STEP 1 TASK 9: Conduct a participation analysis

**Process**: Facilitated discussion after background information has been gathered

**Output**: Table of partners at each level

Task 9 helps gather information on potential partners and collaborators and their capacity-building needs.

Determine what skills and resources will be needed from program partners.

* Who has national-level advocacy experience?
* Who has experience establishing networks and maintaining momentum on social challenges?
* Who has experience producing health promotion materials?
* Who can produce television or radio programs?
* Who can organize training activities?
* Who can mobilize communities to address the problem?

Identify specific partners and allies to help initiate policy change and strengthen the enabling environment at the national level.

* What would motivate their participation?
* In what skills area would they need capacity building?

Identify partners who can collaborate with you on implementing activities at the community level. Partners could include field workers, schools, health service providers, community-based groups, networks/associations of communication organizations and individuals or groups affected by the challenge.

* What would motivate their participation?
* In what skills area would they need capacity building?

For detailed guidelines on how to involve individuals or groups affected by the challenge and other stakeholders, refer to [Participation Guide: Involving Those Directly Affected in Health and Development Communication Programs](https://www.k4health.org/toolkits/fpsuccess/participation-guide-involving-those-directly-affected-health-and-development)*.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Potential Partners** | **Level**(national, local) | **Required Skills**(Will capacity building be needed?) | **Required Resources**(Will additional resources be needed?) |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |

Top of Form

Bottom of Form