

The focus of this issue is on Heart Health Sustainability.

In February, 1998 following on the heels of the Ontario Heart Health demonstration phase, the Ontario Ministry of Health confirmed 5 years of funding to 36 community heart health coalitions across the province. This provincial initiative is known as the Ontario Heart Health Program (OHHP). One requirement of the funding is that each community partnership complete a Sustainability Plan with their Activity Plan beginning in 1999-2000. The Heart Health Resource Centre is providing support to this process through:

- ♥ A "Planning for Sustainability" workbook;
- ♥ 8 regional HHRC Sustainability workshops;
- ♥ Access to a team of advisors and consultants, as needed;
- ♥ Research articles, available at the HHRC, on sustainability, generated through a literature search; and,
- ♥ This resource that summarizes the workbook.

Sustainability... means continuation.

Four components of community work are related to this continuation:

1. **The Issue** – of heart health on the agenda's of the public, the decision-makers, and the community partners.
2. **The Programs** – that communities are planning, implementing and evaluating.
3. **The Behaviour Changes** – that people have already made.
4. **The Partnership** – that supports the activities and contributes to the behaviour change process.

Concepts Related to Sustainability

Sustainability is complex, as is heart health. To better understand some of the background related to each, and create a context for further details to come, some related concepts have been identified and briefly described. These include:

1. **Component Specific Concepts** – as described above.
2. **Diffusion** – the general process of spreading innovation from one setting or individual to another.
3. **Leadership**
 - Project Leadership**
 - Animators
 - Facilitators
 - Champions
 - Program Leadership**
 - Peer Leaders
 - Role Models
 - Champions
4. **Resource Considerations**

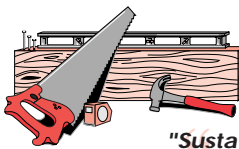
A resource is any source of aid or support that enhance's ones ability to deal with a problem or situation. Resources can take the form of human, financial or material.

Types:

 - Formal
 - Volunteer
 - Informal
 - Shared
 - Situational

Strategies include:

 - Soliciting Support
 - Soliciting Funds



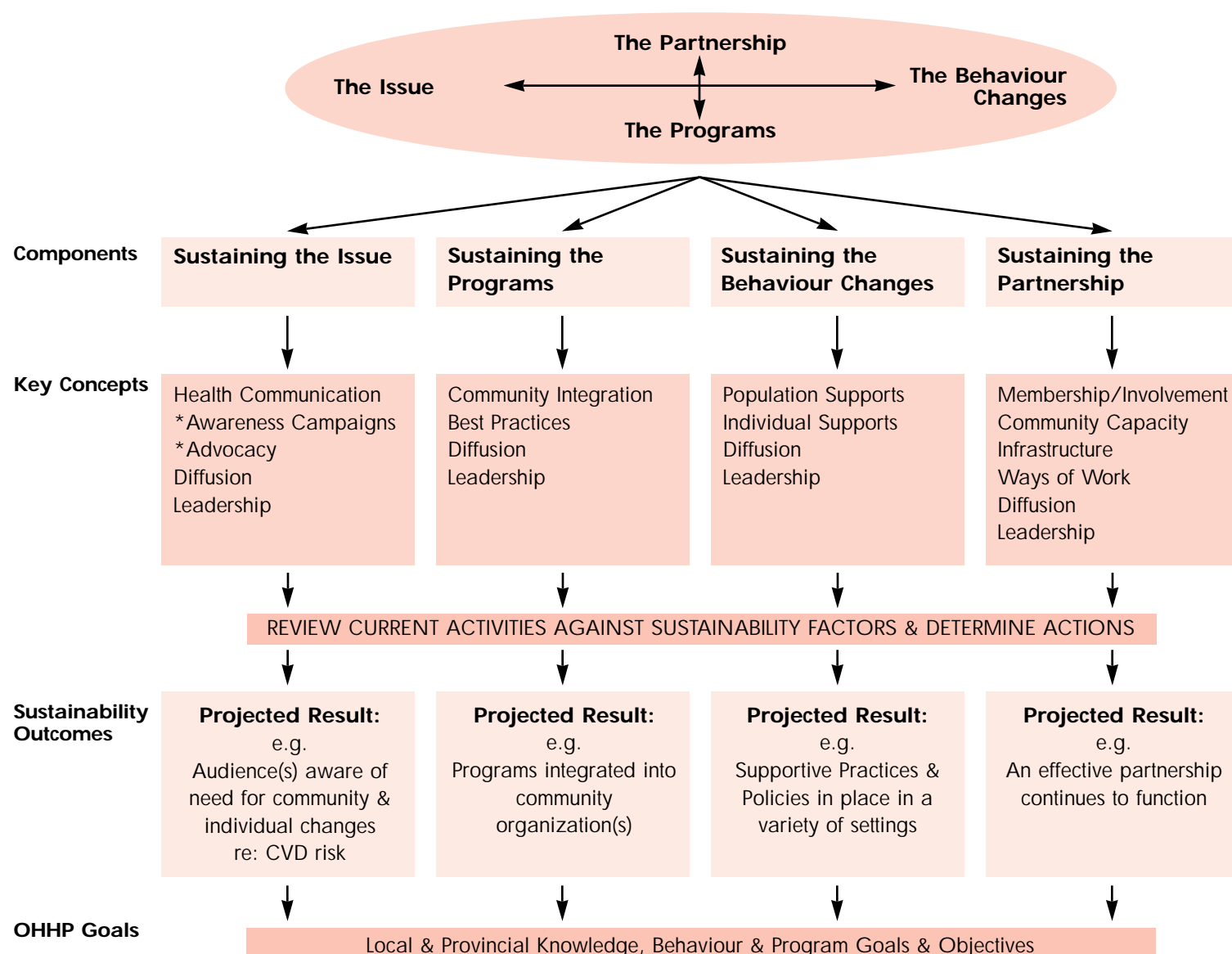
*"Sustainability is essential to our society,
and is the number one intent of planning."
Canadian Institute of Planners*

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The Heart Health "Planning for Sustainability" Model

Figure 1: The Heart Health Sustainability Model



Reasons Why Sustainability May Not Be Feasible

- A certain degree of implementation is necessary before efforts towards sustainability are reasonable.
- A program may need others so cannot stand-alone.
- A program may have a natural "life span" or "shelf life".
- The need for the program no longer exists.
- Technical expertise for the program is no longer available.
- Program may challenge local values to the extent where further implementation is not warranted.
- Resource needs for the continuation of the program are greater than the community capacity to provide and no alternative resources available.
- It may be necessary to set priorities among all activities that are potentially sustainable and therefore not possible to address all simultaneously.

Guiding Principles for the HHRC Sustainability Project

General Principles...

1. "Community sustainability begins, and continues, at home. The initiative, the leadership, the willingness to work cooperatively towards a shared vision, must come from within the community itself; it cannot be imposed or directed from outside". (Ontario Roundtable on Environment & Economy)
2. Sustainability is an important element of the process of behaviour change.
3. Sustainability is essential to successful health promotion programming and is a key component of planning.
4. Sustainability is possible, probable and desirable.
5. Planning for sustainability throughout the project will enhance its implementation.
6. There is a strong history and many examples of sustainability available in other disciplines (e.g. sustainable communities / environmental movement) that can inform the process of applying it to heart health.
7. Various approaches to sustainability include an element of resource generation. This broad term includes materials, time, other in-kind contributions, and is not exclusive to and may not even include the procurement of actual money.
8. Sustainability can be directed at local, regional, provincial, and other levels.
9. Evaluation is fundamental to sustainability in that only effective elements of a community project should be considered for sustainability and effectiveness needs to be determined by an assessment of how things are working (process evaluation) and progress towards achieving established goals (outcome evaluation).

Principles Specific to the OHHP...

1. Each community may address sustainability in its own unique way. There will be variety in the types, content and scope of the sustainability component of a community's plans.
 2. Sustainability includes a focus on sustaining the heart health issue, programs, behaviour changes and partnership.
 3. Sustainability is both a process and an outcome.
 4. Yearly program planning for the Ministry of Health (MOH) does not require a separate sustainability plan but rather a sustainability component is expected to be integrated into annual plans beginning with the plan for year 2000/2001.
 5. There are many community organizations that address heart health issues as part of their mandate making it more likely that sustainability is possible. Many of these partners address sustainability within their own organizations. The collective process for heart health may need to acknowledge and blend these organizational differences in approach.
 6. One of the primary intents of providing the current OHHP funding is to assist sites in leveraging additional community resources and supports.
 7. In selecting OHHP initiatives / programs from "Best Practices", the need for the evaluation of programs to determine effectiveness may be a shorter process, thereby speeding the sustainability process.
 8. A certain degree of implementation will be necessary in order for a partnership to be ready to discuss and plan for sustainability.
 9. Although this sustainability model was developed for the OHHP, it will have applicability to other health promotion programs in Ontario.
 10. Components that are sustained in each heart health project may look different than they did during the funding phase (e.g. be less resource intensive, or change in the approach taken such that programs beginning as educational ones evolve into policy based activities).
 11. Not all programs warrant sustainability efforts.
 12. Many partners are involved in each community and this diversity of needs, mandates, and direction should be accommodated for locally.
 13. Sustainability planning is based on the assumption that funding will not be available after March of 2003.
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The Planning Process for Sustainability

The following description and schematic outlines 6 steps in the "Planning for Sustainability" process. In applying these to each project activity, it is recommended that the Partnership aspects be done last so the Projected Result for that area is determined based on the activities.

Step 1: Assess for Effectiveness

Annually, review current activities of the community heart health project in order to plan the coming year's slate of activities. Before an activity is considered for sustainability it should be identified as effective. This evaluation for effectiveness will be based on progress towards locally set goals and objectives and other effectiveness / evaluation factors established by the community.

rankings specific to their local context.

- Some activities may be comprehensive, so more than one Set of Factors could be reviewed.
- The Factors can be found in the section dealing with each separate Component of Sustainability. (see pages 6-12)

Step 2: Determine Slate of Activities for Coming Year

Decide for the coming year, what activities you will continue to undertake, and include any new ones that might be added. Some may be dropped from the current slate as well.

Step 5: Determine Actions for Coming Year

Determine, for each activity to be sustained, what actions should be taken in the coming year in order to get closer to the Projected Result(s) selected for that activity. Those Sustainability Factors that were not rated high in the review process will be helpful in determining what actions will be most useful.

Some activities, that ranked high in many important factors may be ready for direct work towards sustainability now.

Step 3: Determine Sustainability Projected Result(s)

From those activities decided on for the coming year, some activities may be new or not yet effective enough to warrant work towards sustainability. For these, identify what actions should be done in the coming year to improve them.

Step 6: Implement the Actions

There may be Key Concepts that the community partnership may want to consider becoming more familiar with in operationalizing the actions. Pursue these and work towards implementing the actions over the coming year.

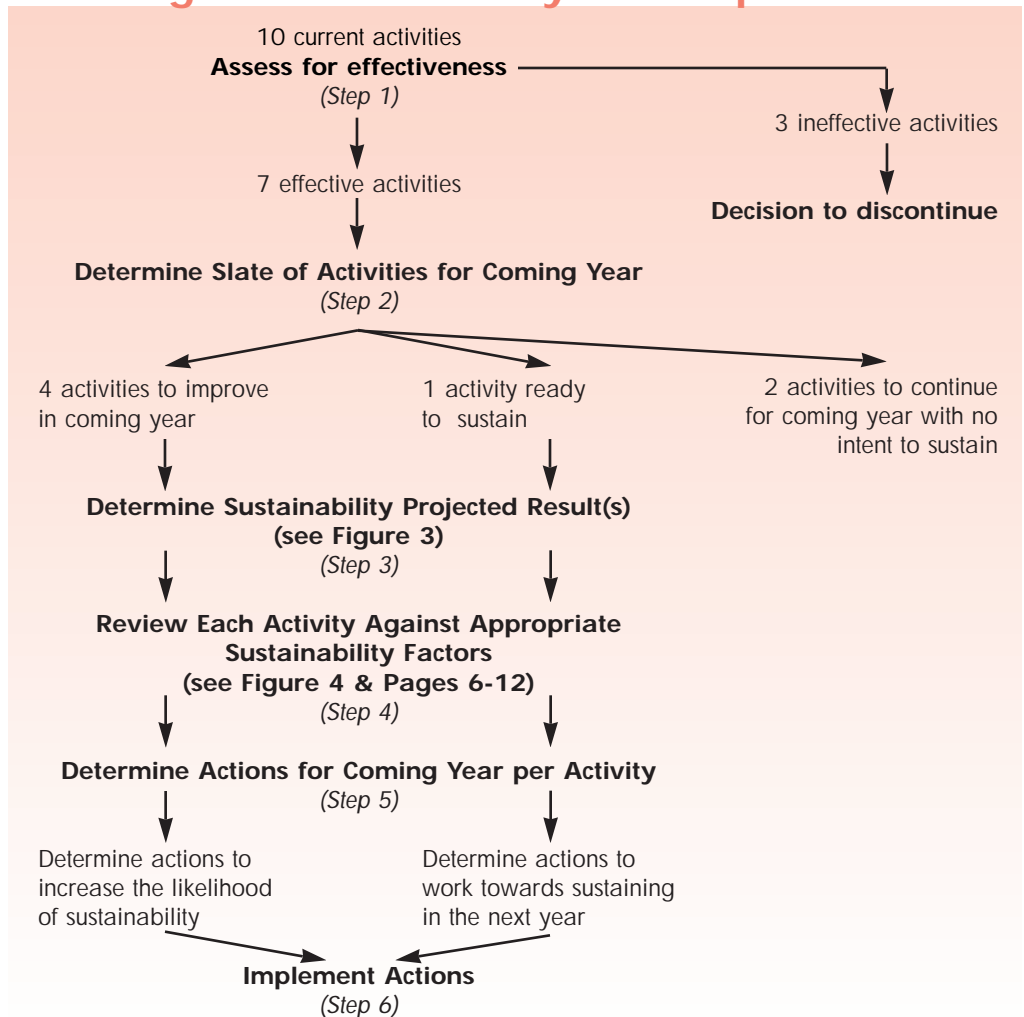
For activities that are effective at this point, and that seem to warrant progress towards sustainability, determine what the long-term Projected Result(s) is / are for each activity. Figure 3 summarizing the Projected Results should assist with this.

Step 4: Review Each Activity Against Appropriate Sustainability Factors

Once it has been determined what the outcome of sustainability efforts should be for each activity, assess each according to the suggested set of Sustainability Factors that are relevant to each activity (shown in Figure 4: Which Set of Factors?). Not all activities, even those that are currently effective, are always suitable for sustainability. See "Reasons Why Sustainability May Not Be Feasible" on page 2 for details.

Figure 2:

Planning for Sustainability: A Sample Schematic



- Communities may want to review the lists of Factors to make changes or set priority

Figure 3: Suggested Projected Results

Component of Sustainability	Suggested Projected Results
"Sustaining the Issue"	<p>As a result of being more aware of the issue of heart health or heart disease, it is more likely that:</p> <ul style="list-style-type: none"> • the public will . . . take the next step towards lifestyle changes and be supportive of community / system heart health policy shifts. • decision-makers will . . . be open and willing to shifts in practices and policies that create supportive environments for heart health which in turn help sustain the work of the local project & support the local project as a champion for others. • local partners will . . . be open to a proposal of integrating a program or initiative to address heart health and stay involved, in order to continue collective and individual efforts to address the issue.
"Sustaining the Programs"	<p>Each program could be sustained in one of the following ways (or a hybrid of the four is possible):</p> <ul style="list-style-type: none"> • Independent Model – an organization / agency / individual undertakes the program on their own (often by an integration process). • Cooperative Model – a single agency administers the program and other organizations cooperate as needed in the delivery. • Coordinated Model – joint planning of programs occurs but individual partners implement various pieces. • Collaborative Model – the current or adapted partnership continues to work together on the program with common goals and shared responsibilities.
"Sustaining the Behaviour Changes"	<p>Local projects will have established up to four kinds of results:</p> <ul style="list-style-type: none"> • Healthy public policies and practices (formal & informal) are in place addressing heart health three risk factors. • Physical structures are in place (e.g. safe bike paths, non-smoking environments). • Strategies (motivational, processes of change and self-efficacy) that support behaviour changes and relapse prevention are included in resources and programs as they are delivered. • Available / accessible programs and supports (professional help lines, health professional support services, self-help groups) are in place related to each of the three risk factors for support to individuals after they have participated in a program.
"Sustaining the Partnership"	<p>Status Quo – existing partnership is maintained.</p> <p>Network – a forum primarily focused on sharing what is happening in the community with respect to heart health programming.</p> <p>Consultative or Advisory – partnerships are formed to receive stakeholder input around change or to gather ideas for future programs, practices and / or policies.</p> <p>Contributory – formed to benefit the work of a community or community organization; however, the funders set the objectives and the partners can agree to them or not.</p> <p>Coordinated – activities are planned with some discussion with partners to address gaps and avoid duplication of service.</p> <p>Cooperative – work-sharing partnerships where one partner retains control but the others can influence decision-making and programming is accomplished with efforts of more than one partner.</p> <p>Collaborative – formed to share resources, risks and decision-making.</p> <p>Coalition – collective action, often for advocacy purposes.</p> <p>Independent Programming – no connections among agencies.</p>

Figure 4: Which Set of Factors?

Type of Activity	Component of Sustainability Factors to Consider
<ul style="list-style-type: none"> • Communication campaigns • Advocacy activities 	<p>"Sustaining the Issue" Factors</p>
<ul style="list-style-type: none"> • Educational programs • Skill development programs 	<p>"Sustaining the Programs" Factors</p>
<ul style="list-style-type: none"> • Activities that work towards supportive environments / policies 	<p>"Sustaining the Behaviour Changes" Factors</p>
<ul style="list-style-type: none"> • Community mobilization activities • Professional development activities 	<p>"Sustaining the Partnership" Factors</p>



The Four Components of Sustainability

"Sustaining the Issue"

An issue is "a 'point or matter', the decision of which is of special or public importance."

To address heart disease, many years of programming will be required. If continued work is to be sustained, the issue of heart disease needs to be kept alive and important to:

- the public
- community decision-makers
- local partners

"An important strategy in enlisting influential people is to educate them as much as possible about your issue, and to establish yourself as an expert who can be helpful to them. If they see you as someone they can come to for reliable information, they're far more likely to be helpful to you. The same is true for policy makers, who might be the same people, or who might be legislative committee staffers, scholars, or members of think tanks or policy organizations."

Community Tool Box, University of Kansas.



Key Concepts

Health Communication – "a key strategy to inform the public about health concerns and to maintain important health issues on the public agenda. The use of the mass and multi-media and other technological innovations to disseminate useful health information to the public, increases awareness of specific aspects of individual and collective health as well as the importance of health in development". *World Health Organization*

Diffusion – "Make the Case" to recruit the support of the public, the decision makers, and local partners.

Leadership – identify the internal Project and Program champions to promote and sustain the issue.

"The goal of sustaining the issue is to convince people and institutions to make long-term commitments to heart health."

Craig Levebre

Factors for "Sustaining the Issue"

Health Communication Factors

1. The issue has been determined within the context of current local need.
2. Dissemination of the "stimuli" (messages, information, presentations) to intended audiences, occurs frequently and consistently, over a sustained period.
3. No or low cost health communication strategies are in place to increase awareness of the issue with the intended audience.
4. Low or no cost media advocacy strategies are in place to affect decision makers and partners.
5. Information is provided to the audience(s) on how work to date has resulted in some progress towards goals.
6. Communication related materials and resources already developed within the community are available to the community (e.g. provincial campaigns) are being used.
7. Credibility as a resource on the issue has been established by providing accurate, relevant, and timely information.
8. High reach for costs incurred.



Diffusion Factors

1. Sufficient quantities of communication / awareness-raising materials are created during the Heart Health funding period, or are available through member agencies of the partnership to allow for dissemination / distribution of materials in the future.
2. Partners are prepared to include the promotion of the issue in their work, ideally by using consistent messaging.
3. Participants of programs become engaged in the promotion of the issue.
4. Media who are prepared to promote the issue have been provided with relevant, timely tools that can be used in the future, even if a partnership does not continue.
5. In making the case for the issue to a particular audience, aim for two of the following three factors:
 - the messenger is liked;
 - the recipient is supportive of the cause; and
 - the recipient has the capacity to meet the request (e.g. the time, funds, materials).
7. Promotion of the issue is part of action plans for heart health activities.



Leadership Factors

1. Opinion leaders are in place who are prepared to act as spokespersons for the issue.
2. Effective messengers are in place to promote the issue to the respective audience(s).
3. Commitment or action to training community members in developing communications campaigns and media advocacy is in place.





The Four Components of Sustainability

"Sustaining the Programs"

A program is one individual activity within the overall Project that may stand alone (e.g. Breakfast Program) or be part of a larger initiative (e.g. a set of workplace programs are part of a workplace initiative). Program sustainability means working towards the continuation of programs within the community.



Key Concepts

Community Integration – A program is integrated when one or more organizations assume responsibility for it, as the initiating agency retreats and disengages from the decision-making process and from financial and managerial control of the program.

Best Practices – it is more likely that a program will be sustained if it is based on a best practice.

Diffusion – more people are reached with a program when it is widely disseminated. Increased uptake, and therefore impact, can occur in new settings / channels or in a new geographic area.

Leadership – effective program leadership is important. As well, in working towards program integration, program champions are key.

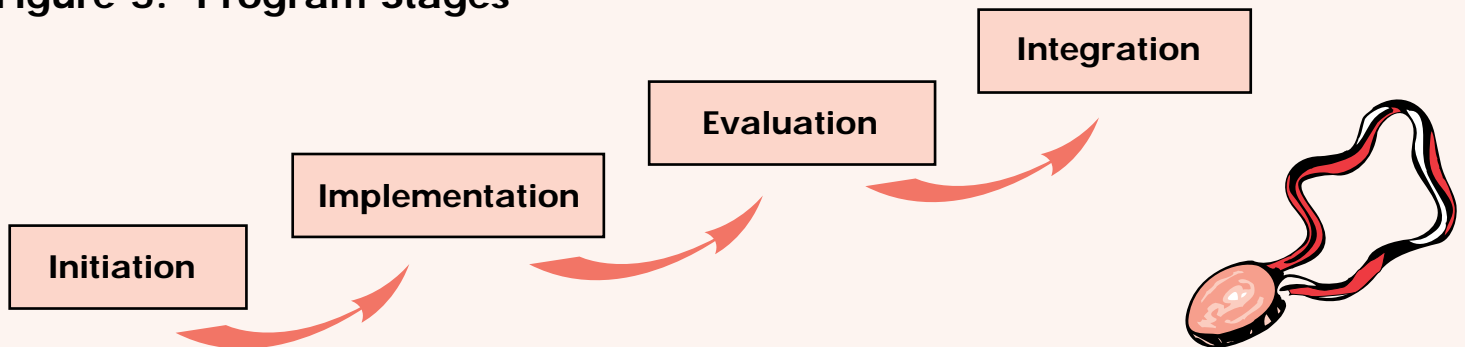
"The effective Program champion is able to cultivate, unify, and link the divergent aspirations of various people in the interest of the program."

Goodman

Program Stages

Most programs flow through a series of stages and the sustainability factors vary depending on the stage.

Figure 5: Program Stages



Factors

In reviewing programs to identify appropriate actions, consider the following:

When initiating a program...

1. The program is grounded in sound theory or is based on "best practices".
2. In selecting a program, it is better to select an existing program or adaptation of one rather than starting a completely new program.
3. The program is desired by the community and / or audience.
4. There is more than one partner involved in the program development.
5. The program is designed with a variety of alternative formats and methods of delivery that are adaptable to a variety of milieus making it easily disseminated. This makes it "three times more likely to be sustained". (O'Loughlin et al)
6. There are no other local programs serving the same need within the same audience.
7. There is sufficient time for planning for integration. The organization needs to see the value of the program so that there is a greater likelihood that the activity will be maintained. This normally requires a minimum of three years.
8. The financial groundwork for integration has been addressed early in the stages of program development.

9. A high degree of local program control is evident such that there is flexibility to customize the program as community need and capacity dictates.
10. There is a program champion. This occurs when key members of the community assume a leadership role. The champions, by virtue of their volunteer work with the program, develop and sustain a personal commitment to continuing program messages, products or services.

When implementing a program...

1. Programs use existing resources within the community, to the degree possible.
2. Programs build on the strengths found among partners, participants and their communities.
3. There is access to the necessary tools, resources, supports and training to assist with the implementation of programs.
4. The program can be delivered in the absence of paid staff. This makes it "four times more likely to be sustained". (O'Loughlin et al)



The Four Components of Sustainability

"Sustaining the Programs" continued

5. The program helps partners, especially lead partners, to achieve their individual mandates.
6. Appropriate time is invested in training partners to support programs and initiatives.
7. A health professional is involved as one source of information about the program either directly to the audience or via a 'train the trainer' approach.
8. The members of the potential adopter organization and front line staff support the intervention. This is more likely to occur if the program is not imposed from above, if it doesn't cause them more work and if they have helped create, nurture and evaluate the program.

When evaluating a program...

1. The program data being collected will be useful in convincing potential lead agencies to adopt the program and /or provide evidence for continued support from a funder.
2. Progress is made towards the majority of outcome objectives for the program.
3. Evaluation results indicate that program participants are very positive about the program, its implementation and its effect.
4. Program outputs indicate adequate reach to the intended audience and a high potential to reach greater numbers.
5. Tracking of program participants indicates their intent to stay involved in some way in the program, its promotion, future sessions or other aspects of the program.
6. There is early success, based on established objectives, combined with an expectation of future success which is firmly held by the majority of partners.
7. There is high reach and impact for cost. The program has demonstrated that the impact has a greater value than the costs associated with its delivery.
8. The participating partners can identify benefits as a result of being involved in a program.

When integrating a program...

1. The program is desired by a host organization.
2. The program is part of the existing community health system.
3. The resources necessary to maintain the interventions are in place (e.g. funding, leadership, materials).
4. Participants who have completed the program are engaged in the diffusion process.

"Premature termination of programs is costly. Organizations and agencies spent time, money, and training to initiate programs. Termination frequently occurs before outcome objectives have been met. Expertise developed in volunteers and staff may be lost to both the immediate community and others who might request information and services."

HHRC Sustainability Workbook

5. The primary program administrator is employed by a community / local organization, workplace or agency.
6. The program has a sufficiently high component of innovation to be appealing to a potential program adopter.
7. The lead organization, or potential adopter, is aware of and supports the need for the continuation of the program.
8. The organization that intends to take the lead role in the program has carefully examined its own capacity and determination to introduce and to support the program for the long term. The lead organization has enough experience with the program to assess its costs and benefits accurately.
9. There is someone in the management of the potential adopter organization who is willing and able to act as the program's champion and strongly advocates for the continuation of the intervention within the organization.
10. There is a strong connection between the potential lead agency and the program (i.e. the intervention is consistent with the mandate, objectives and routines / operations of the lead agency).
11. The potential adopter organization is not a new entity that is still setting its own direction, priorities and program areas of emphasis, but rather a mature organization. Mature organizations have a clear mandate, established resources and multiple layers where programs can be housed (e.g. school system).
12. The potential adopting organization has a history of collaboration.
13. The potential adopting organization is provided with incentive(s) to encourage their participation in the continuation of the program (e.g. program materials, enhanced community profile).
14. The timelines of the adopter fit with the program evolution and transfer.
15. The adopter organization is provided with clear and thorough manual / guidelines for implementation and training if necessary.
16. There is some carry over of personnel from phase one to the next phase, if only as a consultant / advisor / mentor.
17. An intentional process of gradual turnover of project responsibility to a local person, committee, or organization has occurred or is occurring.



The Four Components of Sustainability

"Sustaining the Behaviour Changes"

Behaviour change is a process described by Prochaska and DiClemente as having 5 stages:

- Precontemplation** – not thinking of changing
- Contemplation** – thinking about changing but not quite ready
- Preparation** – getting ready to change
- Action** – making the change
- Maintenance** – successfully maintaining the change.

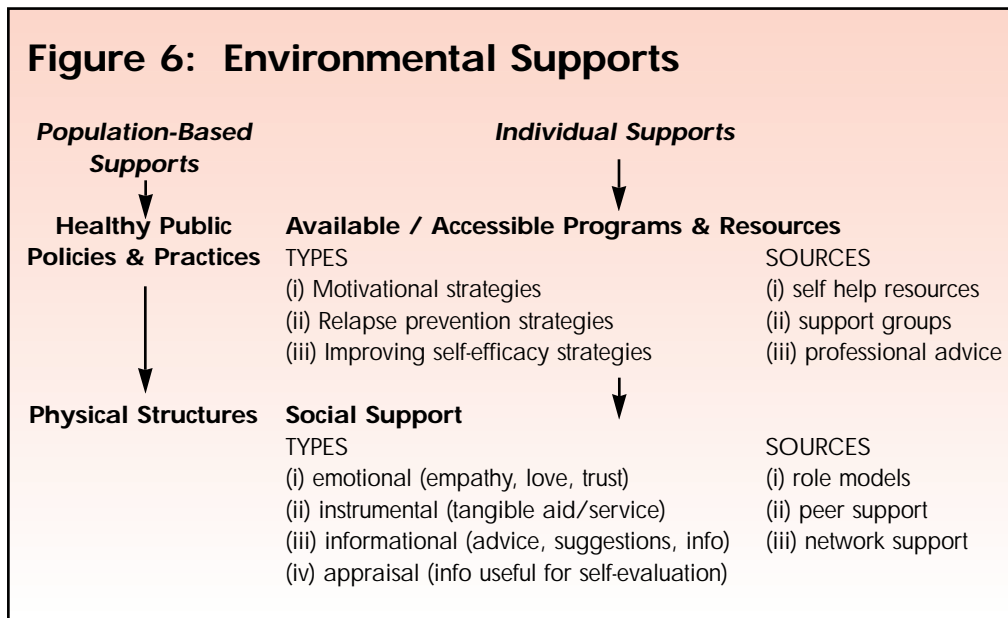
People attempting behaviour changes often do so via:

- programs
- self-help strategies

To support them, both **population-based** and **individual** supports will be useful.

People who participate in community programs are usually in Preparation or Action stage. For their behaviour changes to be sustained, a variety of environmental supports should be available to them.

Key Concepts



Factors

Population-Based Support Factors

1. Healthy public policies and environmentally supportive outcomes are included in all appropriate programs.
2. There is broad based community participation in the development of healthy public policies and environmental supports.
3. Opinion leaders and champions have been identified to advocate for healthy public policy changes.
4. Local government shows commitment to publicly affirming the importance of heart healthy communities and their resolution to be one.
5. Delivery of all programs reinforces supportive environments.
6. Initiatives result in positive changes to the physical infrastructure of the community (e.g. walking trails).

Individual Support Factors

1. Behaviour maintenance resources (self-help information – pamphlets, Internet etc.) are developed for the on-going use of program participants.
2. Behaviour maintenance supports (professional help lines) are developed and / or promoted for the on-going use of program participants.
3. "Train the Trainer" leadership approach is used in program delivery such that on-going leadership is available for the program.
4. Peer support models are developed during the program initiation phase.
5. Peer leaders are recruited from previously held behaviour change programs.
6. Behaviour maintenance support strategies are included in programs and resources:
 - motivational support strategies (goal setting, contracting, self contracting);
 - relapse prevention strategies (self-control, environmental restructuring, stimulus control, reinforcement management, counter conditioning, relapse prevention training, feedback and recognition);
 - self-efficacy strategies (gradually increasing difficulty, creating manageable components, recording successes, reducing anxiety); and,
 - helping clients identify or access sources of support either in ongoing interpersonal relationships, professional relationships, or self-help groups.
7. Social supports are identified in the community:
 - role models;
 - peer support opportunities; and
 - network support.

"Community-wide behavioural change must be sustained over a long period of time before any significant decrease in actual morbidity or mortality can occur."

Shediak-Rezkallah



The Four Components of Sustainability

"Sustaining the Partnership"

Ontario community heart health partnerships are known by many names – coalitions, networks, coordinating committees and work groups to name a few. They are referred to here, generically, as partnerships and, imply a working towards a set of shared outcomes.

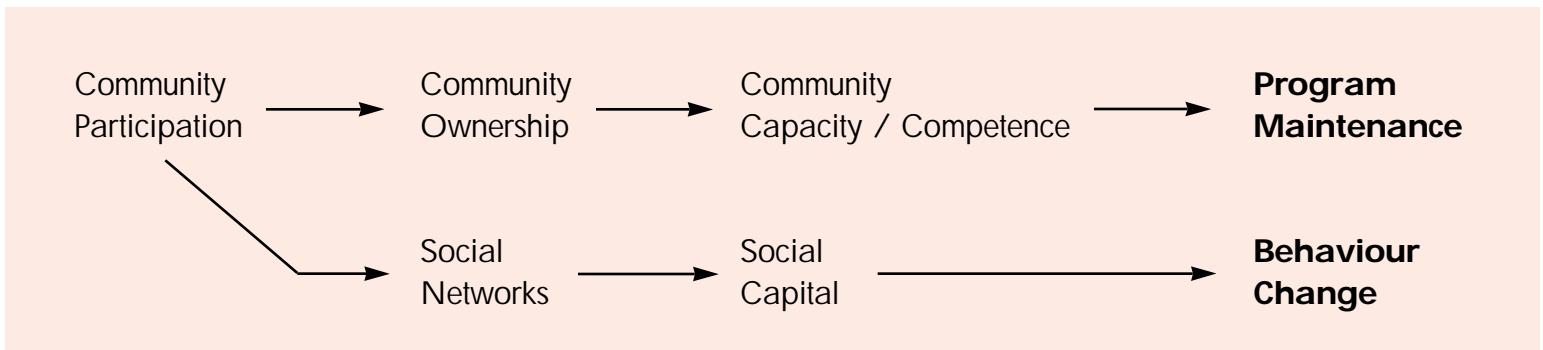
Sustaining a Partnership will...

- a) provide support to the activities via strategic direction, management and coordination;
and
- b) providing support to the behaviour change process via involving the community which leads to sustained change, as illustrated in Figure 7.

"The success of specific heart health initiatives has consistently been linked to the nature and extent of community involvement. . . . The long term success and sustainability of local heart health projects depends on boards of health and their community partners developing processes for working together".

Heart Health Program Application Guidelines,
Ministry of Health, June 1997

Figure 7: The Partnership as a Support to Behaviour Change



Key Concepts

Membership / Involvement - Recruiting members from many sectors as well as the general public, with a specific eye to what the needs of each member are.

Community Capacity - Effective partnerships are more likely to be sustained than ineffective ones. Because planning, delivering, evaluating and sustaining a comprehensive mix of heart health activities can be complex, a variety of diverse skills will be required. Working towards building these skills in a community will build confidence, competence and capacity.

Infrastructure - A form of infrastructure will have been developed in each community during the funding phase. Regular reviews of this will enhance effectiveness. To sustain an infrastructure, those aspects that have worked well can be combined with the needs of the future so a suitable structure emerges.

Diffusion - Building on social networks by engaging "influencers" will be important to sustaining both partnerships and the heart health issue. "Influencers" are people whose opinions are respected, whose insights are valued, and whose support is almost always needed to make any big changes.

Leadership - Effective leadership instills confidence in the group and results in a greater quantity and quality of outcome. This makes it more likely that current partners will stay involved for the next phase.

(i) Shared leadership - spreads out the workload, balances power in a group, enhances continuity and provides a variety of styles and skills.

(ii) Situational leadership - the appropriate leadership style depends on the combination of "willingness and ability" such that the more willing (commitment) and able (capacity) the group, the less directive / task-oriented the leader need be.

Planning for succession of leadership into the next phase will be important for sustainability.

"Individuals and organizations do not become members of a partnership without some direct, perceived benefit to themselves, no matter how altruistic the cause might be."

HHRC Sustainability Workbook

"When shared leadership occurs, people approach problems in collaborative ways, engaging each other in defining the work to be done, facilitating interaction, and sustaining action so that goals can be realized. People come to focus on the work itself rather than on who has authority to do it. Shared leadership directs; it does not dictate."

Ontario Prevention Clearinghouse



The Four Components of Sustainability

"Sustaining the Partnership" continued

Factors

In reviewing your Partnership, consider the following factors:

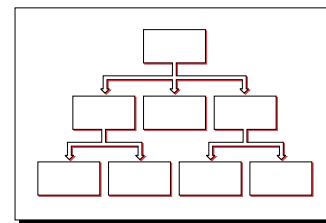


Membership / Involvement Factors

1. Community partnerships are developed in the earliest stages of the project / program planning and implementation.
2. A large, diverse network of individual and organizational involvement.
3. The partners perceive benefits from being a member of the group (i.e. benefits override costs associated with participation).
4. Partners are committed to continuing the partnership based on an understanding of the benefits of involvement.
5. Partners continue to have the time, interest and desire to participate.
6. Partners understand why they are part of the partnership and have something to contribute.
7. There is a balanced and diverse membership from community volunteers, plus volunteers, and staff from partner organizations.
8. There are more bi-lateral and / or multi-lateral partnerships than were in place when the heart health project started.
9. Members support the partnership by recruiting others to participate.
10. Members, who may be the end users of an activity, or who the partnership will directly affect, are included. Their involvement in the partnership will help with ownership later on as well as in the diffusion.
11. Members are involved in other community activities.
12. Influential people in the community partnership have a positive effect on engaging others to become involved and affecting change.

Community Capacity Factors

1. There are written objectives for developing community capacity.
2. The capacity of partners is enhanced, where necessary, especially as this applies to heart health and their own organization's work. This could apply to programs as well as partnership development activities.
3. Training opportunities for partners are:
 - connected to other activities within the project and to the work of the individual partners;
 - based on a needs assessment so the most essential training topics are chosen thereby reducing the chances of over-training; and
 - provided through a variety of capacity building opportunities, (not everyone learns in the same way, so a variety of delivery styles and methods is recommended).



Infrastructure Factors

1. Roles and responsibilities are shared so there is decreased dependency on any one partner.
2. Roles and responsibilities are clearly defined.
3. There are clear lines of accountability.
4. A simple, flexible infrastructure has evolved.
5. The infrastructure is cost effective to operate.
6. There are reciprocal links throughout the overall network with other networks within a community (e.g. CAPC, FOCUS, Tobacco Councils, Active Living Networks).

"Influential people can provide an immense boost to the work we do in improving our communities. The simple fact is: to make real changes, we need to involve the people with the power. By understanding who they are and how to include them in our efforts, we greatly improve the chance that our work will succeed. And that puts us on the road to becoming influential people ourselves - the kind people come to when they want to get things done."

Community Tool Box. University of Kansas.



The Four Components of Sustainability

"Sustaining the Partnership" continued

Ways of Work Factors

The partnership is more than its membership and who provides the leadership. How the group conducts business is a key factor in the effectiveness of a partnership and will increase the likelihood of sustaining the partnership.

1. Members value and strive for sustainability from the beginning of the project by including sustainability in their goals and objectives.
2. Community mobilization is included in the project and program goals and / or objectives.
3. Partners, within their means, agree to long term commitment.
4. The partnership tolerates diversity of viewpoints.
5. All partners are actively involved in identifying needs, setting goals, objectives, planning, implementation, evaluation, and sustainability.
6. A substantial percentage of the work undertaken is devoted to goal-related activities and progress towards goals is evident. This may effect the practices of many people and organizations, thereby enhancing sustained change within the community.
7. A relatively formal agreement on partnerships is reached early in the program.
8. There is collaborative problem solving across organizations and there is a mechanism for conflict resolution in place.
9. The partnership is flexible, able to change if things are not working and able to take advantage of opportunities if they arise.
10. There are frequent, supportive interactions between partners.
11. There is a clear and effective shared decision-making process.
12. Credit, fun and recognition is shared.

"Experience tells us that partnerships are a good way to reach long-range, encompassing goals. As a result, they are becoming increasingly important."

"The Partnership Handbook".

Human Resources Development Canada

13. Periodic assessment of partnership functioning is undertaken. (Many excellent resources exist on this topic to assist in the review).
14. Shared leadership is evident (e.g. co-chairs, rotating chairs, or change to a new chair regularly), including a sharing of power, responsibility and authority for change.
15. There is commitment to developing strong community based, citizen leadership from the beginning of the project such that the shaping and cultivation of new leaders is evident.
16. There is a continuity of leadership or at least style of leadership unless the local situation calls for significant change.

"A relatively formal agreement on partnerships, reached very early in the genesis of the project, promoted better program implementation and better program maintenance. The agreements also set the stage formally for program maintenance by including maintenance as a partnership issue."

Maurice Mittlemark

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Advisory Committee Members:

Debra Clarke	Lisa Goodman
Anne Lessio	Mary Martin Rowe
Nicky McDermott	Sylvia Page
Ellen Rukholm	Tricia Wilkerson
Sandra Zambon	

Heart Health Provincial Partners Committee Ontario Heart Health Network

Project Consultants:

Nancy Dubois	Merle Kisby
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Literature Search:

Penney Kirby

Summary Layout:

The Graffick Link Design Studio, Brantford

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A Newsletter from Ontario's Heart Health Resource Centre

@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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@heart production:
Design: The Graffick Link Design Studio, Brantford, Ontario
Editor: Nancy Dubois, DU B FIT, Scotland, Ontario
Your comments and suggestions are appreciated. Please address all correspondence to the Editor, @heart, at the above address.