2. Alliance Mapping —

2. Alliance Mapping

Tool 2A Alliance Mapping Form

Legal Network Alliance Ma	pping – [Name	of issue or initiative]
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1. Organization's name:	11. Sector (check all that apply):	
	Legal	
2. Location (city):	Medical	
	Public Health	
3. Location (state or province):	Housing	
	Criminal Justice	
4. Country:	Representative organization (e.g. Indigenous rights, sex workers, etc.)	
	Multi-Sector	
	Other:	
5. Date joined alliance (mm/yy)	12. Constituency/Clientele (check all that apply):	
	People living with HIV	
6. Name of point person 1:	Indigenous peoples	
	Other racialized group	
7. Email point person 1:	Current or former drug user	
	Current or former prisoner	
	Current or former sex worker	
8. Name of point person 2:	LGBTQI	
	Experienced gender-based violence	
9. Email point person 2:	Not applicable	
	Other	
10. Type of organization (check all that apply):	13. Please identify what the organization brings to the alliance (check	
	all that apply):	
Service	Represents key group affected by issue	
Membership	Human rights expertise (specify)	
Policy/Advocacy	Legal/criminal justice expertise	
Donor /Funder	Medical or public health expertise	
Research	Media/communications capacity	
Political Parties	Coordinating capacity	
Other	Ability to mobilize membership	
	Advocacy/lobbying capacity	
	Research capacity	
	Other:	

- **14.** Do you have a Memorandum of Understanding (MOU) with this organization? If so, include.
- **15.** If you do not have an MOU with this organization, what is the current nature of your relationship? What are your common goals?

2. Alliance Mapping –

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Tool 2B Alliance Mapping Visualization

You can also create simple visuals of your alliances that can convey more than a simple list of names.

POSSIBLE VISUAL FOR STRATEGIC AND TACTICAL ALLIES

(CAN DO THIS AT BEGINNING OF EFFORT AND UPDATE PERIODICALLY IF COALITION BUILDING IS CORE TO STRATEGY)



SUMMARY STATISTICS

Total # of organizations: Total membership represented: # of provinces represented: etc.