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The focus of this issue is on Building our Partnership for Beyond 2003: Exploring Telecommunications and Policy

The Third Ontario Heart Health Network Conference Summary

The Ontario Heart Health Network hosted some 120 delegates at their third conference held at The Four Points Sheraton Hotel in Kitchener, on November 7 & 8, 2001. Delegates benefited from 2 keynote addresses, 2 sets of concurrent sessions a round table presentation, a recognition session and exhibits all intending to "build our partnerships". Contained in the following pages are highlights of the sessions, to remind those who attended and assist those who were not present, in making best use of the information.

The Ontario Heart Health Network aims to support practitioners & community members involved in heart health to exchange ideas and share resources.

Conference Objectives:

The Conference Planning Committee, listed below, set several objectives for the session. Primarily, they intended to provide a one and a half day event for community partners and public health personnel highlighting the processes underpinning successful partnerships and their outcomes and interventions resulting from these partnerships. In so doing, they also hoped to have participants:

- share experiences showcasing how partnerships influence change in their communities
- share successes and challenges about partnerships necessary for policy initiatives
- build their knowledge about social trends using telecommunication techniques

Conference Sponsors

- we couldn't have done it without you!

- Ministry of Health and Long-term Care, Community and Public Health Branch
- Heart Health Resource Centre
- Health Canada
- The Heart and Stroke Foundation of Ontario
- Region of Peel, Health
- Southwest Regional Heart Health Network
- Peel Heart Health Network
- Program Training & Consultation Centre, Ontario Tobacco Strategy

Thanks to the Conference Planning Committee

Co-Chairs:



Dorina Rico Peel Health



Anne Lessio HHRC

Members:

- Amanda Kroger** Waterloo
- Janet Nevala** Program Training & Consultation Centre
- Peggy Patterson** Renfrew County
- Louise Simmons** Eastern Ontario
- Aprile Spence** Peel
- Nancy Wai** Lambton
- Carolyn Warren** Peel

Conference at a Glance...

Day 1

Official Conference Opening & MoHLTC Volunteer & Partner Awards (1.5 hours)

Opening Keynote Speaker: **Mark Sarner**, Manifest Communications (1.5 hours)

OHHN Meeting (1.5 hours)

Day 2

Round Table Discussion: *Building Sustainable Partnerships Beyond 2003* (2 hours)

Roy Cameron, Facilitator

Concurrent Workshops (30 minutes each)

- Teen Cuisine - P. Cranfield, P. Patterson, S. Nick - Renfrew County
- Cooking Club - C. Kells, L. Sutherland, C. Thomas - Toronto
- Woman Alive - E. Stewart-Bindernagel, MP Arnett - Ottawa
- Audience Response System - L. Simmons - Eastern Ontario
- Advocating for Health - K. Bergeron - Haliburton-Kawartha-Pine Ridge
- Building Partnerships through Heart Health Grants - N. Cohen, S. Knowles - Toronto

Revisions to Year 4 Reporting Guidelines, **Barb Riley**

Concurrent Workshops (30 minutes each)

- Building Partnerships Between and Among Ontario School Communities - M. Brownrigg - OPHEA
- Hocus Pocus - H. Wilson - Vanish Smoking, Windsor-Essex
- Ash Art - J. Palesh - Windsor-Essex
- Huh? - C. McNally - Hamilton
- Working with Community Partners to Build Healthier Workplaces - L. Foster, N. Wai, R. Furanna - Lambton
- Best Practices for Heart Health Promotion with Diverse Communities - G. Brown - Glen Brown and Associates
- Physician Strategy - R. Langlois, M. Bortolotti - Peel
- Beyond Lifestyle - S. Farrell, D. Raphael - Toronto

Closing Keynote Speaker: **David Courtemanche**, Leading Minds Consulting (1.25 hours)

Official Conference Opening

In the beginning ...

Mark Sarner, President of Manifest Communications, opened the conference with his presentation on Social Marketing. He reinforced the need to segment your audience and understand their needs and issues so that you can position your cause in a tailored and compelling manner. This is particularly true in today's climate where there are so many competing issues (e.g. AIDS, Cancer, Drunk Driving etc.).



Mark Sarner

Social marketing campaigns can help achieve behaviour change and should be used to move us beyond raising awareness, which, from his perspective, is overdone. However, one cannot hope to achieve behaviour change unless the audience is aware of both your issue and your organization and this requires a significant investment in a social marketing campaign. The speaker further recommended that specialists be contracted to conceptualize these campaigns.

Sarner addressed "The Communication Challenge":

- Just as there is a marketplace of products, there is a marketplace of ideas.
- Communication is social marketing's primary mechanism of influence.
- Ideas are social marketing's most important strategic resource.
- Like products and services, ideas must be shaped and refined before being sent out into the world.

Social Marketing	
The Communication Challenge	
<ul style="list-style-type: none"> • Just as there is a marketplace of products, there is a marketplace of ideas • Communication is social marketing's primary mechanism of influence • Ideas are social marketing's most important strategic resource • Like products and services, ideas must be shaped and refined before being sent out into the world 	<i>People may not buy ideas, but they do buy into them</i>
manifest	

Social Marketing		
	Social Marketing	Commercial Marketing
GOALS	voluntary compliance	consumer choice
SUCCESS	attitude, value, Behaviour change	sales
TRANSACTION	educational	financial
RETURNS	-(cost)	+(profit)
SECTORS	Cooperative	competitive
MARKETS	Societal	Commercial
manifest		

"In feudal societies, warriors are kings. In industrial societies, capitalists are kings. In information societies, communicators are kings. The job of today's leaders is to understand and persuade, not to dictate or command." Michael Adams

Concurrent Workshops

Teen Cuisine

Presented by: Pam Cranfield, Dietitian, Valley Caterers, Peggy Patterson, Community Nutritionist, Renfrew County & District Health Unit
Sandy Nick, Public Health Nurse, Renfrew County & District Health Unit

A cafeteria based high school health promotion program that encourages healthy food choices, positive body image and regular physical activity among teenagers in Renfrew County was presented. This is a collaboration between the public health staff and food service staff that requires a contribution of time and money on the part of caterers. The school component is complimented with community workshops and use of the media to promote healthy eating. There is also a curriculum component for grade 10 students in Communication Technology who complete various promotional tools for the program as well as a component for Food and Nutrition class with grade 9 and 10's. Lastly, there is a "how-to" manual describing the steps to producing a fashion show that is sensitive to body image issues.



Cooking Club

Presented by: Christine Kells, Public Health Nurse, Toronto Public Health
Lee Sutherland, Public Health Nurse, Toronto Public Health
Special Guest: Christine Thomas

This program for children aged 4-14 is designed to engage children in food preparation experiences in an active learning way and to educate children about skills that lead to healthy eating. There is a "train the trainer" approach and the manual contains recipes from different cultures, it also includes games and activities. The six-hour training is typically provided to staff and leaders who work with children in a community setting and wish to provide hands-on food experiences. In the first seven months, 28 leaders have been trained, 40 manuals distributed. Currently, 11 sites are implementing the program and 615 children have participated.



Woman Alive

Presented by:
Mary Pat Arnett, Public Health Nurse,
City of Ottawa

Eva Stewart-Bindernagel, Public Health Nurse, City of Ottawa

Beginning in 1997, this physical activity initiative involves assessing the barriers to participation in physical activity and then providing affordable opportunities to be active. Through a series of focus groups, common barriers have been identified to be money, child care, transportation, clothing/equipment, accessibility (time, location of program), marketing approaches, and attitudes of program providers. Community partners include the Community Resource Centre, Kanata Heart Beat, the Kanata Leisure Centre, and Public Health.

To address the barriers, there is a \$1 honour system payment per aquatic or land exercise class, free daytime child care which includes swimming for the children, free bus tickets, sessions on related health topics and some social events organized for participants.

There is a fitness assessment and weekly feedback in both written and verbal formats in order to evaluate the program. 32% of participants now exercise more. There is a manual available and the program is now offered in 9 Ottawa locations.

According to one participant:

"What I like best is the change I see in myself."

Audience Response System

Presented by:

Louise Simmons, Eastern Ontario Health Unit

An interactive telecommunication tool using modern technology linked to PowerPoint was described. It is used for presentations, program evaluation, community assessments and much more. It gives instant results and allows the presenter to adapt the content to the needs and responses of the specific audience.



Thanks!

Myrna Gough, from the Ministry of Health & Long-Term Care presented volunteers and Coordinators with a special "thank you" certificate of recognition...

Advocating for Health

Presented by:

Kim Bergeron, Heart Health Coordinator, Haliburton-Kawartha Pine Ridge District Health Unit

In order to work towards policy change in the community, training was provided to the community partners on advocacy skills and situational assessments. Key messages shared during the session included:

- The process is 90% organization and 10% lobbying
- Important to "get your ducks in a row"
- Know your stakeholders and your opposition
- Develop a strategy to involve your stakeholders and address your opposition.
- Celebrate all successes, even the small ones
- Policy development takes time

"And the award goes to..!"

...those volunteers within the heart health community coalitions who have contributed time, energy and passion to their respective projects. 2001 is the International Year of the Volunteer and the MoHLTC took the opportunity to recognize volunteers in attendance at the conference with a certificate signed by the Minister of Health and senior management.

Our Volunteers...



Best Practices for Heart Health Promotion with Diverse Communities

Presented by:

Glen Brown, Glen Brown and Associates
gbconsult@sympatico.ca

As there is not much health promotion literature to guide work with various cultural groups direct consultation has been done with seven distinct cultures & languages: Cantonese, Polish, Spanish, Tamil, Punjabi, Portuguese, and Vietnamese. It has been found that the primary risk for heart disease is income across all of these groups.

Our Mentors...

Tenacious...committed...passionate... Heart Health Coordinators who have supported their communities since day 1!

From left to right, Alison Dutkewicz (Algoma), Martha McSherry (Timiskaming), Deborah Clarke (Hamilton), Karen Bays (Ottawa), Aprilie Spence (Peel), Jackie Van Rysswyk (Elgin-St.Thomas), Brenda Marchuk (Middlesex-London), Peggy Patterson (Renfrew)



The "Tweens"... 2 Years & Going Strong

From left to right, Donna Fraleigh, Shawn Woods, Alicia Hammond, Tanya O'Conner



More "Tweens"... Have Stayed the Course for Three Years

Front Row: Lisa Gallant, Kristie Daniels, Anne Adair
Back Row: Sara Farrell, Faye Minow, Kim Bergeron, Barb Eles, Joanna Jennings, Ellen Hartwick



The Rookies... Joined our Ranks in the Last Year

Front Row: Mary-lynn Barron, Nabile Al-Kassi, Francine Marzanek, Allyson Davis, Anne Ostrom
Back Row: Zaheeda Daya, Nicky Rauzon-Smith, Natalie Champion, Kathleen Roberston, Amanda Kroger



The Dynamic Duo... Still Beaming After 4 Years

Nancy Wai and Kerry Price



Ash Art

Presented by:
Judy Palesh, Windsor Essex Health Unit

This program links high schools to elementary schools and provides art work messages on smoking cessation, evoking values, beliefs and thoughts about tobacco, thereby illustrating how tobacco impacts students' lives. Students with winning art receive:

- Recognition certificate
- Media interviews
- A gift certificate for art supplies
- A small scholarship
- Special art classes at the Art Gallery of Windsor

Posters created by high school students are judged by community partners and the winners are featured through community presentations and exhibitions. This initiative is based on the comprehensive school health model by bringing tobacco issue into art class, not just health class and it is a relatively inexpensive program requiring only about \$1000. Some of the limitations of the program include the high support required by PHNs, the use of only one medium (posters) and a single source of funding (Heart Health).

Huh?

Presented by:
Cathy McNally, Tobacco Use Prevention Promoter, Hamilton Social and Public Health Services Department

The purpose of this program is to provide a youth-to-youth vehicle to relay accurate and timely information to Hamilton youth aged 6-8 years. The approach was developed following a literature search, a situational assessment, focus groups and a review of other communities. The focus groups in particular indicated that kids were interested in famous people, current and real-world events and any health issue as long as it was made interesting. Bright colours, with games and activities and lots of pictures were important. They also wanted to hear from older youth and will pick up material anything if it is free. "Huh?" is distributed through youth-serving agencies, libraries, recreation centres, middle schools, family physicians and dentist's offices, orthodontists and promoted through a media release. The cost of the resource is about \$1 each. The previous issue was on smoking and the next issue will focus on stress.

Concurrent Workshops

Working with Community Partners to Build Healthier Workplaces

Presented by: Leah Foster, Health Promotion Officer, Lambton Health Unit
Nancy Wai, Coordinator, Lambton Heart Health
Ron Furanna, Consultant, Industrial Accident Prevention Association

Work is conducted with the Chamber of Commerce and the Industrial Action Prevention Association to develop networks with businesses. An awards program has been established modeled after the Singapore H.E.A.L.T.H. (Helping Employees Achieve Life-Time Health Award) award. Aspects of the Health Canada model and the National Quality Institute program have also been included. There are small and large sized workplace categories and in 2000, there were eight businesses that applied in each category.

In addition to the obvious partnership-building opportunities, some of the challenges identified with the program included the need to have a stronger focus on the determinants of health, and stress management. As well, increased marketing of the program is warranted and a better definition of who should be filling out the application for the company. Learnings also include the suggestion to follow-up those receiving "Honorable Mentions" be offered consultation services.

Building Partnerships through Heart Health Grants

Presented by: Nancy Cohen, Coordinator, Cardiac Education Program, North York General Hospital
Susan Knowles, Public Health Dietitian, Toronto Public Health

Based on criteria, which was shared during this presentation, funding of up to \$1000 is provided to community groups for special projects. Often public health staff are the ones promoting this opportunity to the various grant recipients with whom they work. Once approved, consultants representing the heart health partnership are made available to assist the local groups. Important outcomes of this initiative include the broadening of the network membership and the generation of significant contributions-in-kind. Once funded, all recipients are brought together for networking and training purposes. Overall, the program fosters strong local leadership.

Building Partnerships Between and Among Ontario School Communities

Presented by: Michelle Brownrigg, Manager of Projects and Public Affairs, Ontario Physical and Health Education Association

Four approaches were shared. OPHEA operates, at the community level, the School Community Action Partners and Active Schools Program. At the provincial level, the Web-based resource, ophea.net, and the Ontario Health Promotion Resource System were discussed.



Physician Strategy

Presented by: **Raymond Langlois, Health Promotion Officer, Peel Health**
Mark Bortolotti, Alliance M²

In this community, 34% of citizens acquire their health information from physicians but there is a lack of education tools and a difficulty in linking patients with local services and resources. A local cardiologist promotes the program to other physicians and the Ontario College of Family Physicians gives 1.5 hours for continuing education credit. There is a patient education brochure and a display case that was sponsored by a business partner of the Peel Heart Health Network. In 18 months, 100 family physicians have enrolled and more than 200 brochure and display units have been distributed. The partnership requires constant attention to keep the physicians engaged. Future plans include the inclusion of the resources in a workplace strategy, the addressing of obesity trends and the recruitment of new players.

Hocus Pocus, Vanish Smoking

Presented by: **Heather Wilson, Windsor-Essex Health Unit**

This instructional program for grade 4 students features an interactive magic show ("Just Say Moe") and is geared to increase the knowledge of children regarding the consequences of smoking and how to say "no". A curriculum-based resource binder, an evening show for parents and consultation with teachers complement the show. Incentives for children include affirmation cards and pencils, door prizes for pizza coupons, and a draw for a gift certificate for teachers completing the evaluation. Other components include:

- Metal signs for the schools regarding the Tobacco Control Act
- "No to Kids" campaign
- Teacher resource package and Web site list
- Orientation to VIP – peer mentoring component project of Police Services.

Organizers have found that community health nurses are the best way to promote the program and that the play was not as well received at a community presentation as opposed to in schools.

Beyond Lifestyle

Presented by: **Sara Farrell, Heart Health Coordinator, Toronto Public Health**
Professor Dennis Raphael, School of Health Policy and Management,
York University, Atkinson Faculty

Presenters indicated that the current emphasis on medical and lifestyle risk factors as a means of preventing cardiovascular disease in Canada is not enough. Low income is a major cause of CVD in Canada, and indeed the primary risk factor for children. It was recommended that people lobby their local, provincial and federal politicians to put in place policies that combat poverty.

So... what's next for Heart Health in Ontario?

This plenary session was led by the Continuation Working Group (CWG) and aimed to:

- present and clarify the CWG Plan
- obtain feedback and input from participants on the plan and the review tool
- prepare participants to do consultation on the CWG Plan in their own communities
- recruit interested individuals from the OHHN who would be willing to sit on some sub-work groups at the appropriate time to help further define the plan.



Session facilitator, **Dr. Roy Cameron**, sets the tone by emphasizing the value of primary prevention as part of the broader health care system as well as the ground-breaking work being done in Ontario by the OHHP.

Participants also heard from:

Karen Bays on how the plan came about and why?

Tricia Wilkerson shared the information sources for the plan.

Kristie Daniel shared the assumptions & guiding principles.

Alicia Hammond reviewed the positive features to keep or the changes to make to address the challenges & new ideas.

Art Manhire urged participants to consult with their communities & provide input.

Lisa Mitchell led people through the review guide.

Following the discussions, participants felt more prepared to return to their communities and initiate the consultation process, according to evaluation results.

There was a need identified for a condensed version and for a glossary of "jargon".

And on a final note...



David Courtemanche, of Leading Minds Consulting, closed the conference with "Leadership! The Invisible Heart" address.

Highlights

A leader is a person who rules, guides or inspires others. Leaders share some common characteristics such as being effective and influential. They challenge the status quo, offer dynamic perspectives, and inspire trust, respect, and confidence.

In heart health, leaders come in many forms - stakeholders, champions, policy makers, coalition chairs, change agents, gatekeepers, partners, volunteers. In general, we don't talk enough about leadership. We demonstrate leadership by affecting change, which can be initiated by building coalitions, building relationships, engaging partners, transferring ownership, and examining our core values. When we work in this way, we are helping to shift the health culture of our community.

Types of Leaders

- **Direct leaders**
Influence through stories (Churchill)
- **Indirect leaders**
Influence through ideas (Einstein)
- **Innovative leaders**
Re-invented story (Thatcher)
- **Visionary leaders**
Create a new story (Jesus)
- **Expert Leaders**
Lead through their work (T.S. Eliott)
- **Inclusive Leaders**
Draw people into their circle (King Jr)

Five myths of leadership were explored:

- ❶ Leadership is a rare skill
- ❷ Leaders are born, not made
- ❸ Leaders are charismatic
- ❹ Leadership exists only at the top of an organization
- ❺ Leaders control, direct, prod and manipulate.

Dave left the group with the challenge that we make leadership development a more visible priority in the OHHP. In so doing, communities might address these KEY QUESTIONS...

- How do we support, nurture and share leadership within our community partnership? Organization?
- How do we know what our leadership capacity is?
- What are we doing to engage our Board of health members?
- What are the key leadership indicators?
- Should we be talking about followship?
- If we can't see it, how do we measure it?

"Give a person a fish and you feed them for a day."



"Teach them to fish and you feed them for a lifetime."



"Let them stock the water with fish, and they feed a community for life."
(Unknown)



@heart

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A Newsletter from Ontario's Heart Health Resource Centre

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@heart is published regularly to provide up-to-date heart health news from around the province for anyone who is interested in heart health promotion. The status of communities implementing heart health programs, developments at the Ministry of Health, heart health news from across Canada, and information about useful resources will be reported in @heart.

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