making decisions (for example, operating procedures, by-laws).	5	4	3	2	1

		AGREE	SOMEWHAT AGREE	NEITHER AGREE NOR DISAGREE	SOMEWHAT DISAGREE	DISAGREE
9	An infrastructure is in place to support the partnership (for example, paid or unpaid staff).	5	4	3	2	1
10	Leaders of the partnership take responsibility for moving the partnership forward.	5	4	3	2	1
11	The leadership encourages active participation of both community and academic partners.	5	4	3	2	1
12	The partnership facilitates active participation of both academic and community partners in leadership roles.	5	4	3	2	1
13	Leadership is shared between community and academic partners.	5	4	3	2	1
14	The partnership has a process for ensuring ongoing leadership.	5	4	3	2	1
15	Partners equitably influence the work of the partnership.	5	4	3	2	1
16	Community partners are involved throughout the research process.	5	4	3	2	1
17	The partnership takes time to reflect on issues of power and privilege within the partnership.	5	4	3	2	1
18	The partnership recognizes that conflicts occur from time-to-time.	5	4	3	2	1
19	The partnership works together to address conflicts when they occur.	5	4	3	2	1
20	Partners see conflicts as opportunities to address issues within the partnership.	5	4	3	2	1

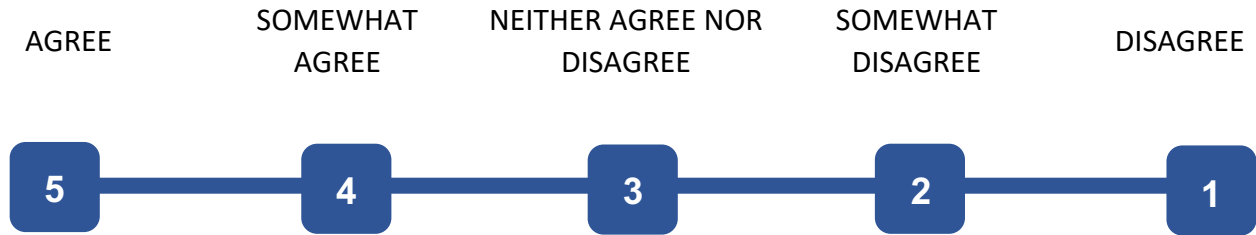
		AGREE	SOMEWHAT AGREE	NEITHER AGREE NOR DISAGREE	SOMEWHAT DISAGREE	DISAGREE
21	Partners demonstrate humility when working together.	5	4	3	2	1
22	Partners are passionate about their work together.	5	4	3	2	1
23	Partners create connections between the partnership and the community.	5	4	3	2	1
24	There is a history of positive collaboration among members of the partnership.	5	4	3	2	1
25	The partnership values the community's knowledge (for example, community skills and expertise).	5	4	3	2	1
26	Community knowledge is integrated throughout the partnership's work.	5	4	3	2	1
27	The partnership evaluates its collaborative processes.	5	4	3	2	1
28	The partnership applies evaluation results to improve the partnership.	5	4	3	2	1

MAPS DIMENSIONS of CBPR PARTNERSHIP OUTCOMES AND SUCCESS

SECTION A: Equity in the Partnership

The following items are associated with **equity in the partnership**.

Using the 5-point Likert-type scale: “Agree,” “Somewhat Agree,” “Neither Agree nor Disagree,” “Somewhat Disagree,” and “Disagree,” please circle your level of agreement with each item below based on your experience as a partner in your community-based participatory research (CBPR) partnership.



		AGREE	SOMEWHAT AGREE	NEITHER AGREE NOR DISAGREE	SOMEWHAT DISAGREE	DISAGREE
29	Mutual respect exists in the partnership.	5	4	3	2	1
30	Overall, there is a high level of trust between partners.	5	4	3	2	1
31	Partners have authentic relationships with partners whose backgrounds and perspectives are different from their own.	5	4	3	2	1
32	Partners get to know and care about each other.	5	4	3	2	1
33	There is genuine goodwill among members of the partnership (for example, members are welcoming and open).	5	4	3	2	1
34	Friendships have been established between community and academic partners.	5	4	3	2	1
35	Overall, partners still like each other after a long time in the partnership.	5	4	3	2	1

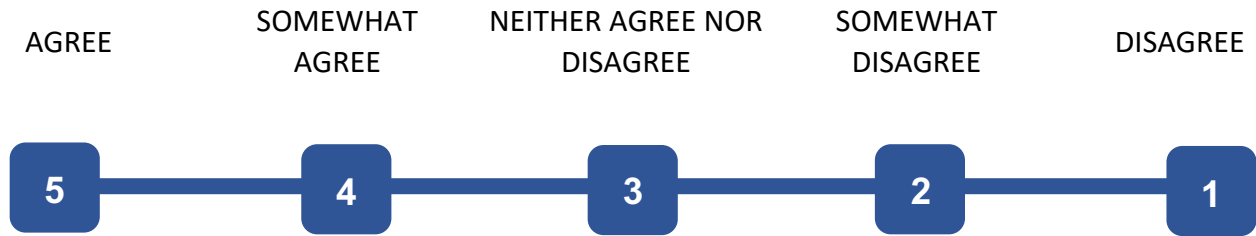
		AGREE	SOMEWHAT AGREE	NEITHER AGREE NOR DISAGREE	SOMEWHAT DISAGREE	DISAGREE
36	Community partners are equitably engaged in decision-making processes.	5	4	3	2	1
37	The partnership incorporates each partner's knowledge and expertise.	5	4	3	2	1
38	Community partners take leadership in developing research agendas.	5	4	3	2	1
39	Partnership decisions are made through a consensus decision-making process.	5	4	3	2	1
40	The partnership enables partners to be transparent about their own institutional/organizational obligations.	5	4	3	2	1
41	Partners are willing to negotiate on important decisions.	5	4	3	2	1
42	Partners are comfortable speaking up even when they disagree.	5	4	3	2	1
43	Partners have a feeling of ownership in the partnership.	5	4	3	2	1
44	In general, partners are proud of the work of the partnership.	5	4	3	2	1
45	All partners are treated fairly.	5	4	3	2	1
46	Community and academic partners have equitable power within decision-making processes.	5	4	3	2	1
47	Community partners have control over decisions on how resources (for example, funding, personnel) are distributed within the partnership.	5	4	3	2	1

		AGREE	SOMEWHAT AGREE	NEITHER AGREE NOR DISAGREE	SOMEWHAT DISAGREE	DISAGREE
48	The partnership strives to compensate partners equitably for their contributions.	5	4	3	2	1
49	To the extent feasible, academic partners make institutional resources available to community partner organizations.	5	4	3	2	1
50	To the extent feasible, community partners make resources available to academic institutions.	5	4	3	2	1
51	The distribution of resources within the partnership is fair.	5	4	3	2	1

SECTION B: Reciprocity

The following items are associated with **reciprocity**.

Using the 5-point Likert-type scale: “Agree,” “Somewhat Agree,” “Neither Agree nor Disagree,” “Somewhat Disagree,” and “Disagree,” please circle your level of agreement with each item below based on your experience as a partner in your community-based participatory research (CBPR) partnership.

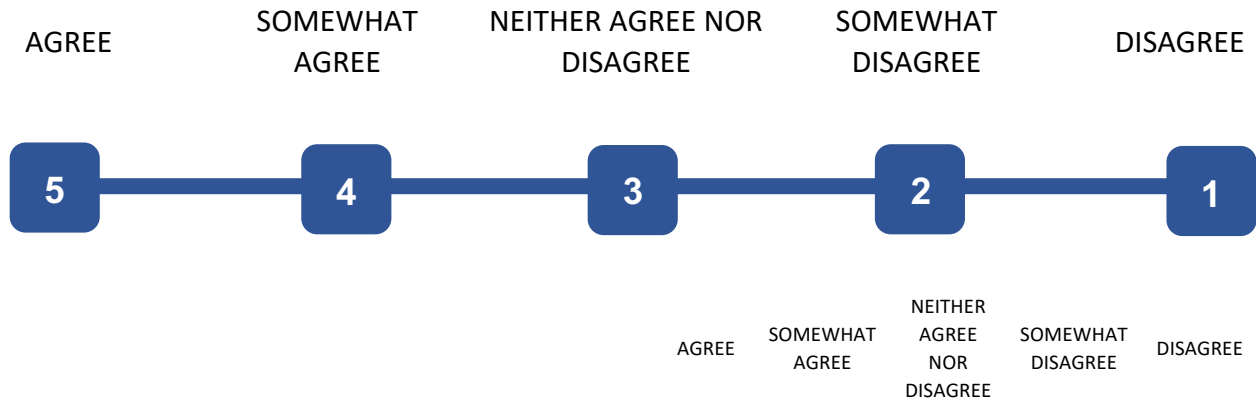


		AGREE	SOMEWHAT AGREE	NEITHER AGREE NOR DISAGREE	SOMEWHAT DISAGREE	DISAGREE
52	Partners are a resource for each other.	5	4	3	2	1
53	Partners incorporate the ideas, skills, and abilities of one another.	5	4	3	2	1
54	Partners recognize each other’s expertise.	5	4	3	2	1
55	The exchange of expertise among partners may vary at different points in time in the partnership.	5	4	3	2	1
56	Over time, all partners exchange their expertise within the partnership.	5	4	3	2	1
57	Partners support each other outside of partnership activities (for example, attend events, celebrate partners’ achievements, provide letters of support).	5	4	3	2	1

SECTION C: Competence Enhancement

The following items are associated with **competence enhancement**.

Using the 5-point Likert-type scale: “Agree,” “Somewhat Agree,” “Neither Agree nor Disagree,” “Somewhat Disagree,” and “Disagree,” please circle your level of agreement with each item below based on your experience as a partner in your community-based participatory research (CBPR) partnership.



		AGREE	SOMEWHAT AGREE	NEITHER AGREE NOR DISAGREE	SOMEWHAT DISAGREE	DISAGREE
58	The partnership provides the opportunity for all partners to enhance their knowledge and skills.	5	4	3	2	1
59	The partnership enhances the skills of community partners to conduct CBPR.	5	4	3	2	1
60	The partnership enhances the skills of academic partners to conduct CBPR.	5	4	3	2	1
61	Partners gain knowledge and skills that are transferable outside the partnership.	5	4	3	2	1
62	Membership in the partnership enhances partners' credibility.	5	4	3	2	1
63	Being a member of the partnership enhances partners' ability to leverage resources from each other's organizations.	5	4	3	2	1
64	The partnership enhances partners' ability to advocate for change in the community.	5	4	3	2	1

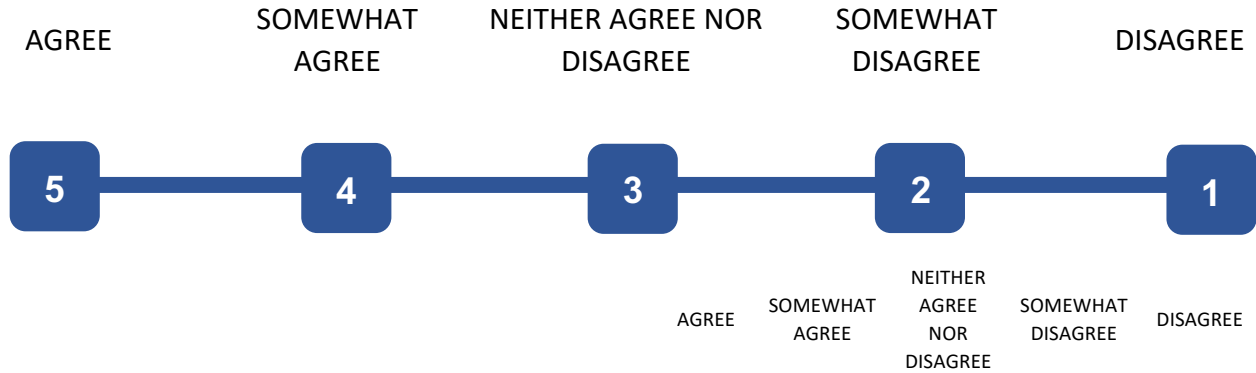
AGREE SOMEWHAT AGREE NEITHER AGREE NOR DISAGREE SOMEWHAT DISAGREE DISAGREE

65	The partnership enhances partners' ability to advocate for change in academic institutions.	5	4	3	2	1
66	Community partners engage in dissemination of the partnership's work to academic audiences (for example, in peer-reviewed publications and presentations).	5	4	3	2	1
67	Academic partners engage in dissemination of the partnership's work to non-academic audiences (for example, policy briefs, community meetings).	5	4	3	2	1
68	Community partners have enhanced capacity to protect the community from potential research exploitation.	5	4	3	2	1

SECTION D: Partnership Synergy

The following items are associated with **partnership synergy**.

Using the 5-point Likert-type scale: “Agree,” “Somewhat Agree,” “Neither Agree nor Disagree,” “Somewhat Disagree,” and “Disagree,” please circle your level of agreement with each item below based on your experience as a partner in your community-based participatory research (CBPR) partnership.



	5	4	3	2	1
	AGREE	SOMEWHAT AGREE	NEITHER AGREE NOR DISAGREE	SOMEWHAT DISAGREE	DISAGREE
69 Working together, the partnership accomplishes more than partners could accomplish separately.	5	4	3	2	1
70 By working together, partners develop innovative ways to address issues identified by the partnership.	5	4	3	2	1
71 The partnership combines diverse perspectives (for instance, diverse ideas, knowledge, and cultures) to make changes identified by the partnership.	5	4	3	2	1
72 The partnership influences the way partners think about and do their work.	5	4	3	2	1
73 Partners have experienced a change in perspective by engaging with each other’s ideas.	5	4	3	2	1
74 The partnership integrates partners’ capacities such that “we’re better together than alone.”	5	4	3	2	1
75 The partnership has relationships with other partnerships which enables them to enhance and extend each other’s work.	5	4	3	2	1

SECTION E: Sustainability

The following items are associated with **sustainability**.

Using the 5-point Likert-type scale: “Agree,” “Somewhat Agree,” “Neither Agree nor Disagree,” “Somewhat Disagree,” and “Disagree,” please circle your level of agreement with each item below based on your experience as a partner in your community-based participatory research (CBPR) partnership.



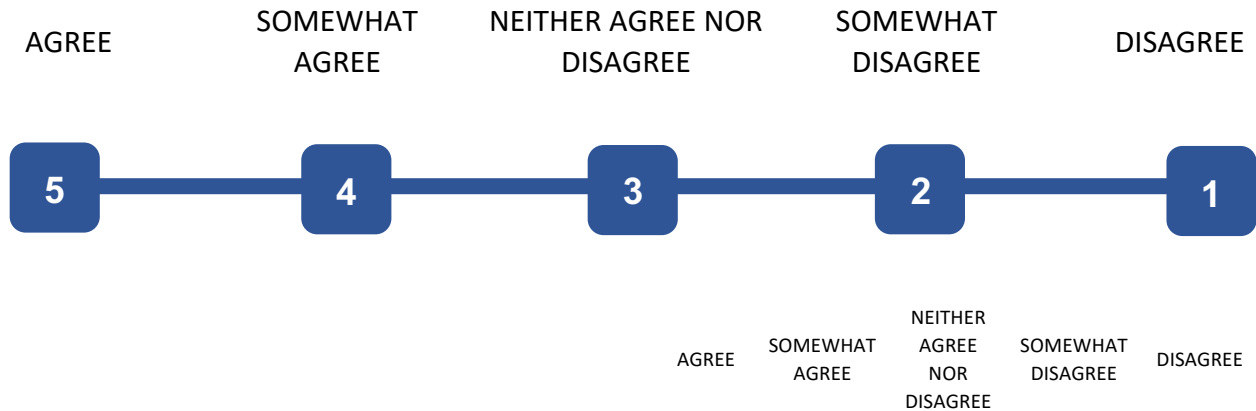
		AGREE	SOMEWHAT AGREE	NEITHER AGREE NOR DISAGREE	SOMEWHAT DISAGREE	DISAGREE
76	The partnership has continued beyond the initial project.	5	4	3	2	1
77	The partnership has persisted over the long haul, with or without funding.	5	4	3	2	1
78	The partners have stayed engaged in the partnership over time.	5	4	3	2	1
79	The partnership adapts to changing conditions (for example, fewer funds, changing political climate, change in partnership members).	5	4	3	2	1
80	An infrastructure is in place to sustain the partnership (for example, paid or unpaid staff).	5	4	3	2	1
81	The partnership has a structure in place for addressing changes in leadership over time.	5	4	3	2	1

		AGREE	SOMEWHAT AGREE	NEITHER AGREE NOR DISAGREE	SOMEWHAT DISAGREE	DISAGREE
82	External relationships have been established (for example, with funders, decision makers) that help the partnership endure.	5	4	3	2	1
83	Partners are committed to pursuing ongoing funding opportunities for the partnership.	5	4	3	2	1
84	Partners want to continue working together over time.	5	4	3	2	1
85	Relationships between partners continue over time.	5	4	3	2	1
86	The partnership has leveraged funding to extend the work of the partnership.	5	4	3	2	1
87	New projects have been developed among some members of the partnership.	5	4	3	2	1
88	Relationships are created with additional partners to develop projects beyond the initial partnership.	5	4	3	2	1
89	The partnership's work in the community persists over time.	5	4	3	2	1
90	Partners have the capacity to sustain the partnership's work outside the partnership.	5	4	3	2	1
91	The partnership has achieved visibility in the community.	5	4	3	2	1

SECTION F: Realization of Benefits Over Time

The following items are associated with **realization of benefits over time**.

Using the 5-point Likert-type scale: “Agree,” “Somewhat Agree,” “Neither Agree nor Disagree,” “Somewhat Disagree,” and “Disagree,” please circle your level of agreement with each item below based on your experience as a partner in your community-based participatory research (CBPR) partnership.



	5	4	3	2	1
	AGREE	SOMEWHAT AGREE	NEITHER AGREE NOR DISAGREE	SOMEWHAT DISAGREE	DISAGREE
92 Benefits to community partners have increased over time (for example, funding opportunities, increased skills).	5	4	3	2	1
93 Benefits to academic partners have increased over time (for example, funding opportunities, increased skills).	5	4	3	2	1
94 Over time, the benefits of conducting CBPR in the partnership outweigh the costs.	5	4	3	2	1
95 Partners take on costs of participation at times because they value the partnership.	5	4	3	2	1
96 Investment in the partnership is worth it because it pays off down the road.	5	4	3	2	1
97 Partners take into consideration each other’s pressures outside the partnership (for example, organizational funding, job promotion).	5	4	3	2	1

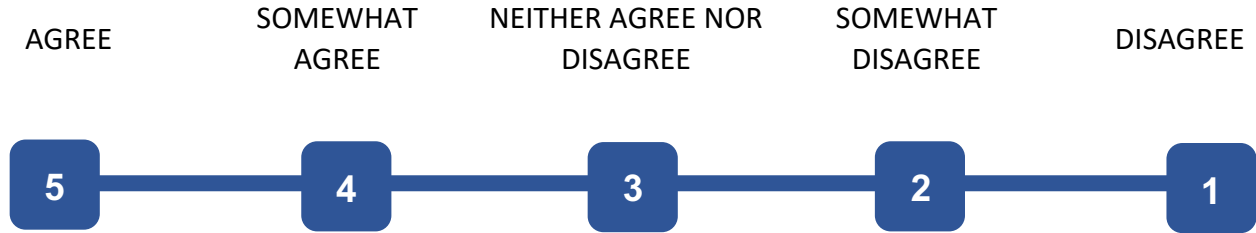
			NEITHER		
	AGREE	SOMEWHAT	AGREE	SOMEWHAT	DISAGREE
		AGREE	NOR	DISAGREE	
			DISAGREE		

98	At times partners are willing to go along with decisions they don't totally agree with because they trust it will work out in the long run.	5	4	3	2	1
99	Partners have become more knowledgeable and better able to work together to create community impact.	5	4	3	2	1

SECTION G: Achievement of Long-Term Partnership Goals/Outcomes

The following items are associated with **achievement of long-term partnership goals/outcomes**.

Using the 5-point Likert-type scale: “Agree,” “Somewhat Agree,” “Neither Agree nor Disagree,” “Somewhat Disagree,” and “Disagree,” please circle your level of agreement with each item below based on your experience as a partner in your community-based participatory research (CBPR) partnership.



AGREE SOMEWHAT AGREE NEITHER AGREE NOR DISAGREE SOMEWHAT DISAGREE DISAGREE

		5	4	3	2	1
100	The work of the partnership has created shared power among the partners.	5	4	3	2	1
101	The broader community’s knowledge and expertise is incorporated into the partnership’s decision making.	5	4	3	2	1
102	The partnership achieves research goals that it sets out to accomplish.	5	4	3	2	1
103	The partnership has used research findings to change policy.	5	4	3	2	1
104	The partnership’s research advances the goals and objectives of both community and academic partners.	5	4	3	2	1
105	Community partners use the partnership’s research findings to meet aims of their own organization.	5	4	3	2	1

AGREE SOMEWHAT AGREE NEITHER AGREE NOR DISAGREE SOMEWHAT DISAGREE DISAGREE

106	The work of the partnership results in changes in community residents (for example, in knowledge, attitudes, behaviors).	5	4	3	2	1
107	The work of the partnership results in improved health in the community.	5	4	3	2	1
108	The work of the partnership positively influences outcomes related to the conditions in the community that affect health and health risks (in other words, social determinants of health).	5	4	3	2	1
109	The work of the partnership advances opportunities for everyone in the community to achieve their highest level of health (in other words, health equity).	5	4	3	2	1

Measurement Approaches to Partnership Success (MAPS)
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