

A Sustainability Planning Guide for Healthy Communities

National Center for Chronic Disease Prevention and Health Promotion
Division of Community Health



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About CDC's Healthy Communities Program

In October 2003, as part of the U.S. Department of Health and Human Services' Steps to a HealthierUS initiative (Steps), the CDC began funding communities nationwide through 5-year cooperative agreements, with YMCA of the USA (Y-USA) as a national partner. Building on successes and lessons learned from Steps, CDC broadened its investment in communities through the creation of CDC's Healthy Communities Program in January 2009.

To date, more than 300 communities nationwide have been selected by CDC to implement policy, systems, and environmental change (PSE) strategies. CDC's Healthy Communities Program works with these communities, as well as with state and local health departments and national partners, to help create a culture of healthy living while building national networks for sustainable change.

- Through the Strategic Alliance for Health (SAH), CDC's Healthy Communities Program is able to partner directly with states and communities.
- Through Action Communities for Health, Innovation, and Environmental Change (ACHIEVE) and Pioneering Healthy Communities (PHC), CDC's Healthy Communities Program works with a host of national organizational partners, including the National Association of Chronic Disease Directors (NACDD), National Association of County and City Health Officials (NACCHO), National Recreation and Park Association (NRPA), Society for Public Health Education (SOPHE), and Y-USA.

Key program elements include:

- Mobilizing national networks to provide technical support and training to communities.
- Providing funding to develop policy strategies.
- Connecting leaders and providing training on how to undertake effective policy strategies.
- Disseminating effective strategies and tools to build the capacity of partners and communities.
- Monitoring and evaluating strategies and integrating new practical approaches into the Healthy Communities scope of work.

Through these efforts, CDC's Healthy Communities Program and its partners aim to take the following community-level actions:

- Engage community members in healthful activities where they live, work, worship, play, and learn.
- Analyze local health issues to take effective action.
- Shape policies and sustainable environments that promote and sustain health and quality of life.
- Create sustainable, community-based improvements that address the root causes of chronic diseases and related risk factors.
- Learn from past efforts and look ahead to meet future health challenges.

About the Sustainability Planning Guide

Improving the health and well-being of a community is no simple task for a coalition. It takes long-term policy strategies for sustaining change in systems and environments. And it takes the necessary community and organizational infrastructure for carrying out those strategies. In short, a coalition needs a comprehensive plan for sustaining its public health efforts, one that can help it manage internal and external challenges.

The Sustainability Planning Guide is a synthesis of science- and practice-based evidence designed to help coalitions, public health professionals, and other community stakeholders develop, implement, and evaluate a successful sustainability plan. The Guide provides a process for sustaining policy strategies and related activities, introduces various approaches to sustainability, and demonstrates sustainability planning in action with real-life examples.

The sustainability approaches described in this guide were developed with the help of an advisory panel that included experts on sustainability planning and approaches (listed on pages 2-4). Specific contributions include the following:

- Y-USA drew on multiple research streams and community surveys to determine sustainability needs as well as gather sustainability stories from the field.
- The Center for Civic Partnerships (CCP) contributed a version of its 10-step process for guiding communities through sustainability planning. These steps, including tools and resources, are based on CCP's nearly 10 years of sustainability training throughout the country.
- The Prevention Institute synthesized research and practice into a process for developing local policy, which can help practitioners and decision makers achieve long-term improvements and comprehensive, sustainable change.

Introduction

Today, more than ever, community leaders understand that improving the health and well-being of individuals and families means changing health-related behaviors—and that means addressing factors that influence those behaviors. In light of changing funding opportunities and increased competition for resources, communities need to ensure that they maintain the capacity to work in partnership to identify and address public health challenges, and that their resulting health initiatives can have lasting—that is, *sustainable*—impact.

Sustainability is not just about funding. It's about creating and building momentum to maintain community-wide change by organizing and maximizing community assets and resources. It means institutionalizing policies and practices within communities and organizations. From the outset, sustainability requires an approach that emphasizes the development of a network of community practitioners who understand and can lead a Healthy Communities Movement. It also means involving a multiplicity of stakeholders who can develop long-term buy-in and support throughout the community for your coalition's efforts. These elements are crucial to ensuring lasting change and making a difference in people's lives.

What is the Healthy Communities Movement?

The Healthy Communities Movement is a growing global effort to improve the health and well-being of individuals and families, primarily through policies that sustain positive, lasting changes to local, state, and national systems and environments. In the United States, this movement is made up of thousands of multi-sector community collaborations working to develop policies where people live, work, learn, play, and worship. In addition to the CDC, the movement includes hospitals and health systems; state and local health departments; community-based, faith-based, and philanthropic organizations; schools and universities; businesses; media organizations; national policy-focused organizations; and civic and social networks.

What is Sustainability?

The Guide's working definition of sustainability is: *A community's ongoing capacity and resolve to work together to establish, advance, and maintain effective strategies that continuously improve health and quality of life for all.*

Sustainability is not just about achieving public health goals; it also relates to concepts such as social justice and socioeconomics. But to keep public health sustainability tasks clear, doable, and supported by committed partners, we encourage coalitions, organizations, and communities to focus their issues, strategies, goals, and resources on policies that aim to improve health and well-being. They should consider linking with local groups working outside public health (e.g., transportation departments, parks and recreation departments) whose efforts complement their own.



Who Should Use This Guide, and Why?

For simplicity's sake, we will be referring primarily to your *coalition*—a collection of individuals and organizations working together to achieve specific goals. But the Guide is for everyone working to create sustainable, healthy communities. This audience includes, but is not limited to: community leaders; coalition members; national, regional, and local health organizations; state and local health departments; businesses; and non-profits.

The Guide can help your coalition:

- Develop a hopeful, yet realistic, vision of a healthier community.
- Identify common issues, and organize local resources accordingly.
- Connect people and organizations with one another.
- Anticipate and better prepare for changes in your coalition, organization, or community.
- Define what sustainability means to your effort, and what parts of it should be sustained.
- Proactively develop milestones to gauge the effectiveness of your coalition, organization, or community effort.
- Clarify policy strategies and activities in a formal action plan.
- Develop a sustainability plan to explain how these efforts will be maintained in the long run.
- Establish evaluation practices for determining the effectiveness of your coalition's organizational and policy strategies.

Why is it important for coalitions to develop a sustainability plan for their work?

Developing a plan is a critical part of the sustainability process. A plan can help your coalition:

- Obtain input and buy-in from coalition members and key external decision-makers.
- Define critical long- and short-term policy strategies.
- Create an organizational plan to attract and make the best use of human, financial, and in-kind resources for achieving these strategies.
- Document and organize the information you've collected: evaluation findings, lists of strategies and activities, criteria grids, effort justification sheets, budgets, and more.

Your coalition may have already begun the process of ensuring sustainability by effectively engaging partners, by structuring your coalition, and by promoting needed policy strategies. The process of creating a sustainability plan compels coalition members to define their work, and their level of commitment to it. As a result, they are able to create a vision for the coalition's future as well as a plan for fulfilling that vision. Developing and implementing a sustainability plan takes significant time and resources, no matter when you begin the process. However, it's almost always more cost effective to maintain a worthwhile strategy than to let it end and try to recreate it later.

What Are Some Core Elements for Sustainability Planning Success?

In order for sustainability to become a reality, coalitions need:

- Buy-in and support from key decision-makers as well as community volunteers.
- Sufficient leadership, funding, and channels of communications.
- Procedures in place to monitor policy (e.g., city ordinances) results through enforcement and compliance, and to modify strategies accordingly.

Coalitions will also need to:

- Create a long-term plan for ensuring the viability of the coalition or initiative.
- Develop a diverse funding portfolio, collaborative leadership, and marketing/branding strategies.
- Ensure that all community stakeholders are ready to respond to a changing environment.

How to Use This Guide

We've tried to make this document an easy-to-use blueprint for sustaining your efforts and promising policy strategies in your community. In it you'll find examples from multiple community settings (e.g., schools, work sites, local organizations, health care) as well as helpful tools, activities, and other resources. If your coalition is just beginning this process, consider proceeding through the guide step-by-step. Otherwise, find the section that best fits your coalition's needs.

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Legend

ICON	Usage
	<p>Boxes marked with this light-bulb icon present tips, ideas, and additional information on implementing action steps and may also provide Web links to helpful resources.</p>
	<p>Boxes marked with this icon describe action steps in the Healthy City Carrolton (HCC) Coalition example. They are intended to help your coalition execute its own action steps. (Note: HCC is based on a composite of several actual funded Healthy Communities.)</p>
	<p>Boxes marked with this spotlight icon describe sustainability stories from the field and can offer suggestions for overcoming sustainability challenges.</p>

SECTION 1

SUSTAINING COALITION EFFORTS

To flourish in the long run, your coalition needs to be able to adapt to changes in public health (e.g., needs and priorities, funding, leadership) and the economy. At the same time, it needs to be able to effectively monitor the results of the policies it implements, and to modify those strategies accordingly. This is particularly true if your coalition wants to serve as a leader for a broader Healthy Communities Movement.

To help sustain and make the best use of resources (e.g., funding, partners), a coalition can develop a comprehensive planning process that aligns and coordinates a variety of chronic disease policy strategies and resources, including those that address health equity issues. For example, much of CDC's Healthy Communities Program funding (for communities and partners) focuses on tobacco, physical activity, and nutrition. In the long run, however, your coalition might position its efforts to expand its scope of operations and funding efforts to address other chronic disease risk factors such as arthritis, diabetes, and injury. The coalition also should include efforts to address health disparities in its overall sustainability plan.

Coalitions can increase its long-term changes for success by creating a sustainability plan. Such a plan can enable it to diversify or expand the scope of its policy strategy goals, funding, and membership. In general, this broader plan will require a review and possible expansion of mission and vision statements, organizational structure, policy-strategy goals, objectives, activities, resource development, and timeline for completion. It can also require making connections with more community leaders and partners, if that has not happened already.

In this section, you will learn how your coalition or planning group can develop its own sustainability plan. This process is presented in 10 sequential steps, though you can use the information to best fit your coalition's needs. You'll also find an in-depth example of how one local coalition, Healthy Carrolton City (HCC), used these steps to craft its sustainability plan.

These 10 steps integrate the issue of "how to build capacity for operational purposes" with the goal of "how to prioritize and implement policies." In practice, the sustainability planning group should also focus on organizational (strategic planning) issues and pass along critical policy strategy recommendations to the coalition for implementation. Parts of or the entire 10 steps can be applied to determining how the community and the coalition can be organized to successfully carry out priority strategies in the long run.

STEP 1—CREATE A SHARED UNDERSTANDING OF SUSTAINABILITY

Creating a shared understanding of what sustainability means to your coalition and other key community stakeholders will make planning for sustainability easier (Friedman & Wicklund, 2006). Think about it as part of your core efforts, if you haven't already. Successful long-term planning also depends on having a clear picture of a long-term mission and vision that includes aspects of your coalition's structure or policy strategies that should be maintained or improved (Lasker & Weiss, 2003). Consider expanding your definition around sustainability to include the efforts of like-minded partners and organizations; it may be work that they are already doing. However coalition members decide to proceed, consider the following suggestions:

- Determine what type of organization will best suit the needs of the coalition for the long run (For more information see Module 3. "Establishing a Home for Healthy Communities Work" on page 71). Organize your coalition structure and communication strategies to help achieve your objectives.
- Be clear about what sustainability means in the context of coalition policy strategies and activities.
- Agree (earlier rather than later) that planning for sustainability is valuable.
- Include multiple community stakeholders in the sustainability planning process.



These 10 steps to sustainability are based on the full version of the Center for Civic Partnership's Sustainability Toolkit.

Center for Civic Partnerships (2010). *Sustainability Toolkit: 10 Steps to Maintaining Your Community Improvements, 2nd edition*. Sacramento, CA: Public Health Institute. For more information, please visit: www.civicpartnerships.org/docs/publications/sustainability_toolkit.htm.



Healthy Carrolton City (HCC) is a coalition of community-based partnerships that serves all of Carrolton City. HCC's goal was to create a healthier Carrolton by supporting and developing policy strategies for sustaining change in systems and environments through a network of volunteers and partnerships that promote healthy lifestyles. HCC policy strategies and activities, which include increasing physical activity, improving nutrition, and eliminating exposure to tobacco use, focus on four sectors—community, school, health care, and work site. In 2004, HCC was funded through a 5-year cooperative agreement. In early 2007, HCC members discussed the importance of sustaining their work and creating a future vision to ensure continuation of their policy strategies and related activities. They began an initiative with the primary the main goal of creating a sustainability plan over a 6-month period. The plan would incorporate multiple partners' perspectives and levels of commitment for shared policy goals. The HCC Sustainability Planning Team was formed to oversee planning and implementation of the sustainability plan.



STEP 1: Healthy Carrolton City (HCC) Creates a Shared Understanding of Sustainability

From August 2007 to January 2008, the members of Healthy Carrolton City (HCC) participated in the coalition's sustainability initiative. They began the sustainability process by discussing the meaning of sustainability and how that applied to HCC's mission and vision (see below). They agreed on a definition of sustainability that was broad enough to include other organizations' related missions and visions, but still focused on accomplishing their policy strategies: ***A community's ongoing capacity and resolve to work together to establish, advance, and maintain effective strategies that continuously improve health and quality of life for all.***

Healthy Carrolton City (HCC) Mission

"Healthy Carrolton City (HCC) is dedicated to promoting a healthy lifestyle for all city residents by reducing health disparities, increasing physical activity, improving nutrition, and eliminating tobacco use and exposure."

Healthy Carrolton City (HCC) Vision

"A community network, built through collaboration and partnership, that works to improve the health of those who live, work, and play in this city."



STEP 2—CREATE A PLAN TO WORK THROUGH THE PROCESS

After establishing what sustainability means, you can begin developing a coalition sustainability plan. With any planning effort, thinking through the details of the process before you begin is critical. One of the first questions might be, “Who do I need to carry out the plan?”

Coordinator: The process coordinator helps to ensure that the sustainability planning timeline is realistic and appropriate, appropriate people are involved and engaged in the process, meetings occur as planned, internal and external communications are effective, and action steps are implemented.

Facilitator: If financially feasible, consider contracting with an outside resource to help facilitate some planning meetings. Some points in this process (e.g., Steps 6 and 8) require difficult decisions, such as de-prioritizing a policy strategy that someone in the planning group values, reducing staffing levels, or working through a tough political situation. Using an outside (and potentially more objective) facilitator may help reduce conflict and ensure that everyone has the opportunity to participate.

Planning Team: Forming a separate planning team focused on sustainability allows the coalition to focus on policy strategies already underway for sustaining change in systems and environments, as well as capacity-building efforts that the coalition is trying to continue (Kansas University Work Group, 2010). This team should be responsible for discussing relevant issues, making decisions, and ultimately implementing the sustainability plan. While the size of this team is whatever best suits your coalition, remember that demands for internal communication and staff support increase as the number of people involved in the planning process increases. To ensure that your effort is valued in the community, consider inviting (or solicit input from) key *external* representatives from:

- Community officials (e.g., from city hall or the local transportation authority)
- Businesses or corporations
- Nonprofit organizations or foundations
- Other groups (e.g., faith-based, recreation, neighborhood homeowner associations)
- Local, regional, and state policy-making groups

Which *internal* stakeholders are involved—and how you involve them—is up to you, as long as they meet the needs of your coalition’s planning effort and overall strategic goals. They might include:

- Executive or steering committee members
- Coalition coordinators and project managers
- Staff and volunteers



For more information on facilitator training resources:

- www.extension.umn.edu/distribution/citizenship/DH7437.html
- www.coalitionswork.com/documents/chair_or_facilitator_guide.pdf
- www.financeproject.org/special/engage/sti.cfm

Individuals selected to serve on the sustainability planning group should be engaged and committed with respect to coalition sustainability goals. They also should be comfortable with the idea that sustainability planning will be a long-term process. Remember to maintain ongoing communication with coalition members outside the sustainability planning team to keep them informed and engaged, appropriate to their position and level of interest. This can be key to developing long-term buy-in and support for your efforts.



Pioneering Healthy Communities (PHC) Itasca County, Minnesota, Builds a Solid Coalition Infrastructure to Promote Effectiveness

Our structure has enabled us to remain intact and engaged over many years. A 10-person leadership team (led by co-chairs) meets quarterly to plan and provide direction for our efforts. Each leader signs a commitment letter annually to ensure continued interest and participation. Our sub-groups are each led by a co-chair and meet monthly, or as needed. Within these groups, we create action-oriented task forces to work on specific strategies, then disband once we complete them. Our community health coordinator is a valued member of our groups.

We feel that we engage the right people in our community but are always looking for opportunities to strengthen the group. We recognize that our team members' participation fluctuates. We expect people to remain involved but respect their time and schedules. We don't meet just to meet; we also keep informed and up-to-date by phone, e-mail, and other means. One member, a state senator, is out of town quite a bit yet remains active and informed when he can't attend meetings. We don't expect every member to be equally involved in every project. To put it simply, we try to use our human resources wisely. We understand our team members' interests, skills, and other commitments and expect them to participate in activities where they have interest and can be most effective. We try to make their involvement fun; we recognize and show appreciation for their efforts. As a group, we welcome change and growth.

--Grant Frashier, Itasca County, MN—Pioneering Healthy Communities

How Long Will It Take? It's a good idea to start the sustainability planning process as soon as possible. Identifying and agreeing on a process, including a timetable is very important. When developing your timeline, consider the size and technological capacity (e.g., e-mail, Web access, use of social media) of your group. Try to ensure that each member's role in the group properly reflects his or her skills, interests, and resources. And decide when in-person meetings are essential and when virtual meetings can be used instead.



STEP 2: Healthy Carrolton City (HCC) Creates a Plan to Work Through the Sustainability Process

A sustainability planning team—members included two HCC co-chairpersons, three staff members from the Carrolton Board of Health’s Office of Chronic Disease Prevention (ODCP), and four HCC committee representatives—was formed to oversee planning and implementation of the sustainability plan. Two of the ODCP staff members were tasked with planning six meetings, with input from the other planning team members. Planning meetings were open to other HCC committee members and ranged from 15–20 people, including members and ODCP staff.

An outside consultant was hired to facilitate the meetings. (Planning team members helped facilitate various sections of each meeting). The consultant provided expert guidance on planning for selected strategies and also served as an impartial sounding board for HCC members.

The team developed this timeline for completing the HCC sustainability plan:

Month	Proposed Benchmark
August	<ul style="list-style-type: none"> Define what sustainability means to HCC members collectively. Develop a sustainability planning timeline and a structure for running meetings.
September	<ul style="list-style-type: none"> Clarify goals and context related to sustaining policy efforts.
October	<ul style="list-style-type: none"> Review and prioritize policy strategies.
November	<ul style="list-style-type: none"> Select policy strategies.
December	<ul style="list-style-type: none"> Create an action plan for sustaining each policy strategy.
January	<ul style="list-style-type: none"> Synthesize all components into a formal sustainability plan.

Each monthly meeting consisted of presentations as well as a variety of small and large group activities designed to elicit input from participants on that month's proposed benchmark. Each meeting had several recurring elements, including the following:

1. Agenda, objectives, worksheets, copies of the presentation (if applicable), and the minutes and narrative summary from the previous meeting were provided for participants. The narrative summary, which explained how that month's benchmark had been met, helped keep participants up to date on the sustainability process, especially if they had missed the previous meeting.
2. Each meeting began with a discussion about the proposed timeline, reviewing what had been accomplished and by whom, and reviewing what tasks remained.
3. Ground rules for meeting participation were reviewed.
 - No idea is wrong.
 - Everyone has the same goals.
 - O.K. to disagree.
 - Be succinct.
 - Step in and step out.
 - Be a good listener.
 - Speak one at a time, loudly, and clearly.
 - Be honest.
 - Be respectful of break times.
 - Refrain from side conversations.
4. The planning team's sustainability goals and proposed benchmarks were posted prominently at each meeting, so participants could refer to them if a question arose about whether an item fit within their future vision.
5. A flip chart was available at each meeting. If a topic was brought up that was of value but not in line with the day's discussion, the item was recorded in the flip chart and later reviewed at a HCC executive committee meeting.
6. Each meeting ended with a check-in, a time for participants to speak candidly about the sustainability plan. In addition, participants were asked to complete an evaluation worksheet (see Activity A in the Appendix on page 87). This feedback helped shape upcoming meetings.

STEP 3—POSITION COALITION EFFORTS TO INCREASE THE ODDS OF SUSTAINABILITY

Start by identifying what your coalition is already doing to plan for sustainability; some of these strategies might already be in your coalition's community action plan (CAP).

Think about current and future goals and factors such as infrastructure, operational practices, and financial resources needed to support those goals. (For a full list of other factors to consider, see Activity B in the Appendix on page 88). Assess partner relationships that support coalition efforts and identify those you may want to develop. For coalitions just beginning their plan, ask members, external stakeholders, local groups, and community members to fill out a connection map—a catalog of existing and potential community connections. (See the HCC example on page 21). When looking for support and resources (e.g., funding, in-kind support, people) to help achieve and sustain organizational or policy goals, consider using all or some of the assets and connections available. Then review the maps with appropriate individuals to find any potential sustainability connections; they may be willing to make the initial contact for you. (Be sure you get prior approval to use any newly established connections). If you're not sure what a new organization can bring to the table, find the right people from that organization and interview them to determine their interests and potential resources. Another way to use the maps is to identify gaps among particular groups in the community. On page 21 is a sample connections map from Healthy Carrolton City (HCC) that focuses primarily on policies related to the community and schools.





STEP 3: Healthy Carrolton City (HCC) Positions Their Effort to Increase the Odds of Sustainability

In developing a sustainability picture for their work, HCC sustainability planning team members talked about the current level of community support for specific policy strategies, changes/improvements that had been made, and those that were needed. The team also addressed the composition of HCC membership, discussing various relationships with stakeholders, partners, the city Board of Health, and similar organizations/coalitions working to reduce rates of chronic disease. Working in small groups, planning meeting participants were asked to develop a visual interpretation of these relationships. Participants discussed how they could build upon their successes and make changes to enhance future policy goals and efforts.

Corporate/Business

Chamber of Commerce: Provides access to work sites and is influential with policymakers. May also provide source for business and marketing skills.

Colleges/Universities

State University: Has training expertise on best practices. May assist with funding or leading evaluation efforts.

Other Community Initiatives

Local Y-USA: Potential funder, provides leadership skills, may provide advocacy guidance.

Key Individuals

Larry Smith: President of local medical association. Influential, potential for expertise and in-kind services. Could serve as media spokesperson.

Professional Associations

Local Y-USA: Potential funder provides leadership and planning skills and may provide advocacy guidance.

Government (Local, State, Federal)

Local municipal planning board: Able to influence built-environment policies and has access to experts.

School Boards/PTA

Local PTA: Many members well connected with school board. Access to other school professionals and decision makers.

Arts and Culture

Local Arts Planning Group: Could assist with strategies for communicating messages, including writing and graphic design.

Civic Organizations/Associations

Kiwanis Club: Has connections with key decision-makers and is potential source of funding; members might provide in-kind resources.

Foundations (Local, State, National, Corporate)

Local foundation: Potential source of funding or training on how to obtain funding. Could potentially serve as fiscal agent.

Faith/Personal/Ethnic Organizations

Local municipal planning board: Able to influence built environment policies. Access to experts.

Other

Community Members: Could assist with coalition leg work. Could also carry out leadership or facilitator roles.

STEP 4—LOOK AT THE CURRENT PICTURE AND PENDING ITEMS

You can start by listing all of your coalition's efforts. Then list pending items/upcoming events (e.g., pending funding, policy changes, new initiatives) that can impact continuation of those efforts. Work with members outside the planning team to ensure that you've included all pending items. It might also be helpful to list other community efforts that could complement or duplicate your coalition strategies and activities. Finally, if you haven't already, discuss how all these factors influence the current organizational structure and the potential for achieving future policy strategies, goals, objectives, or activities. This analysis can help your coalition leverage funding and partnerships—which, in turn, positively impacts sustainability success.



For more information on why coalitions and partnerships are important or sustainability, see Module 2, "Coalitions and Partnerships," in Sustainability Approaches Modules on page 65.





STEP 4: Healthy Carrollton City (HCC) Looks at the Current Picture and Pending Items

The sustainability planning team created a list of its policy strategies and activities, and reported on the relationships with stakeholders and partners listed in the last planning meeting. Meeting participants emphasized the need to continue developing partnerships with community leaders who care enough and do enough to support HCC policy efforts. The team listed existing strategies, activities, specific measures, dates, partners, status, barriers/facilitators, and reach for each of these efforts. A few HCC policy strategies and activities are listed here. A full picture and pending items list can be found in Activity C in the Appendix on page 90.

HCC Policy Strategies	Activity
Implement environmental-change strategies that promote physical activity and safety in the built environment.	<ul style="list-style-type: none"> • Build traffic-calming measures (e.g., traffic circles) to increase pedestrian safety and encourage walking. • Develop walking guides and maps to illustrate points of interest within walking distance of downtown (less than 15 minutes away). • Develop policies that support bicycle use (e.g., identify commercial and public spaces where new bike lanes and racks can be placed).
Modify and enhance work site wellness and vending machine policies.	<ul style="list-style-type: none"> • Develop a vending machine policy that supports healthful snack and beverage choices. • Develop a “healthy meeting” policy that supports healthful foods and beverage choices during all work-related meetings. • Develop “take the stairs” campaigns that include point-of-decision prompts and signs near elevators that highlight the benefits of stairway use.
Partner with the county and local organizations to develop a community food distribution policy.	<ul style="list-style-type: none"> • Create policies whereby community gardens and farmers markets distribute a percentage of their produce to local food banks on a regular basis.
Facilitate the use of food stamps at farmers markets.	<ul style="list-style-type: none"> • Discuss and implement a Food Stamp Program (Electronic Benefit Transfer (EBT) program) with city officials and local farmers markets.
Create a policy restricting sales of unhealthful competitive foods and beverages sold on school campuses.	<ul style="list-style-type: none"> • Define wellness policy options and nutrition standards based on research and model policies. • Reach agreement that the policy will align with statewide nutrition standards adopted for food served outside of the federal school meals programs. • Develop components of a draft policy. • Provide policy-education sessions with decision-makers and community members.

STEP 5—DEVELOP CRITERIA TO HELP DETERMINE WHICH EFFORTS TO CONTINUE

Focus on Money or Effort?

These important issues are linked. Most groups begin to work on sustainability because a funding source is ending. They often focus so much on replacing that funding, they don't question whether or not the policy strategy is worth sustaining (St. Leger, 2005). What is its value? Does it have community buy-in and support? Do leaders see its outcome as important? Conversely, have effective policy strategies been successfully implemented and no longer need your group's attention? Or do existing strategies need monitoring or enforcing? In addition, are there funders who will support your objectives? Do you have a case statement to promote your efforts? Asking these questions before beginning sustainability discussions can help lead to informed choices about whether a policy strategy and activity should be continued and, if so, in what form.

When developing these criteria, consider your coalition's mission and vision, how the group is structured and supported, as well as the long-term goal of each of your policy efforts. The Sustainability Planning Team should agree on criteria that will help determine the value-added benefit of each effort, and select those for which data are available.

Potential criteria include: available resources (financial, organizational, human), level of community support, evidence of strategy effectiveness, and whether a need still exists for the effort in question. (See Step 5 in the HCC example on page 25). Determine whether any of these criteria are relevant to your coalition's situation. To make the rating process easier, consider selecting only 3–5 of the most important criteria. (For more detailed instructions on how to use criteria to prioritize activities, see the Activity D Criteria Grid in the Appendix on page 93).

It is also important to ensure a direct relationship between coalition goals and the supporting objectives and activities. Objectives should be SMART (Specific, Measurable, Achievable, Relevant, and Time-bound). Coalitions should view objectives as short- or long-term strategies. For example, a coalition can fund a strategy as part of a demonstration project (short-term) to successfully make the case for a future policy goal (long-term). Or, you may fund the development of three community gardens in underserved areas, but ultimately want to create a policy distributing garden produce to local food banks in the area on a regular basis.



For SMART objective definitions and examples, see Example 1 in the Appendix on pages 96–97. For a full evaluation guide on writing SMART Objectives, visit: www.cdc.gov/dhdsp/programs/nhdsp_program/evaluation_guides/docs/smart_objectives.pdf.



STEP 5: Healthy Carrolton City (HCC) Develops Criteria to Help Determine Which Efforts to Continue

Participants were instructed to develop criteria so they could prioritize existing strategies. Participants were divided into small groups (4–5 people), with the facilitator asking questions to help them develop their criteria. Sample questions include:

1. Does the policy involve a coordinated approach to chronic disease prevention?
2. Is the policy applicable to one or more settings? Is it transferrable to other settings, sectors, or jurisdictions?
3. Does the policy seek to identify and leverage traditional and nontraditional partnerships in new or innovative ways?

Participants decided on the following criteria for choosing their top policy strategies.

1. Policy Importance

- Does this help HCC and its partners achieve their policy goals and objectives?
- Does this target the reduction of health disparities?
- What is the evidence base and potential cost effectiveness?
- What is the reach and impact?

2. Feasibility- Of sustaining the policy strategies, given the possibility of fewer resources, including:

- Limited funding,
- Limited personnel, and/or
- Limited interested by organization/coalition members, partners, or the community.

3. Evaluation

- Is there a strong base of support for the policy strategy?
- Will we be able to determine whether or not the policy is enforced?
- What environmental and policy changes were achieved?
- What milestones were achieved?
- Were partners engaged across multiple fields and sectors?
- Were strategies targeted to the highest need/priority areas?

Using Evaluation Data to Inform Your Criteria

You may be in the evaluation stage—determining whether the current coalition structure has served its purpose or if specific policies have been properly implemented or enforced and what occurred as a result of the policy. Evaluation results can help you adjust the current policy to ensure effectiveness—and make it a more likely candidate for sustainability. For example, a tobacco-free parks policy passed last year is revamped after a recent public comment period; the revised policy now includes increased funding for implementation and increased punishment for violations.

Evaluation data can help your coalition: improve implementation over time; increase accountability to funders (now and in the future); promote sustainability, and engage stakeholders. First you'll need to choose the best way of gathering needed data—e.g., interviews, focus groups, surveys, site visits? Remember, some of the evaluation data you use can come from other sources, such as, national and state surveys, and organizational and historical data. Below are a few evaluation tips to keep in mind throughout the sustainability process.

- Develop a logic model that shows how continuing strategies will help improve community outcomes. For an example of a logic model, see Example 2 in the Appendix on page 98.
- Survey coalition members and other relevant decision-makers to determine if your current organization is helping to make the most of community resources to achieve its goals.
- Instead of just counting numbers, explain an effort's return on social investment. For example, show how strategies might help save lives (Ralser, 2007). In a report by Trust for America's Health (TFAH), an investment of \$10 per person per year in proven community-based strategies to increase physical activity, improve nutrition, and prevent smoking and other tobacco use could save the country more than \$16 billion annually within 5 years (Braveman & Egerter, 2008).
- Use short-term results to make the case for or support how this strategy will have long-term benefits.
- Involve evaluators early in sustainability discussions to provide key data for decision making.
- If an effort is based on a similar activity evaluated elsewhere, those findings may help make the case for your work and sharpen decisions about which activities to continue. Consider using CDC's Community Health Assessment and Group Evaluation (CHANGE) tool to gain a better picture of current coalition activities. (For more information on the CHANGE tool, visit: www.cdc.gov/healthycommunitiesprogram/tools/change/downloads.htm.)

STEP 6—DECIDE WHAT TO CONTINUE AND PRIORITIZE

Here are some suggestions for working through this process. Think about using the criteria grid and decision-making process detailed in Step 2. Post categories and efforts on separate places on a wall. Ask team members to recommend an activity or strategy. If you agree, place it under the appropriate category; if not, set it aside. Continue until you have discussed each item. Then return to set-aside items and decide whether to continue each. Proceed until everyone agrees on all efforts. You may modify items that you decide to continue, but discuss later. Review decisions to ensure that the group is comfortable. If people hesitate, you may need more discussion. You may have missed key criteria, or some that you selected were over- or undervalued. If so, return to Step 5; revise your criteria grid by changing the criteria or scale. If you decide to continue most or all of what you have been doing, prioritize the list to ensure that you can reasonably sustain the strategies and efforts that the group values the most.

What about Revised Strategies?

If your coalition has decided which strategies to keep, you should prioritize them—putting those most highly valued first—and then identify key stakeholders to further evaluate the strategies and recommend changes, if necessary. Once recommendations are offered and revisions are identified, develop an action plan to implement these changes. For more on action plans, see “Step 9—Implement the Sustainability Plan” on page 39.

What about Strategies That Are Not Continued?

Most likely, some strategies and activities will be discontinued for several possible reasons. Some will have been completed and won't need to be repeated anytime soon (e.g., policy forum). Other activities might still be in their beginning stages, not having reached their stated strategy goals. Ending or de-prioritizing an activity can be difficult, especially if people are passionate about it. (Having a skilled, neutral facilitator can be helpful in this situation). Remember that ending a particular effort is not necessarily a bad thing, because resources can now be leveraged in a way that is more likely to meet community needs. Relish any small successes that came from the effort and note what has been learned from it. This will help guide future coalition efforts.

Whatever the reason for de-prioritizing a strategy, the coalition should take steps to formally close it out (e.g., completing an evaluation and final report). This way, there will be a record of relevant decisions and actions in case the strategy is revisited by other organizations seeking to do similar work. (See Activity E in the Appendix on page 94 to help with these sustainability decisions).

Is Our Form Following Function?

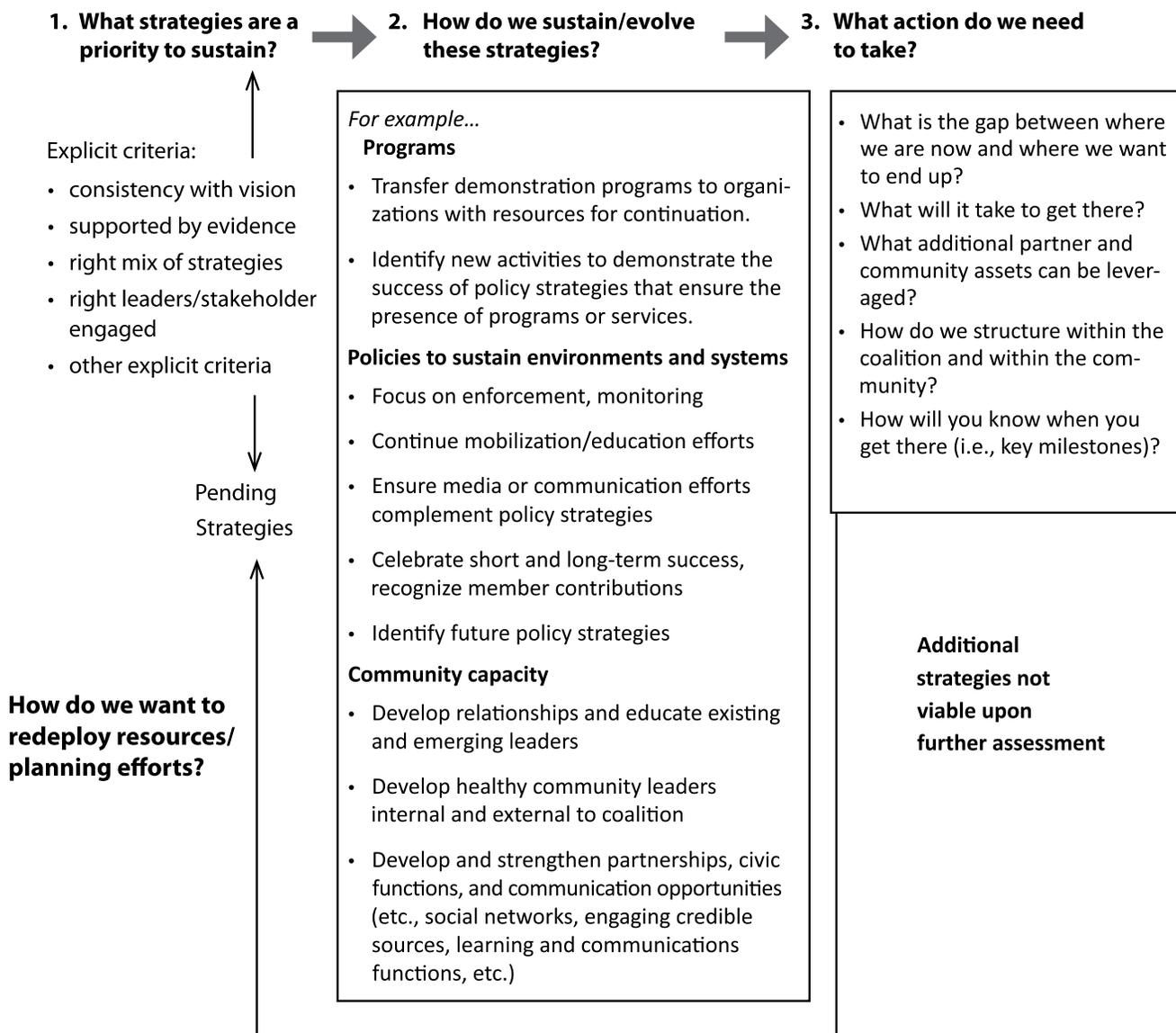
Consider whether or not the coalition is organized to most effectively engage community leaders and organizations and make the most of available resources to accomplish its goals. Ask yourself: Are there barriers or bottlenecks that are negatively impacting coalition decisions or work? Does the coalition have adequate staff support? Does the current structure help take advantage of emerging opportunities or new partnerships? Are these efforts taking advantage of other groups in the community that are doing similar work?

Asking Others to Take on Strategies

Just because your coalition designed and implemented a policy strategy, it may not necessarily be responsible for its long-term success or continuation. Coalitions often serve as community laboratories for testing innovative strategies; after deciding which should be continued, your coalition may conclude that another group is better suited to the task. Maybe it's not feasible for your coalition to sustain so many strategies and activities at once, or some don't precisely fit your criteria for continuation (see Step 5).

Spinning off strategies to other organizations that will support them in the long run is a solid sustainability goal (Goodman & Steckler, 1989). Kaiser Permanente developed a guide (see graphic below) to help decide which strategies from a funding initiative should be sustained or spun off to other organizations.

Healthy Communities Strategy Decision-Making Flow-Chart



Adapted from Wong, E., Norris, T., and Solomon, L. (2009). Kaiser Permanente Community Benefit v4.1



Activate Quad Cities Realigns Community Partnerships for Policy/Built-Environment Goals

During its 3-year lifespan, Activate Quad Cities, a Pioneering Healthy Communities initiative for the Quad Cities area in Illinois and Iowa, has partnered with the Quad City Health Initiative (QCHI), which has been active in the area for 10 years. Funded by two local health systems, QCHI focuses on data collection and various community-based health programs. Activate Quad Cities has always focused on improving public health through policy, systems, and environmental change strategies. These two approaches complemented each other but resulted in limited duplication.

As Activate Quad Cities moved ahead to create sample policies to increase workplace wellness, implement Safe Routes to Schools and school wellness policies, and organize communities around Complete Streets programs, it demonstrated sustainable results. In the spring of 2010, a QCHI wellness workgroup officially adopted the goals of Activate Quad Cities as its work plan to support policy strategies. From QCHI's perspective, this approach will create sustainable change that it can put its resources behind. For Activate Quad Cities, it creates stronger community network support and sustains its current initiatives.

--Christy Filby, Activate Quad Cities





STEP 6: Healthy Carrolton City (HCC) Decides What to Continue and Prioritize

Breaking into small groups (4–5 people), participants discussed each strategy’s potential successes and barriers, partnerships, evidence, and impact, and where they could best leverage existing resources. Below is one example of HCC’s prioritized strategies. For a full list, see Activity C in the Appendix on page 89.

Strategy	Activities	Begin/End Dates	Partners	Status	Barrier	Reach
<ul style="list-style-type: none"> • Implement environmental change strategies that promote physical activity and safety in the built environment. 	<ul style="list-style-type: none"> • Build traffic-calming measures (e.g., traffic circles) to increase pedestrian safety and encourage walking. • Develop walking guides and maps to illustrate points of interest within walking distance of downtown (less than 15 minutes away). • Develop policies that support bicycle use (e.g., identify commercial and public spaces where new bike lanes and racks can be placed). 	<ul style="list-style-type: none"> • Year 2 (August 2009) 	<ul style="list-style-type: none"> • City Community Planning & Development • Transportation Manager–City Public Works Department • Department of Transportation 	<ul style="list-style-type: none"> • One of the new eight traffic circles was installed in the city and work on the second one is about to start. The city’s Parks & Recreation department will complete the project by April 2011. • The city has entered into a contract to purchase bicycle racks for city facilities, and private property. 	<ul style="list-style-type: none"> • The bidding process has been a challenge for this project, thus requiring the city to bid a second time for the install. 	<ul style="list-style-type: none"> • 60,000

STEP 7—CREATE OPTIONS FOR MAINTAINING PRIORITY EFFORTS

After deciding what strategies the coalition will prioritize, think creatively about resource development and leveraging funding sources. Remember, continuing an effort does not necessarily mean continuing it in the same way. There are many options for you to explore!

The sustainability planning team should understand the coalition's current funding situation, including all funding sources and their timeframes. Make sure team members are clear about which efforts they want to maintain and in what form, without focusing solely on monetary aspects. Facilitate discussions that identify:

- Major supporters,
- Potential supporters of your efforts,
- Potential gaps in funding, and
- Where to reallocate existing resources.

Strategies for Obtaining Financial Resources

Consider different financial strategies that best fit with your coalition efforts. Think about striking a balance between the time and resources it takes to secure new funding and to implement existing activities. Look within the community—coalition members, an organization's board of directors, businesses, local foundations, public entities, and other community members—that may help obtain financial resources. Creating a resource development committee, hiring fund development staff or an outside consultant, or engaging in marketing and public relations efforts also may be helpful. Generally, developing multiple strategies for continuing an effort is beneficial (Marek, Mancini, & Brock, 2009). Consider sustainability from many angles, such as developing and supporting policy strategies and having the capacity to develop and sustain community-based coalitions or partnerships to prioritize and achieve policy goals.



For more information on sustainability approaches, see Modules 3-6, "Establishing a Home for Healthy Communities Work; Building Coalition Members' Skills; and Communication and Social Marketing Strategies," in Sustainability Approaches Modules starting on page 71.

Discussions from the decision-making process need to be translated into a case for support for an effort. Evaluation findings gathered earlier will help you complete Activity F in the Appendix on page 95 and outline why your coalition has decided to de-prioritize an effort, or asked other groups to continue it. When deciding who may provide continuation funding for an effort, discuss who benefits from coalition success and how to get them to help continue the effort. Involve these partners and collect data that demonstrate results.

Creative Ways to Secure Funding

Here are a few examples to consider when looking for longer-term funding sources.

- Consider whether or not your current fiscal agent is able to manage funds from a variety of sources.
- Request that coalition members add collaborative support costs into their funding proposals.
- Use fees to continue community improvements (DeJong & Davidson, 2000). For example, fees charged to rent local park facilities can fund continuing after-school recreation activities.
- Leverage existing funding sources with other local efforts. For example, ask school districts or city and county governments to financially support efforts that fall within their own programs. Also, consider partnering with the local parks and recreation department to monitor trail usage on a quarterly basis by sharing positions and resources.
- Before approaching local funders, plan how to support them to create a win-win situation.



Hamilton County Strategic Alliance for Health (SAH) Leverages Funding for a Win-Win

Hamilton County Strategic Alliance for Health (SAH) collaborates with a variety of partners for implementing policy, systems, and environmental change strategies. In-kind support for the initiative has been obtained from local municipalities, consultants, and agencies. A key partner is The University of Cincinnati (UC), including students from UC's College of Design, Art, Architecture and Planning (DAAP) who assist with GIS mapping of community food resources, physical activity venues, and open spaces. Students are also designing shelving and displays for fresh produce as part of the "healthy corner store" initiative.

This UC partnership helps communities obtain support and resources to help them succeed in this initiative, while providing an opportunity for students to gain real-life experience in the field. Furthermore, grant synergy has been created and has been extremely important to SAH's success. Having additional funding through the Healthy Kids, Healthy Communities grant from the Robert Wood Johnson Foundation (RWJF) and CDC's Communities Putting Prevention to Work (CPPW) has allowed these initiatives to expand in Hamilton County. These grants have made it possible to garner additional technical assistance from national organizations (e.g., RWJF, Prevention Institute) to promote policy, systems, and environmental change.

Become a Nonprofit Organization?

A new coalition often does not have its own legal nonprofit status; a partner agency may act as the legal entity/fiscal agent. Before deciding to become a 501(c)(3) organization, consider potential benefits and consequences:

Potential Benefits

- Coalition becomes more independent—no longer under control of lead agency.
- Coalition can decide which resources to seek and apply for funds directly.

Potential Consequences

- Coalition may compete for funding with its own member agencies.
- Time/money spent forming and managing a coalition may detract from its strategies (University of Kansas Work Group, 2010b).

Many of these issues can be addressed with the proper planning and bylaws. However, it will be important to ensure that critical partners support this strategy.



YMCA's Metro Fort Worth Seizes the Opportunity to Refocus and Reorganize Within a New Community Home

We have a newly energized group that just met for the second time to strategically refocus our efforts regarding childhood obesity and its related issues. The need to reorganize our FitFuture coalition in Fort Worth became apparent when attendance at meetings became nearly non-existent. We recognized that we had become more "event-focused" rather than visionary and strategic. Additionally, many organizations and partners were pursuing similar grant opportunities on their own, instead of working together toward a common goal. The timing was particularly crucial as the city of Fort Worth decided to eliminate its public health department and merge its services with the health department in Tarrant County (TCPH). Fortunately, TCPH agreed to serve as the community home for the coalition, and its director (also a member of the local YMCA's board of directors) agreed to serve as coach.

--Jean Carmichael, YMCA Metro Fort Worth

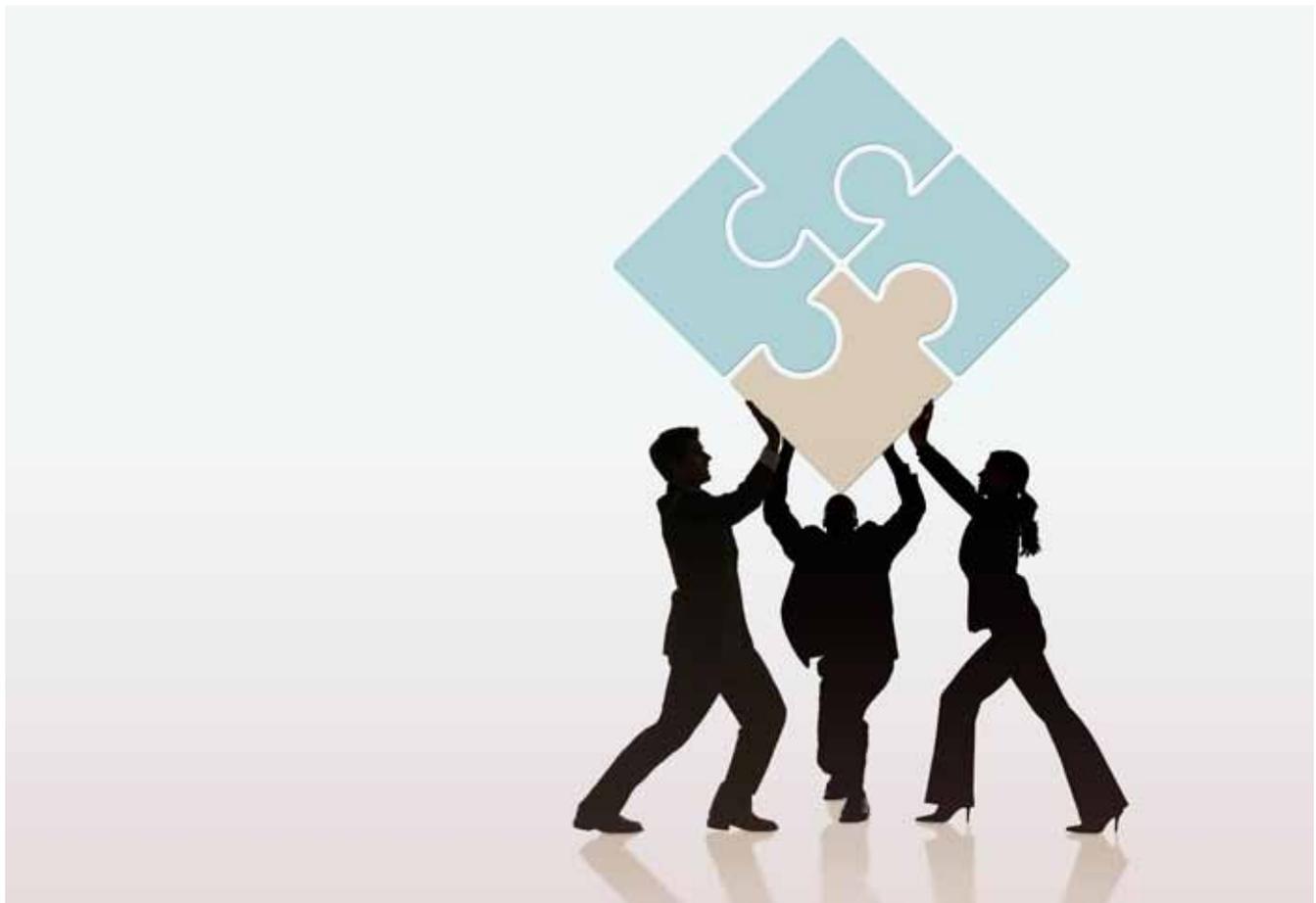


STEP 7: Healthy Carrolton City (HCC) Creates Options for Maintaining Priority Efforts

With their top three activities chosen, participants discussed current key stakeholders and resources involved with the selected policy strategies. In addition, the group discussed de-prioritized strategies and ways to close out and evaluate each one. Participants were divided into three groups, each of which was assigned one of the three prioritized strategies. Group members considered three questions:

- What cash or in-kind resources are being used to operationalize this strategy?
- What are the projected costs or resources needed to sustain it?
- Which partners could take lead on current policy strategies?

The groups then brainstormed ideas for operationalizing the financial strategies suggested for each policy strategy and activity. Below are a few examples. (For more information on financial strategies, read "Identify Specific Tactics to be Used to Sustain the Effort" under "Sustaining the Work or Initiative," at http://ctb.ku.edu/en/dtothework/tools_tk_content_page_79.aspx.)



Policy Strategy	Policy Activity	Suggested Financial Strategies
<ul style="list-style-type: none"> Implement environmental change strategies that promote physical activity and safety in the built environment. 	<ul style="list-style-type: none"> Build traffic-calming measures (e.g., traffic circles) to increase pedestrian safety and encourage walking. Develop walking guides and maps to illustrate points of interest within walking distance of downtown (less than 15 minutes away). Develop policies that support bicycle use (e.g., identify commercial and public spaces where new bike lanes and racks can be placed). 	<ul style="list-style-type: none"> Share positions and resources with County Community Planning & Development Office. Make a line item in an existing budget. Share positions and resources with County Public Works Department.
<ul style="list-style-type: none"> Modify and enhance work site wellness and vending machine policies. 	<ul style="list-style-type: none"> Develop a vending machine policy that supports healthful snack and beverage choices. Develop a "healthy meeting" policy that supports healthful foods and beverage choices during all work-related meetings. Develop "take the stairs" campaigns that include point-of-decision prompts/signs near elevators that highlight the benefits of stairway use. 	<ul style="list-style-type: none"> Request in-kind support. Seek corporate sponsorships. Find free/low-cost personnel resources (e.g., volunteers, interns, shared positions).
<ul style="list-style-type: none"> Partner with the county and local organizations to develop a community food distribution policy. 	<ul style="list-style-type: none"> Create policies whereby community gardens and farmers markets distribute a percentage of their produce to local food banks on a regular basis. 	<ul style="list-style-type: none"> Seek grants. Develop a fee-for-service structure.

STEP 8—DEVELOP A SUSTAINABILITY PLAN

This step pulls together the information gathered in the first seven steps. As previously mentioned, a sustainability plan describes a process for:

- Obtaining input and buy-in from coalition members and key external decision-makers.
- Defining critical long- and short-term policy strategies.
- Considering the type of organizational structure will best help the coalition to effectively reach its partnership, policy, and resource goals.
- Acquiring resources—human, financial, and in-kind—necessary for implementing these strategies.
- Documenting and organizing the information that has been collected—evaluation findings, lists of strategies and activities, criteria grids, effort justification sheets, budgets, and more.

How to Write the Sustainability Plan

While the planning team is responsible for developing the contents of the plan (only one or two members will actually author it), it needs buy-in from the full coalition. Therefore, all coalition members should be updated on the plan as it is being developed. Consider the plan a living document, one with sustainability strategies that can be revised as situations and funding streams change.

It's a good idea to make the plan as concise as possible and include an appendix with items documenting the entire planning process. These can help maintain institutional memory that will, in turn, help future planning efforts replicate successes and avoid mistakes. Be prepared for requests for this backup documentation.

The planning team may find it helpful to develop planning documents for two different audiences. The first document is the full sustainability plan and targets the coalition. It provides more specific operational strategies for achieving sustainability goals. The second document is a brief executive summary, or overview, to share with outside parties, such as key community stakeholders and decision makers. Generally speaking, this document provides a plain language snapshot of: (1) where you've been with respect to the sustainability-planning process, where you want to go, and how the coalition and community can help; and (2) what you need from potential funders and collaborators in order to achieve your sustainability goals (University of Kansas Work Group for Community Health and Development, 2010b). For an example of a brief executive summary to share with partners, see Example 3 in the Appendix on page 99.

**STEP 8: Healthy Carrolton City (HCC) Develops a Sustainability Plan****SUSTAINABILITY PLAN OUTLINE****I. Executive Summary**

- Organizational and/or program history (brief)
- Definition of sustainability–Step 1
- Description of who was involved–Step 3
- Summary of efforts for which sustainability is an issue–Step 4
- Goals, needs, and costs for efforts being continued–Step 6 and 7

II. Situational Analysis

- Organizational strengths as they relate to positioning–Step 2
- Current picture/pending items–Step 4

III. Criteria to Determine Program Value-Added Benefits–Step 5 and 6

- Identify what elements will be used to determine criteria (e.g., population reached, evidence of effectiveness, broad support)

IV. Sustainability Planning Goal(s)–Step 6

- Efforts to continue
- Efforts to revise and continue
- Efforts to ask another organization to continue

V. Sustainability Strategies

- Describe any organizational or structure changes–Step 7
- Recruit program champions and partners–Step 2
- Marketing and public relations–Step 2
- Funding–Step 7
- Communication of justification matrix–Step 7

VI. Action Plan by Strategy – Step 9

- Develop SMART objectives for organizational and policy efforts
- Develop action plan and timetable for strategies

STEP 9—IMPLEMENT THE SUSTAINABILITY PLAN

Now your coalition has a completed plan developed by the sustainability planning team in hand. But it's not quite ready to begin implementation. First, the coalition needs to create action plans for each organizational and policy strategy. Such an action plan would also include steps to ensure the presence of supporting organizational structures (e.g., steering committee, task groups, communication activities), and processes fiscal agent practices, resource development roles, and conflict resolution protocols, to achieve policy strategies.

Action Plans

For each organizational or policy strategy, list the steps that need to be taken, due dates, and those responsible for implementation. Steps may include talking with policy makers, writing a grant proposal, transferring a project to another organization, or reorganizing the structure of your coalition. Verify that timelines are realistic and will not leave a gap between the end of the current funding stream and the start of new one. Ensure that someone is responsible for tracking the progress of action plans and reporting back to the coalition.

Here is an example of sustaining a policy. Your coalition may have passed a competitive food policy in schools. An action plan can include monitoring compliance of that competitive food policy in two school districts and evaluating the foods being offered to see if they meet Competitive Food and Beverage Guidelines (link below). Your coalition's school wellness task group can conduct the assessment and perform random physical audits of food being sold in these schools while partnering with the city health department, which will collect sales data to track what competitive foods kids are buying by the end of the 2010–2011 school year.

For an example of an action plan, see Example 4 in the Appendix on page 100.

An outside facilitator can encourage multiple individuals to take on tasks, instead of those tasks falling on the usual staff members. If many individuals are involved, they should check with one another regularly to monitor implementation progress. As with planning, tasks should be accomplished on schedule. Consistent failure to follow through may indicate lack of commitment or an inability to continue the effort at hand.

While it helps to follow a plan, try to stay flexible. For example, you might plan to seek grant funding to continue an initiative but then discover that another community group is already funded to do the same work. You can consider partnering to leverage your similar efforts.

Use media, marketing, and networking to tell people which resources the coalition needs for sustaining community health improvements. Review your connections maps (Step 3) to determine whether any important connections were missed. If possible, hire temporary staff, consultants, and grant writers to help with communication and resource efforts.



The Alliance for a Healthier Generation's Schools Product Calculator can help determine if foods offered in schools meet Competitive Food and Beverage Guidelines:

www.healthiergeneration.org/companies.aspx?id=2530&terms=product%20calculator

Keeping People Involved. One concern of groups trying to sustain community change is keeping participants (e.g., staff, volunteers, members) engaged, since they often focus their time and energy on more than one activity/organization. Be sure to:

- Continuously recruit new members/staff and develop new leaders to provide transition.
- Meet with participants to discuss whether their needs are being met. Are they developing desired skills? Does the effort benefit their organization?
- Provide periodic training through workshops, conference calls, and webinars. If individuals need to build certain skills, refer them to these training opportunities. For more, see Module 4, "Building Coalition Members' Skills," on page 76 of Sustainability Approaches Modules.
- Implement communication strategies to keep members motivated and informed of the plan's progress.



For more information on media, marketing, and networking, see Module 5, "Communication Strategies," in Sustainability Approaches Modules on page 79.



Centers for Disease Control's 2008 Steps Community Heroes Awards Programs

The Steps Community Heroes Award Program was a CDC's Steps initiative that honored individuals who made outstanding contributions to improve the health and well-being of others in their communities. This program was designed to acknowledge "Steps Community Heroes" who, without expecting personal recognition, have unselfishly contributed their time, talents, and expertise to make significant and often sustainable contributions in their communities.

The honored Steps Heroes, representing a cross-section of society, were selected from 23 nominations made by the 40 CDC funded Steps communities. The selection process was not an easy task, as all of the nominees made excellent contributions to the Steps Program in their communities.

Seven Steps Community Heroes were selected and honored at the annual Steps Cooperative Agreement Program Action Institute. The 2008 Steps Community Heroes Award recipients include a school district food service director, a community health representative, a teacher and one of her students, a retired nurse and community advocate, a health educator, and a public health nutrition graduate student volunteer. They each volunteered significant portions of their time to address one or more Steps initiatives. Many of their efforts led to a policy, systems, or environmental change in their community that will sustain efforts to help people maintain a healthful lifestyle. For more information, visit www.cdc.gov/steps/2008_heroes/overview.htm.



New York State Builds Coalition Members' Skills

The New York State Department of Health provided \$34,000 to 56 (of 62) counties to support a training program designed to improve their readiness to implement and sustain policy strategies. This program consisted of two-level regional workshops. The first level (1 day) was for any person or group interested in learning more about chronic disease prevention. The second level took place over 2 days and was offered to county teams consisting of 5–12 members. These trainings expanded on the first level of training and included both didactic sessions and group time.

Post-training assessments showed a 10% increase in primary prevention knowledge around policy, systems, and environmental change strategies as well as an improvement in participant confidence related to coalition building and action planning. Participants reported significantly more confidence on policy change strategies, coalition building, and action-planning concepts. Post-training self-efficacy assessments indicated that participants were better equipped to implement policy change than they were before the trainings.

Together, the training sessions helped give participating county leaders the tools and confidence to use policy, systems, and environmental change strategies to prevent chronic disease in their communities.





STEP 9: Healthy Carrolton City (HCC) Implements the Sustainability Plan

Under the guidance of the consultant/facilitator, participants were again divided into three groups and began creating action plans for the prioritized strategies they had been assigned. The goal was to create a detailed description of how each prioritized strategy would be sustained. To create manageable action plans, each strategy was broken up into the following elements:

- Action step (what will be done)
- Person(s)/task group(s) responsible
- Date completed
- Resources required (at what cost)
- Communication, collaborators, etc. (i.e., Who else should know about this?)

The following is a brief summary of one of HCC's action plans.

Develop policies to promote physical activity in the built environment.

An immediate recommendation to sustain this initiative in the future is to insert Complete Streets policy language that considers all forms of transportation in the city's future projects. Construction of a traffic circle, one of eight planned traffic-calming measures, has been completed, and work on the second is about to start. In addition, efforts to increase bicycle use in public and commercial spaces are underway, with the installation of bicycle racks at all county government buildings. The Carrolton City Transportation Department will complete both projects by April 2011. A minimum of four site-plan assessments, with photos, will be performed. The coalition should focus on recruiting new volunteers to perform these assessments.



STEP 10—EVALUATE OUTCOMES AND REVISE AS NEEDED

Now you've reached the last step in sustainability planning, but this should not be the first time you think about evaluation. The evaluation experience is likely to be more positive and its results more useful if you build evaluation in from the start and make it an on-going activity. This includes planning a summary evaluation before an intervention begins, which helps to clarify program goals and reasonable outcomes.

At this stage, evaluation will help you improve your PSE efforts and implementation. It is important to periodically assess and adapt your organizational structure and activities for achieving your policy objectives to ensure they are as effective as possible. Evaluation can help you identify areas for improvement and ultimately help you realize your goals more efficiently (Hornik, 2002; Noar, 2006). It will also allow you to demonstrate coalition success or progress. Does your coalition's current infrastructure and planning processes enable it to effectively and efficiently achieve its goals? The information you collect allows you to better communicate your coalition's impact to others, which is critical for public relations, staff morale, and attracting and retaining support from current and potential funders (Hornik & Yanovitzky, 2003).

**Activate Quad Cities (Pioneering Healthy Communities) Uses Data to Sustain Progress**

One challenge that many of us face is how to access and utilize reliable local data to inform the direction of our community work and measure progress. Since 2007, the Quad Cities Community Vitality Task Force has released an annual snapshot of community indicators. We encourage the community to move beyond the numbers and to dialogue on issues that impact the health of the Quad Cities. Currently, the task force is looking at a data management system that will not only provide online mapping and data-gathering capability, but link similar organizations within the community around issues such as childhood obesity or neighborhood safety. Having data that is easily accessible and updated frequently allows community leaders to refocus time from gathering data to discussing what the data is telling them about issues affecting their community. This increased level of engagement should lead to greater sustainability by tracking the success of initiatives that impact the health of the community.

--Christy Filby, Activate Quad Cities



STEP 10: Healthy Carrolton City (HCC) Evaluates Outcomes and Revises as Needed

For HCC to evaluate the overall plan, the coalition had to determine whether the individual policy strategies it chose to implement (see HCC example in Step 4, page 23) had been successful. After determining: 1) whether these strategies were implemented as planned and 2) what their outcomes were (see table below), the coalition made needed changes to the policy strategies before proceeding further.

Prioritized Policy Strategy	Activity	Outcomes	Revisions
<ul style="list-style-type: none"> Implement environmental change strategies that promote physical activity and safety in the built environment. 	<ul style="list-style-type: none"> Build traffic-calming measures to increase pedestrian safety and encourage walking. 	<ul style="list-style-type: none"> 1 out of 8 traffic-calming measures (e.g., speed bumps, lane narrowing, curb extensions) installed on streets. 2 out of 5 strategies are in place to enhance personal safety. 	<ul style="list-style-type: none"> Increase # of traffic-calming measures installed on streets from 1 to 3. Increase # of personal safety strategies from 2 to 3.
	<ul style="list-style-type: none"> Develop policies that support bicycle use (e.g., identify commercial and public spaces where new bike lanes and racks can be placed). 	<ul style="list-style-type: none"> 2 out of 3 public bike facilities (e.g., bike racks, bike lanes) were installed in the city/county. Only 3 out of 6 miles of bike routes have received regular maintenance. 	<ul style="list-style-type: none"> Increase to 100% public bike facilities in the city/county. Maintain number of miles of bike routes that have received regular maintenance.
<ul style="list-style-type: none"> Modify and enhance work site wellness and vending machine policies. 	<ul style="list-style-type: none"> Develop a vending machine policy that supports healthful snack and beverage choices. 	<ul style="list-style-type: none"> 0% of vending slots offering healthful food and beverage options. 0% of sites that have vending slots dedicated to healthful food and beverage options. 	<ul style="list-style-type: none"> Determine why there were no vending slots or sites offering healthful food and beverage options in vending machines. Need to survey employees and work sites to determine opinions for healthful food and beverage options in vending machines before proceeding with this policy.

	<ul style="list-style-type: none"> • Develop a “healthy meeting” policy that supports healthful foods and beverage choices during all work-related meetings. 	<ul style="list-style-type: none"> • 5 out of 10 sites offer healthful food and beverage options at meetings and events. 	<ul style="list-style-type: none"> • Increase # of sites offering healthful food and beverage options at meetings and events from 5 to 7.
	<ul style="list-style-type: none"> • Develop “take the stairs” campaigns that include point-of-decision prompts and signs near elevators that highlight the benefits of stairway use. 	<ul style="list-style-type: none"> • 100% of sites encourage stairwell use. • 25% of sites use point-of-decision prompts encouraging stairwell use. • 0% of sites with enhanced stairwells (e.g. carpeted, painted, decorated, and finished walls). 	<ul style="list-style-type: none"> • Maintain # of sites encouraging stairwell use. • Increase # of sites using point-of-decision prompts encouraging stairwell use to 50%. • Due to building codes, unable to enhance stairwell with paint and decorated walls.
<ul style="list-style-type: none"> • Facilitate the use of food stamps at farmers markets. 	<ul style="list-style-type: none"> • Discuss and implement a Food Stamp Program— i.e., Electronic Benefit Transfer (EBT) program— with city officials and local farmers markets. 	<ul style="list-style-type: none"> • 1 out of 4 vendors accept WIC, food stamp vouchers, and food stamp benefits. • 1 out of 4 farmers markets accept food stamp vouchers and benefits. 	<ul style="list-style-type: none"> • Increase # of vendors and farmers markets accepting food stamp vouchers and benefits from 1 to 2.

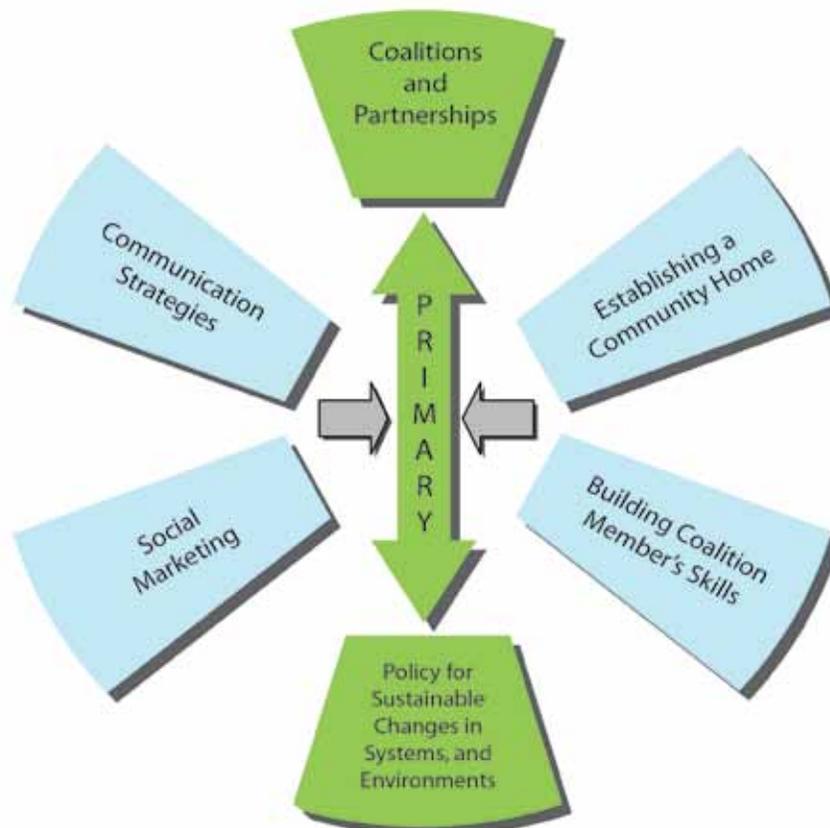
SECTION 2

SUSTAINABILITY APPROACHES

By understanding various sustainability approaches, you can strengthen the capacity of your coalition to function successfully and increase its chances of sustaining its efforts. Your coalition can approach sustainability from many angles. Key among these are core approaches such as policy and partnerships. In addition, your coalition can also engage in complementary approaches such as establishing a community home, building coalition members' skills, communication and social marketing strategies. The approaches are shown below. Core approaches are seen in green and complementary approaches are seen in blue.

- 1) Developing and implementing policy, systems, and environmental change strategies.
- 2) Building the long-term capacity of your coalition and relevant partnerships to achieve policy goals.
- 3) Establishing a home for your Healthy Communities work.
- 4) Focusing on building coalition members' skills.
- 5) Developing communication strategies.
- 6) Developing social marketing strategies.

Sustainability Approaches Graphic



POLICY, SYSTEMS, AND ENVIRONMENTAL CHANGE STRATEGIES***Why are policies important for sustainability?***

Policies can serve the concept of sustainability by providing long-term goals around which community members can rally. A coalition should not only promote policies but also ensure that they've been implemented as expected and are having the intended effect.

Sustainability is, in large part, about developing momentum to maintain community-wide changes that improve public health. Policy strategies are the most effective way to ensure long-term momentum.

While individual approaches to behavior change are important for health promotion efforts, these changes need to be prompted and supported by changes in environments, social norms, and networks that support positive health decisions (Green, Richard, & Potvin, 1996; Stokols, 1996). Whether implemented in schools, the community, or within community organizations, policy strategies can result in change on multiple levels, significantly impacting social and cultural norms and values (Swinburn, 2008; Stunkard & Pennick, 1979).

To achieve sustainability, a policy strategy needs to impact everyone in its priority population (Brownson, 2009). Policy strategies are a population-wide approach and can impact far more people than individual strategies. Policies can also be replicated in multiple community settings and on many levels.

In addition, policy strategies are more economically sustainable long-term than other approaches (Swinburn, 2008). Once a policy has been implemented, few, if any, resources are usually needed to sustain resulting community improvements. In fact, policy strategies can yield continuous improvements even if the institutions or coalitions that helped enact them are not themselves sustained (Holder & Moore, 2000, p. 75). For these reasons, a policy approach is the best way to work toward sustainable change in the community.

COALITIONS AND PARTNERSHIPS

Why are coalitions and partnerships important for sustainability?

The term “coalition” is used to describe a diverse group of individuals and organizations working together to achieve specific goals. Internal partners are coalition members who help plan and participate in efforts to accomplish those goals. External coalition partners (e.g., local decision-makers, funders, and media contacts) can provide assets or champion coalition causes.

Strong coalitions and partnerships help support sustainability by providing a platform and process that promote buy-in and support from participating community organizations and leaders. This heightened level of support enhances the reputation of the coalition and the Healthy Communities Movement at large, increasing the likelihood of new funding opportunities.

Coalitions and partnerships can, among other things:

- Serve as effective vehicles for exchanging knowledge and ideas.
- Limit duplication of strategies and services.
- Demonstrate and develop community support for issues.
- Maximize the talents and resources of individuals and groups through collective action.
- Improve trust, communication, and collaboration among community agencies and sectors.
- Change community norms and standards concerning health-risk behaviors.
- Promote policies to create sustainable change in systems and environments.



ESTABLISHING A HOME FOR HEALTHY COMMUNITIES WORK***Why is a home for Healthy Communities work important for sustainability?***

To ensure long-term success, a collaborative Healthy Communities initiative needs to adjust to potential changes—e.g., in funding, local opportunities or alliances, public health needs, and community and coalition leadership priorities. A critical step in meeting this challenge is to consider where and how to organize a base of operations—also known as a “community home”—so that the initiative can flourish during and after transformation (this includes thinking about the role of the fiscal agent). This community home should be able to: serve as an objective broker of public health resources; solicit and administer a variety of funding sources; appeal to a variety of community-based organizations; establish an internal infrastructure; and shift priorities to accommodate changes in goals and community needs.

As long as these criteria are met, a community home could be located in a government branch, a community health 501(c)3 organization, or an existing not-for-profit or for-profit venture (e.g., hospital or foundation). Or it may be best to develop a new 501(c)3. Each option has its strengths and weaknesses. Also, what works in one community may not work in another.

Once established, a community home could serve many important roles, including:

- Leader and advocate
- Overseer of knowledge transfer and translation
- Convener/broker of relationships
- Developer of standards
- Evaluator of evidence-based practice/practice-based evidence
- Monitor
- Grantor

BUILDING COALITION MEMBERS' SKILLS***Why are building coalition members' skills important for sustainability?***

Coalition members want to learn new skills, develop their capabilities, and grow their knowledge and careers. Helping them do so not only benefits the coalition as a whole, it also helps motivate members to sustain their participation.

Coalition training and skill building—referred to collectively here as “training”—are geared toward administrative, process, or public-health content. Administrative training topics can include fund-raising, project planning, budgeting, and structuring coalitions for success. Process training can include such items as team building, leadership training, communication, and project planning. Public health content can include current strategies to promote specific efforts around chronic disease risk factors (e.g., tobacco use, prevention, and control), physical activity and nutrition, understanding health equity, and elements of the built environment. Coalition members can learn skills from self-help methods (e.g., e-learning) or through face-to-face workshops that can help with strategic or program planning and process training.

Coalitions can use a variety of assessment processes to determine the best type of training, including surveys, coalition-wide discussions, consultation with coalition coordinators or technical assistance (TA) staff, and a review of the literature on best practices.

The last two options are particularly important, because they provide an outside, objective perspective. TA staff members often come from funding organizations. They may have had high-level training and be in a position to offer detached insight into coalition training needs. A literature review is important because it can highlight ongoing research on how public health coalitions can function more effectively and accomplish specific policy goals.

COMMUNICATION STRATEGIES

Why are communication strategies important for sustainability?

By using various media to convey policy messages, coalitions are able to develop public/decision-maker awareness and support around policy strategies, in addition to keeping them informed about the overall Healthy Communities effort. Specifically, media efforts can help by:

- Promoting decision-maker buy-in of coalition vision, mission, and plans.
- Conveying the sense that coalition funds and other resources are being used wisely.
- Increasing chances that new funding or other resource-development opportunities will present themselves.
- Setting the stage for collaboration or coordination between organizations.

To get your message and call to action across clearly, make sure they are precise and easily understood.

The ways coalitions can keep community and decision-makers up-to-date include:

- Newsletters (electronic) distributed through Web site or e-mail
- Social media (e.g., Facebook or Twitter)
- Regular columns in weeklies, newspapers, or trade publications
- Periodic sustainability reports or annual action plans (print or electronic)
- Annual reports highlighting current plans and progress as well as future strategies
- Personal e-mails from coalition members to contacts
- Talk shows appearances (e.g., radio/TV/podcasts)
- Presentations at civic organization gatherings (e.g., Parent Teacher Organizations, Elks, Chamber of Commerce, school superintendents, local trainings, or conferences)

In addition to communicating policy messages, it is important for coalitions to consider:

- Internal communication: Communication directed at managing the work of a coalition or planning group.
- Community-wide communication: Communication directed at keeping community members, leaders, and key decision-makers up-to-date on the overall Healthy Communities effort.

SOCIAL MARKETING STRATEGIES

Why are social marketing strategies important for sustainability?

Social marketing provides an action framework for generating discussion and promoting information, attitudes, and values that are conducive to long-term behavioral changes in certain populations. Influencing behavior in individuals can contribute to policy changes within a community-at-large. When beginning your coalition's social marketing plan, remember to keep the audience's perspective in mind and consider all potential barriers to behavior change.

For your coalition's social marketing efforts to be successful, you need to know what can motivate a certain population to adopt a desired behavior. When making the choice to change, a person has to make an "exchange," or give one thing up in return for something else. This exchange can be concrete (money) or less tangible (e.g., improvement in health, social acceptance, or safety). It is important to offer something very appealing in return for the desired behavior. To plan and implement an integrated social marketing strategy, it is imperative to remember the "4 Ps of Marketing": product, price, place, and promotion.

CONCLUSION

This document aims to guide the sustainability efforts of your coalition or organization. The following take-home messages provide a summary of key concepts.

1. Begin thinking about sustainability as early as possible, preferably as you begin planning your coalition's policy strategies.
2. Sustainability doesn't just happen; it's a deliberate process with specific action steps. Focus on strengthening and sustaining your coalition's infrastructure in order to support policy strategies that lead to healthier communities. Flexibility and adaptability are hallmarks of sustainable organizations and strategies.
3. Sustainability is a complex goal and requires a multifaceted approach that reaches across all sectors of the community. This approach can include coalition building, social marketing, use of media and other communication methods, educational approaches that include mentoring and technical assistance, and resource development. It's an ongoing process of prioritizing effective, feasible strategies that are likely to be maintained.
4. Leadership and community champions drive sustainability efforts. If these individuals are supported by strong sponsoring institutions and organizations, their influence is even greater. They easily communicate their vision of change to others, perceive how certain policy strategies fit within the Healthy Communities Movement, and either have or can obtain needed resources.
5. Sustainability is based on collaboration. Any collective action is more than the sum of its parts, whether the focus is health, economics, government, or the environment. Ultimately, what is required is a broad perspective, a holistic view of the community as interwoven and interrelated. Using a community home approach, a coalition can help position itself and its Healthy Communities efforts for long-term success. Once we discard boundaries and limitations, the potential for every human being to live a healthier life will be maximized.

The future is literally in our hands to mold as we like. But we cannot wait until tomorrow. Tomorrow is now.

--Eleanor Roosevelt

SECTION 3

SUSTAINABILITY APPROACHES (MODULES)

The following modules expand on the Sustainability Approaches summaries. Each module covers one of these six interrelated approaches, explaining how it works and why it's important for helping coalitions ensure the long-term sustainability of their efforts.

- **Module 1:** Policy, Systems, and Environmental Change (PSEs) Strategies
- **Module 2:** Partnerships and Coalitions
- **Module 3:** Establishing a Home for Healthy Communities Work
- **Module 4:** Building Coalition Members' Skills
- **Module 5:** Communication Strategies
- **Module 6:** Social Marketing Strategies



MODULE 1

POLICY, SYSTEMS, AND ENVIRONMENTAL (PSE) CHANGE STRATEGIES

Policy initiatives—concerted campaigns to advance specific policies—can affect a community in at least two ways. First, enactment of the policy itself can address problems that put communities at risk and help improve quality of life. Second, the act of organizing a community to engage in the policy initiative can increase social networks and reduce isolation and alienation, which can be as effective in reducing problems as the policy itself. Efforts that engage community residents and give them a sense of their own power can make a real difference in their ability to solve problems as well as strengthen individual members' sense of community. Community-based efforts to change policy not only address problems through the policy changes they achieve, but also aid communities in addressing the factors that put them at risk in the first place.

--Makani Themba Nixon

Chavez, V, Chehimi, S, & Cohen, L. *Prevention is Primary*. San Francisco, CA: John Wiley & Sons, Inc; 2007.

Accessed in: http://www.lchc.org/research/documents/VNPA_AddressingtheIntersection_051810.pdf



To increase systemic community change with regard to public health, your coalition needs to go beyond individual behavior change and employ multilevel policy, systems, and environmental change (PSE) strategies. By creating multilevel interactions, PSE strategies can significantly impact a community's norms and values (Swinburn, 2008; Stunkard & Pennick, 1979). Individual approaches to behavior change are most successful when reinforced, rewarded, and supported by these social norms and networks in communities and environments that support positive health decisions (Green, Richard, & Potvin, 1996; Stokols, 1996). The Social-Ecological Model (below) shows how effective strategies for community change occur across multiple levels—individual, interpersonal, organizational, community, and public policy.

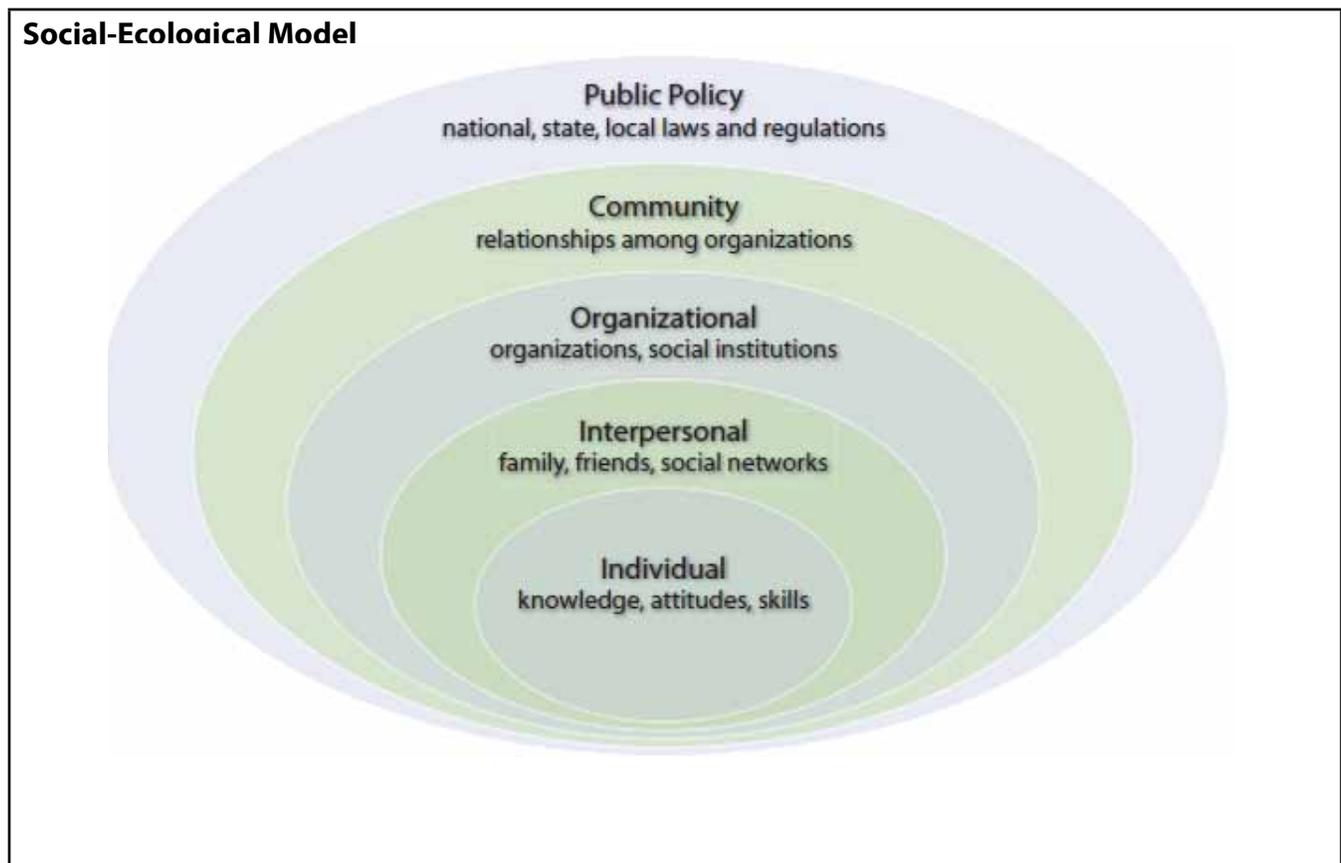


Figure: Centers for Disease Control and Prevention. *Community Health Assessment and Group Evaluation (CHANGE) Action Guide: Building a Foundation of Knowledge to Prioritize Community Needs*. Atlanta: U.S. Department of Health and Human Services, 2010.

Institute of Medicine. (2002). *The Future of the Public's Health in the 21st Century*. Washington, D.C.: National Academies Press.



Examples of policies enacted at the municipal level include measures such as requirements for physical activity in schools, clean indoor-air laws, trans fat bans in restaurants, bike lane requirements, or provisions for public land to be set aside for green space.

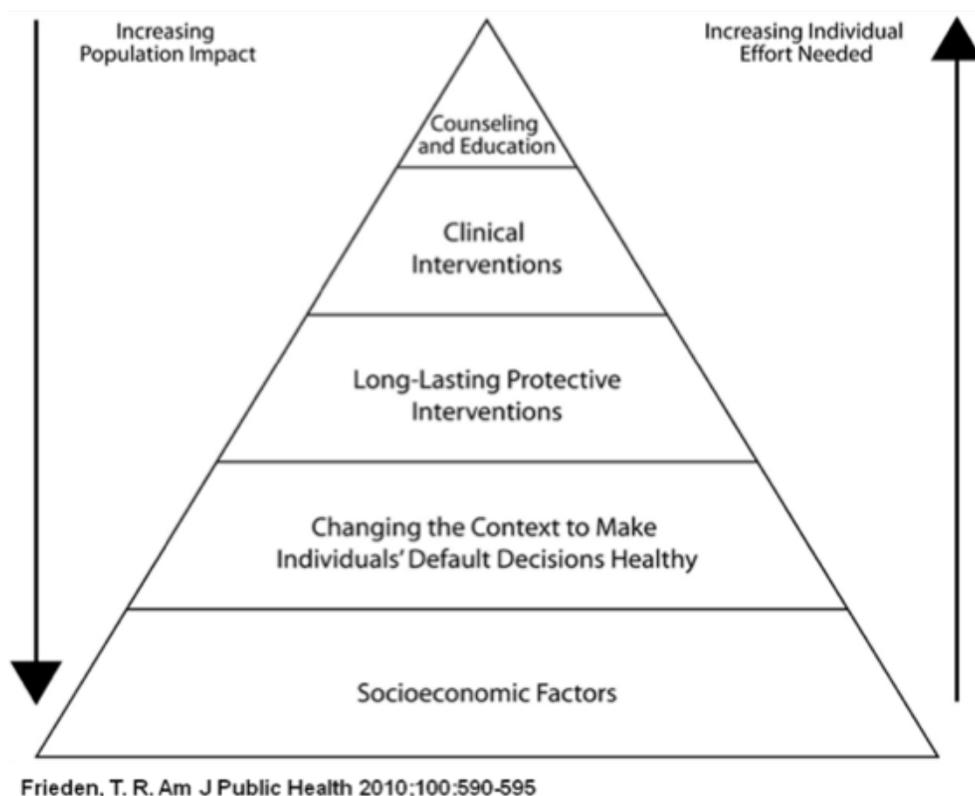
Policies can also be developed within organizations; examples include policies requiring healthful food at work meetings, or school districts requiring only healthful food in school cafeterias, vending machines, and afterschool events. A key public health advantage of multi-level changes is that they can have an impact on the larger population and increase sustainability when they are naturally threaded through social and environmental infrastructures.

Impact of PSEs

An individual's income, education, occupation, and location can strongly predict his or her health status (Adler & Kwon, 2002; Mackenbach, Stirbu, Roskam, Schaap, Menvielle et al, 2008). For example, a community with unsafe streets, neglected public spaces, school violence, and poor access to healthful food is more likely to have residents with higher rates of obesity, heart disease, asthma, and child poverty. Conversely, PSEs that support safe parks, healthful school environments, and access to grocery stores and supermarkets with healthful foods can help a community become less prone to high rates of chronic disease.

The five-tiered Health Impact Pyramid below shows varying levels of impact that PSE strategies can have on health.

The Health Impact Pyramid



PSEs in the bottom two tiers of the pyramid focus on improving socioeconomic factors as well as physical and social environments. These strategies have more impact than programmatic (e.g., counseling and education) or direct service (e.g., clinical interventions) strategies for several reasons (Frieden, 2010).

- They impact more people and can benefit populations more at risk of developing chronic diseases. By addressing social determinants of health and creating supportive physical and social environments, PSEs can eliminate “unnecessary health risks impacting individuals and communities” (IOM, 2002).
- They have the potential for widespread implementation. For example, successful local policies may be replicated at the state and even national level. The National School Lunch Program, which began in the early 1900s with state and local legislation authorizing school districts to provide meals for needy children, has evolved into a federally assisted meal program in public and nonprofit private schools and residential childcare institutions. Similarly, policies that apply to organizations in one community sector or setting (e.g., tobacco-free parks) can be adapted for use in others (e.g., tobacco-free hospitals) [Prevention Institute Web site, www.preventioninstitute.org]. When policies that support good health spread throughout all settings, sectors, and levels of society, widespread change will result.
- They are more economically sustainable over the long haul (Swinburn, 2008) and can result in significant cost savings. In a report by Trust for America's Health (TFAH, 2009), an investment of \$10 per person per year in proven community-based strategies to increase physical activity, improve nutrition, and prevent smoking and other tobacco use could save the country more than \$16 billion annually within 5 years (Braveman & Egerter, 2008). Improving a community's economic circumstances can significantly improve the health and living conditions of its residents. For these reasons, PSEs can have a greater impact on a community's health and economic vitality than other strategies.

Developing PSEs can be a long-term process. Experiences in tobacco control (e.g., cigarette taxes), infectious disease (e.g., school immunization laws), and injury (e.g., vehicle safety, drunk driving, seatbelt laws) help make the case for implementing policy change. For example, a comprehensive smoking ban in New York resulted in an estimated 3,813 fewer hospital admissions for heart attacks in 2004, saving \$56 million in health care costs (Juster, Loomis, Hinman, Farrelly, Hyland, et al, 2007).

ROLE OF LOCAL HEALTH POLICY IN CREATING HEALTHIER COMMUNITIES

The Four Elements of Creating Local Policy

Developing local policy strategy is a process. Every step of the way, it requires your coalition to galvanize a commitment among its members and other community stakeholders. This momentum will create and maintain a shared vision for lasting, positive systemic and environmental changes within the community, advance the focus on reducing inequities and, in doing so, ensure the sustainability of your work. Crafting local policy entails four interrelated elements:

1. Assessing the policy landscape and selecting a policy objective.
2. Developing a strong base of support.
3. Supporting the case for implementation.
4. Planning for policy implementation, monitoring, and enforcement.

The sections that follow were contributed by the Prevention Institute. For more information, please visit www.preventioninstitute.org.

While these elements are described below in sequential order, in practice they might occur simultaneously as your coalition develops a policy strategy.

Element 1: Assessing the Policy Landscape, Selecting a Policy Objective

The first step is to figure out whether a new policy is needed. Are policies that address the specific issue already in place? If so, are they being implemented and enforced fairly and effectively? If not, what kinds of solutions might be available? It is crucial to understand the policy landscape, which includes local health departments, community institutions, community-based organization, and residents' opinions. This essential information will help steer your coalition toward selecting a narrowly focused policy or making progress on multiple policy fronts. As a matter of strategy, your coalition may decide to work on several policies simultaneously or take on policy issues sequentially. Try starting your policy development effort with modest initial objectives and broad, long-term aspirations for change. The following steps can help your coalition choose its policy objectives:

- 1. Research recent policy activity and evaluate whether administrative or legislative action is needed.**
Do policies related to the issues at hand already exist? If so, you may want to identify who developed them and whether they've been successfully implemented. Administrative changes typically entail less effort than developing a new policy, especially when a sympathetic official is in a leadership position. If an agency is responsible for enforcing a policy, follow its chain of command to expedite approval and encourage agency ownership. If the desired changes require a new policy, the initial administrative review provides credibility—justifying that action. Sometimes, the agency becomes an ally in this effort, offering more authority, resources, and visibility for adopting and implementing a new policy.

- 2. Determine which department has jurisdictional responsibility for the types of policy being considered, and identify key decision-makers.** An effective policy effort begins with a thorough understanding of who has the power to make decisions in the selected policy arena(s), how and when they make them, and where to direct formal recommendations for new policy. Assess the decision-makers; their perspectives and sympathies can make certain policies more or less achievable. Understanding the local policy landscape, including recent policy trends, will help your coalition decide what strategy to propose and how to frame it. Identifying action steps will also help to move community goals forward. Bringing stakeholders together to discuss both their unique resources and overlapping contributions can build inter-sectoral relationships and result in creative solutions that support one another.

Selecting a jurisdiction involves a political calculation—balancing the likelihood of policy adoption against the effectiveness and impact of its adoption. Include a legal review of the draft language to ensure that the initiative fits within the powers of the selected jurisdiction, especially for new types of policies.

- 3. Hone in on specific policy objectives informed by the political landscape.** Consider focusing on one or more policy objectives on the basis of potential for effective impact, political climate, community support, and feasibility of implementation (discussed in Element 4). Sometimes, external events shift political will and feasibility. Coalitions that are responsive and nimble can take advantage of these changes.

Element 2: Developing a Strong Base of Support

Rarely are policies implemented as a result of one person's efforts. Assembling the right mix of people—especially those who bring attention and credibility to the development process—is key to achieving policy success.

Identify Supporters

Efforts to develop or change policy will be most effective if driven by a broad collaboration of people and groups with complementary skills and knowledge. Consider formalizing a strategy for mobilizing these groups and individuals.

Can people who are passionate about this issue be identified? Policy spokespeople can be particularly influential when they're personally affected by an issue. They can act as legitimate representatives from the community and consistently convey the importance of the proposed policy solution. A prominent community figure, such as sports figure or a faith-based leader, may be an especially influential spokesperson.

Recruit an Influential Official to Help Build Rapport with Other Officials

Recruiting the right policy champions helps generate visibility, credibility, and momentum. A strong policy champion—a committed and respected community voice—can provide guidance in the political process as well as in crafting policy language. In many cases, an ideal choice will be a well-known political leader with a successful track record on the issue and strong, positive relationships with top policymakers. It's important to have a spokesperson who understands community goals for systems and environmental change and who can speak passionately on residents' behalf. At the same time, it's important to reach out to other influential local policymakers. Build rapport with officials most likely to support the policy objective. Elected bodies, such as

city councils or county boards, require at least one member to introduce a policy. However, it takes a majority to pass legislation, so cultivate ties with all members of the policy body. Supporters should remind elected officials of the importance of policies designed to *prevent* chronic diseases, rather than to merely treat them. Such policies will aid in promoting long-term, sustainable community health.

Understand the Potential Opponents of the Initiative

Which organizations have an interest in maintaining the status quo or might feel threatened by the proposed changes? Try to figure out who these opponents are and why they might want to thwart the policy development process. Be prepared to provide reassurances and counterarguments. (Community Toolbox. Chapter 30: Principles of Advocacy. http://ctb.ku.edu/en/tablecontents/chapter_1030.htm). In some cases, individuals or groups may publicly oppose the policy objective; in other cases, opposition may be more nuanced—less visible or less vigorous (Community Toolbox. Chapter 30: Principles of Advocacy. http://ctb.ku.edu/en/tablecontents/chapter_1030.htm).

Distinguishing between different types of opponents helps inform strategy. While some groups may oppose your coalition's policy objectives, others might oppose only the way the coalition is trying to reach those objectives. Still other groups may have objectives that are completely contrary to yours. While it's important to understand every group's perspective, those with contrary objectives probably won't be persuaded to change their minds. Try to avoid negotiating policy language to satisfy these groups; if possible, try to make sure they don't participate in the planning process. However, if community members generally oppose the proposal, your coalition needs to consider a different policy or approach.



For more information on communicating policies, see Module 5, "Communication Strategies," on page 78.

Element 3: Making the Case for Implementation

Creating a successful policy or policy change requires much more than simply knowing the facts about a particular issue. You need to prepare a well-framed case, substantiate it with solid data and persuasive information, and communicate it clearly and thoughtfully. This will help convince politicians, local organizations, and the overall community that not only is change needed, but that the proposed policy is the way to make that change a reality.

Frame the Case to Support Environmental and Policy Solutions

The way your coalition describes an issue can largely determine whether policy goals are achieved. In the U.S., the default perspective frames public health as a matter of *individual* responsibility related to *personal* choice. This perspective assumes that everyone has equal access to healthful systems and environments. The Berkeley Media Studies Group brief *What Surrounds Us Shapes Us: Making the Case for Environmental Change* provides guidance for policy advocates focused on creating healthy places. [Berkeley Media Studies Group (2009). *What surrounds us shapes us: Making the case for environmental change*. Berkeley, CA: Berkeley Media Studies Group]. To build support for policy strategies, your coalition needs to shift the frame by making "a vivid description of the environment that contributes to poor health, as well as the kind of place that supports health."

[Berkeley Media Studies Group (2009). *What surrounds us shapes us: Making the case for environmental change*. Berkeley, CA: Berkeley Media Studies Group: p.1]. Such frames are best when they portray system and environmental change as aligning with individual responsibility. Make the case for health equity by including information on how root causes such as racism and poverty shape community environments and norms, which then influence health outcomes. Use data and a clearly articulated policy proposal to make the case; research shows that messages also incorporating community values can have even greater impact.

Back Up Ideas with Research

Assemble a wide variety of qualitative and quantitative data to make the case, and then combine this with an effective frame to emphasize the importance of policy in improving community systems and environments. Community assessments can be particularly powerful tools. They yield data on local conditions and can highlight inequalities within communities. You may want to engage residents in mapping and surveying neighborhood conditions. This can strengthen the case for the proposed policy and can inspire more community members to participate in policy development activities. Gather testimony from residents (i.e., constituents) that demonstrates that they care about the issue; their stories complement the assessment data, painting a picture of the community environment and linking it to policy objectives.

Draw background data from the scientific literature to support the relationship between community conditions and health outcomes. To position health issues in the proper context, make a strong case about the impact of social determinants of health on a community environment before introducing local health statistics that show the extent of health problems. If the proposed policy has been implemented elsewhere, use that evaluation data (if available) to further support your case.

Calculate Cost and Savings

Making the economic case for anticipated savings spurs key decision-makers focused on the bottom line. Often, policymakers may look at costs in narrow terms—e.g., short-term expenditures and revenues. But many health conditions don't show up until decades later, when health costs have accrued. Present a total analysis, comparing economic and social costs related to inaction against the estimated cost of moving forward with policy change. Be prepared to answer questions about the potential cost of the proposed policy. Share data about current health care expenditures and lost worker productivity associated with specific preventable illnesses and injuries. Assessing return on investment is another way to calculate the value of community prevention efforts.

Use Media to Educate the Public and Decision-Makers

Media advocacy is a way to harness the power of media to advance policy objectives and promote social change. Once a policy solution is properly framed and supported, try monitoring the media for related stories. This can help your coalition most effectively respond to media coverage; it also helps gauge how best to promote the policy. For more information on communication and social marketing strategies, see Modules 5 and 6.

Element 4: Planning for Policy Implementation, Monitoring, and Enforcement

Design a policy that is feasible to implement and practical to enforce. Take steps to build ownership and support among agencies or organizations expected to implement and enforce the policy. This will help ensure optimal implementation, follow-through, and overall sustainability of your coalition's policy goals.

Ensure that Policy Implementation Is Feasible

When crafting the policy, be sure its language specifies guidelines and actions that are realistic and feasible to implement; conversations with relevant government staff, legislators, or organization leadership can help. Policy language might also be strengthened by specifying the type of training required for proper implementation. Unfortunately, many community entities face limited budgets, making it easy to reject proposed activities like staff training. Policy champions can help by building support and training for staff carrying out new functions as well as policy implementation.

Determine Monitoring and Enforcement Mechanisms

When developing a policy, establish specific mechanisms for monitoring and enforcing it. As much as possible, build these elements into the policy from the start. Ideally, monitoring can be woven into an existing review process, such as school site visits, childcare licensing, or restaurant inspections. This will help track progress and can assist with periodic status reports. An excise tax or license fee increase can also help provide adequate resources for monitoring and enforcing policies in regulated industries. [Themba-Nixon, Makani. (2007). *Prevention is Primary: Chapter 8: Making Change: The Power of Local Communities Fostering Policy*]. When appropriate, create an oversight body—membership can include community members, supportive business representatives, researchers, schools and agencies serving youth, and field experts—to help ensure proper monitoring and enforcement. Community members play a vital role in assessing whether there's been adequate follow-through on a particular policy. Synthesize their feedback and share with relevant officials.

Ensure that Policy Is Implemented Equitably and Is Designed to Achieve Equitable Health Outcomes

Communities can enact a great policy, but unless there are sufficient resources in place, it may not be implemented uniformly or equitably. Also, without attention to closing gaps in health status, policies can inadvertently maintain or even exacerbate inequities. Policy strategies that aim to bring about equity may include measures such as earmarking funds exclusively for low-income communities, or at least prioritizing those that are highly impacted.

Ensure Equitable Application of Enforcement Activities.

[Themba-Nixon, M. (2007). *Prevention is Primary: Chapter 8: Making Change: The Power of Local Communities Fostering Policy*].

Think about creating systems to ensure even-handed application of enforcement activities, so that protective laws do not compound historically strained relationships between enforcement systems and certain populations.

Plan to Evaluate Policy and Disseminate Results

Try to design an evaluation process as early as possible in the overall policy development process; planning for evaluation before implementation helps improve policy outcomes. Policymakers and organizational leaders are reassured when an entire effort is well-planned, and any shortcomings can be identified and addressed.

Consider enlisting evaluation expertise from the community, such as local health planners or public health evaluators, who are committed to evaluation as a tool for improving community practice. Conduct an in-depth evaluation to assess the extent to which policy mandated changes were actually implemented and analyze what was required to do so successfully. Ideally, the jurisdiction or other entity overseeing implementation can collect this data for evaluation.

Community feedback is also a useful tool in measuring impact. Successful policies will have incorporated community perspectives throughout the process and should reflect the interests and needs of the community. This should be reflected in your results. In addition, community relationships built from one policy effort can be used to identify and begin another. While a single policy might not create immediate impact, it will have the potential to begin shifting community conditions and help generate positive and more equitable health outcomes.

SUMMARY: POLICY, SYSTEMS, AND ENVIRONMENTAL (PSE) CHANGE STRATEGIES

To increase systemic community change with regard to public health, your coalition needs to go beyond individual behavior change and employ multilevel policy, systems, and environmental change (PSE) strategies. By creating multilevel interactions, PSE strategies can significantly impact a community's norms and values. When compared to other strategies, PSEs have the potential to impact more people and benefit populations more at risk of developing chronic diseases. They also have the potential for widespread implementation and more successful in the long run.

Developing local policy strategy is a process. Every step of the way, it requires your coalition to galvanize a commitment among its members and other community stakeholders. This momentum will create and maintain a shared vision for lasting, positive systemic and environmental changes within the community, advance the focus on reducing inequities and, in doing so, ensure the sustainability of your work. Crafting local policy entails four interrelated elements: assessing the policy landscape and selecting a policy objective; developing a strong base of support; supporting the case for implementation; and planning for policy implementation, monitoring, and enforcement.

MODULE 2

COALITIONS AND PARTNERSHIPS

A coalition can also help achieve population-level policy changes by focusing on multiple strategies with sufficient scale and scope. With a comprehensive action plan, a coalition can engage people, ideas, and resources across sectors and settings to create a synergy of health and prevention efforts based on PSE changes that will have a lasting effect on people's health (Lasker & Weiss, 2003). Promising policy strategies can promote sustainable changes in a community's conditions, institutions, and structures.

A partnership may involve as few as two partners. However, when many diverse organizations or constituencies agree to work together to achieve a common goal, the partnership is known as a coalition (Feighery & Rogers, 1990; Butterfoss, Goodman, & Wandersman, 1993). A coalition is action-oriented and focuses on reducing or preventing a community problem by analyzing the problem, identifying and implementing solutions, and creating social change (Butterfoss & Kegler, 2009). If a coalition is composed only of individuals, it should be classified as an organization or network. Coalition membership varies in size but will usually include representatives from for-profit and nonprofit organizations in a variety of sectors. Over time, try to recruit those organizations with resources that can help your coalition achieve its policy strategy goals.

How Coalitions Build Capacity for Healthy Communities

Over the last three decades, thousands of partnerships anchored by government or community-based organizations have formed to support health-related activities. Coalitions at all levels pool resources and mobilize organizations to reduce tobacco use, promote nutrition and physical activity, and reduce rates of obesity and overweight among all age groups and populations. The best of these partnerships have brought people together, expanded resources, focused on issues of community concern, and achieved better results than any single group could achieve alone (Butterfoss & Kegler, 2009).

When real community involvement exists, coalitions are able to empower and develop community capacity to address prevention and health issues. Thus, effective coalitions increase and/or improve community participation and leadership, skills, resources, social and inter-organizational networks, sense of community, community power, and problem solving (Goodman, Speers, McLeroy, Fawcett, Kegler et al., 1998).

Health disparities and inequities have multiple causes and consequences that require innovative solutions from diverse organizations, including those focused on social services, health, housing, and education. However, the response of health and human services organizations to these problems is often limited because of duplication and fragmentation of efforts, unequal access to resources, and multicultural insensitivity. Prevention and health strategies require community-wide involvement, reinforcement, and dissemination to produce far-reaching and sustained changes. By sharing human and material resources, coalitions can establish health policies at the community and organizational levels to foster lasting change in systems and environments—and behaviors (see page 66).

Benefits of Coalitions

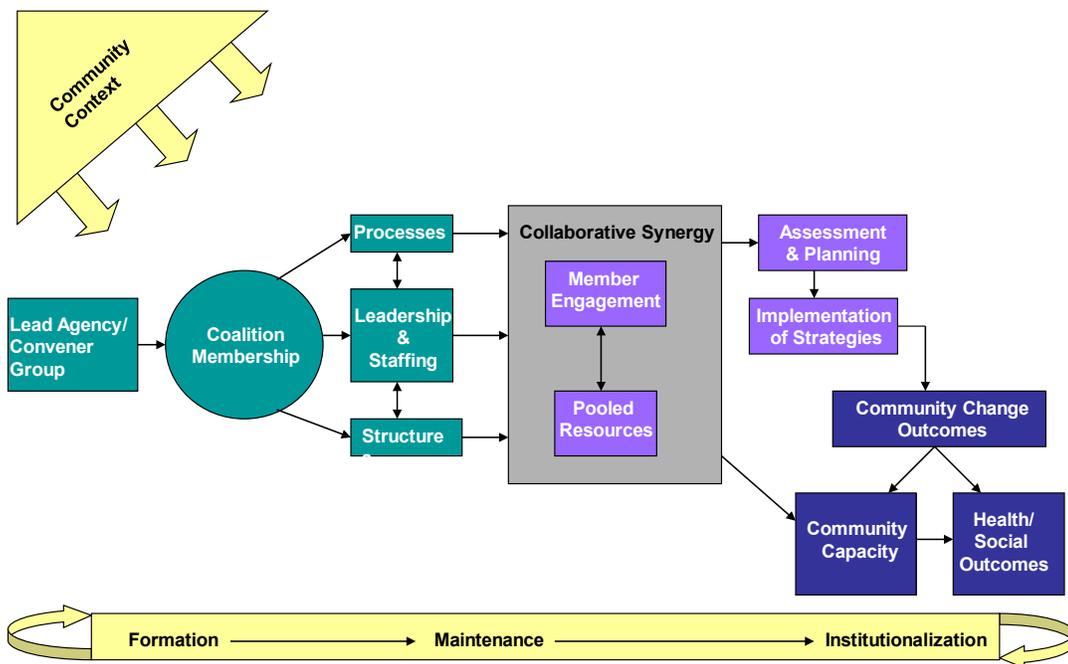
- Effective vehicles for exchanging knowledge and ideas.
- Limit duplication of strategies and services.
- Demonstrate and develop community support/concern for issues.
- Maximize the power of individuals and groups through collective action.
- Improve trust, communication, and collaboration among community agencies and sectors.
- Mobilize diverse talents, resources, and strategies.
- Build strength and cohesiveness by connecting individual activists and organizations.
- Change community norms and standards concerning health-risk behaviors.
- Promote PSEs.

(Butterfoss, 2007)

Theoretical Support for Coalition Work

The Community Coalition Action Theory (CCAT) describes how coalitions increase community capacity and sustain PSEs that improve health and social outcomes by moving through stages from formation to maintenance to institutionalization. The diagram below shows sustainability tasks for each of these stages.

Community Coalition Action Theory (CCAT) Butterfoss & Kegler, 2009



Conditions that Foster Productive Collaborations and Coalitions

Coalitions must be dynamic and responsive to culture, racial, and ethnic diversity, and how people usually work together in a community, region, or state (Butterfoss, 2007). Contextual or environmental factors can enhance or inhibit collaboration and significantly impact a coalition throughout its development (Butterfoss & Kegler, 2009, Lasker, Weiss, & Miller, 2001; Mattesich, Murray-Close, & Monsey, 2001; National Network for Collaboration, 1996).

Key Sustainability Tasks for Coalitions	
Stage of Development	Tasks
Formation	<ul style="list-style-type: none"> • Build community ownership. • Assess community needs and assets. • Develop commitment for vision, mission, goals, and objectives. • Create viable organizational structure. • Recruit key organizational members. • Build leadership team.
Maintenance	<ul style="list-style-type: none"> • Retain member commitment and participation to achieve objectives. • Obtain and share member resources. • Continue to assess community assets and needs. • Plan and implement effective PSEs.
Institutionalization	<ul style="list-style-type: none"> • Diversify and strengthen coalition’s financial base. • Ensure Community Home* for ongoing efforts. • Plan for leadership succession. • Institutionalize strategies within member organizations and community institutions.
<p><i>*Community Home is a base of operations that can serve as an objective broker of public health resources, or as a solicitor or administrator of a variety of funding sources. See Module 3 “Establishing a Home for Healthy Communities Work” on page 71.</i></p>	

Organizing for Success

The following recommendations can help you organize your coalition or partnership for success. (The box on page 69 provides contextual factors that affect coalitions).

Clarify the purpose and mission of the coalition or collaboration: Not everyone has a similar notion of what “collaboration” means. True collaboration requires a commitment to shared goals, a jointly developed structure and shared responsibility, mutual authority, accountability for success, community assessment, and sharing of resources, risks, and rewards.

Choose the simplest form necessary to achieve your goals: Coalitions require time and resources, so keep your coalition structure and reporting procedures as simple as possible. You may need to reprioritize the work if the group focuses solely on creating procedures rather than carrying out its action plan.

Involve the right people: If your coalition is trying to implement PSEs, your efforts should include top leadership of relevant organizations. But you still need diverse representation and engagement—from government, schools, businesses, and non-profits—to ensure that your strategies are carried out effectively. Partners need to be trustworthy and have similar goals, expertise, and resources as well as credibility in the community. Leadership should be diverse, broad-based, and shared in order to promote mentorship and succession. Coalitions demand *transformational* leaders—change agents who are good role models and who can create and articulate a clear vision, empower followers to achieve at higher standards, lead as peer problem-solvers, build broad-based involvement and participation, and act in ways that make others want to trust them (Chrislip & Larson, 1994; Northouse, 2001, p. 158).

Put your commitment in writing: Disagreements and uncertainty about operations can derail any collaboration. A commitment letter or memorandum of understanding (MOU) lays out the rules that govern your collaboration. This is particularly important with partners who contribute substantial resources to support an effort. It includes vision, mission, and purpose; values and assumptions; timelines and milestones; leadership and membership expectations; roles and contributions; financial relationships; and rules on participation, decision making, communication, and conflict. See Example 5 in the Appendix on page 102.

Implement internal communication strategies: Coalitions should use innovative methods to connect members to their organization and to one another. Meeting agendas and minutes, annual reports, and community action plans will keep members abreast of coalition progress. Web sites, listserves, and social media tools (e.g., Facebook, Twitter, blogs) are other essential communication tools. For more information, see Module 5, “Communication Strategies,” in Sustainability Approaches Modules on page 79.

Contextual Factors that Affect Coalitions

- Connectedness or linkages between individuals groups and organizations
- History of working together in cooperative or competitive way
- Political climate or history surrounding power and decision making
- Policies, laws, and regulations
- Environmental, in-kind, financial and human resources
- Catalysts (existing problem, reason or convener that gets collaboration started)
- Community motivation, readiness, and awareness of an issue
- Flexibility and adaptability in problem solving and task accomplishment
- Trust and ability to communicate to reach consensus among community sectors
- Existing identifiable leadership

Effective Coalition Building Sustains the Work of Prevention

In 2004, CDC awarded a 5-year cooperative agreement to the Cleveland Department of Public Health (CDPH) to initiate Steps to a Healthier US. Its goal was to reduce the burden of diabetes, asthma, and obesity by addressing the following risk factors: poor nutrition, lack of physical activity, and tobacco use and exposure. To reach its goal, CDPH convened the Community Consortium, which consisted of more than 100 organizations from traditional and non-traditional settings. They included: faith-based organizations, community-based nonprofits, government agencies, hospitals and other health care facilities, schools, universities, private businesses, as well as area residents.

The partnerships that grew out of this program have had a lasting impact on the city of Cleveland and have allowed partners to leverage additional resources to help sustain the work that Steps began. For example, Case Western Reserve University joined CDC's network of Prevention Research Centers in 2009. The Prevention Research Center for Healthy Neighborhoods (PRCHN) focused its first core research project on increasing access to healthful foods in urban neighborhoods. Data collected over the last five years through Steps and other surveillance projects helped build the foundation for PRCHN. Outcome measures, supported by Behavioral Risk Factor Surveillance (BRFSS) and Youth Risk Behavior Surveys (YRBS), have shaped the research and policy agenda. PRCHN and its partners will influence chronic disease prevention research and programming for years to come.

SUMMARY: COALITIONS AND PARTNERSHIPS

A coalition is a partnership of diverse organizations and constituencies working together toward a common goal. It can help achieve population-level policy changes by focusing on multiple strategies with sufficient scale and scope. With a comprehensive action plan, a coalition can engage people, ideas, and resources across sectors and settings to create a synergy of health and prevention efforts that will have a lasting effect on people's health.

Coalitions must be dynamic and responsive to culture, racial, and ethnic diversity, and how people work together. Contextual or environmental factors can enhance or inhibit collaboration and significantly impact a coalition throughout its development .

To build and sustain a successful coalition, you should analyze the issue(s) on which your coalition will focus; create awareness of those issue(s); conduct initial coalition planning and recruitment; develop resources and funding; build infrastructure and leadership; and create a PSE-focused community action plan.

Center for Prevention Research & Development, 2006; Chavis, 1995; Florin et al, 2000



MODULE 3

ESTABLISHING A HOME FOR HEALTHY COMMUNITIES WORK

A key part of sustainability planning is finding an organizational, or community, “home” (CH) for your coalition’s community efforts, one that provides the best chance of continuing those efforts in the long run. This home (not necessarily a physical entity) can serve as a stable, permanent base of operations as well as a fiscal agent for your coalition or organization, helping to ensure the continuation of essential functions such as leadership, funding, learning, and communications (Wong, 2009). It can also create a structure that accommodates a variety of leadership, funding, or other changes, such as expansion of community strategies. As you consider where to create your community home (CH), consider the following criteria:

- **Objective broker of public health resources.** As a neutral facilitator, a CH can enable multiple parties to develop effective strategies for achieving community health goals. For example, some coalition funding agencies may have a political motive for making policy strategies less controversial and try to influence coalition decisions accordingly. For this reason, a funded coalition effort (to achieve a specific public health objective) should have authority to develop its own policies, public position statements, and strategies. In turn, the CH should ensure that progress is being made in the funded areas and that government and agency funds are being used within legal constraints.
- **Capacity to solicit and accept a variety of funding sources.** This is critical because diversification is a central principle of responsible, sustainable money management. The CH must have the capacity to actively solicit funds from a variety of sources, emphasizing long-term sources, such as tax revenue. Such an approach will enable needed shifts in funding for organizations and strategies as well as allow for funding high-need areas, even though grant funds may not be available to address the need(s).
- **Appeal to a variety of community-based organizations.** Participating members and organizations must feel that the CH supports their work, and that their financial, human resource, and visibility needs are being met. It is important the CH take steps to ensure, to the fullest extent possible, that member organizations see this effort as complementing, but not competing with, their goals.
- **Internal infrastructure (administrative, governance, planning, and evaluation) to manage competing interests.** The CH must set up a management structure that fosters collaboration among key community partners. Reports on plans and progress should be developed to reassure key decision-makers that these efforts will positively impact the community.
- **Shift priorities to accommodate changes in goals and community needs.** Community needs, assets, and priorities shift over time. Likewise, CH priorities and solutions will have to shift to improve community health profiles.

Options for Community Home Location

Your coalition's ability to gain and leverage resources will depend on a successful CH location strategy. A CH might be located in a government branch, a 501(c)(3) organization, part of an existing not-for-profit or for-profit venture (e.g., hospital), or even become a shared responsibility among several organizations. The table below examines where a CH can be located to maximize sustainability, based on the characteristics listed above. In addition to promoting strong partnerships, the success of this placement also will require sufficient numbers of skilled staff members to ensure that proper management and community organizational processes are taking place.

The 501(c)(3) Dedicated Community-Based Organization (501 DCOB) Model

In many ways, a dedicated 501 DCOB can be a strong model for meeting most CH criteria. A 501 DCOB must function in a way that allocates support and sets priorities by using a transparent system. This requires an administrative infrastructure focused on resource development, decision making, program-plan development, communication, and accountability. The roles of a 501 DCOB are outlined in the call-out box on page 73.

Community Placement Models for Sustaining Your Efforts		
Potential Placements	Strengths	Weaknesses
Dedicated 501(c)(3) organization	<ul style="list-style-type: none"> • May accept tax-deductible contributions. • May solicit or administer grant funds. • Developed from ground up to be neutral broker of funds and provide administrative oversight. 	<ul style="list-style-type: none"> • May be perceived as competing for community funding or visibility.
Existing nonprofit (e.g., hospital, health agency, foundation)	<ul style="list-style-type: none"> • May accept tax-deductible contributions. • May solicit or administer grant funds. 	<ul style="list-style-type: none"> • Changing priorities and cash-flow issues may negatively impact ability to serve as neutral convener or broker of funds.
For-profit business partner	<ul style="list-style-type: none"> • May manage or leverage investments that are not available to not-for-profit. 	<ul style="list-style-type: none"> • May not be dedicated to altruistic aspects of community health. • Changing priorities and cash-flow issues may negatively impact ability to serve as neutral convener or broker of funds. • May not be viewed with same level of trust as not-for-profit.
Government agency (e.g., local health department, community center)	<ul style="list-style-type: none"> • Better resource for feeding tax revenues into community health work. • Provides science-based approach to community health activities. • Strong connections to state health departments. • Connections with higher-level decision-makers. 	<ul style="list-style-type: none"> • Not able to accept contributions dedicated to specific goals. • Political climate may inhibit ability to serve as independent facilitator of science-based community work. • May try to control coalition work.

ROLES OF THE 501 DCOB COMMUNITY HOME MODEL

- **Leader and advocate:** Carefully examines community health and wellness and advocates for nontraditional approaches and strategies.
- **Overseer of knowledge transfer and translation:** Serves as a knowledge broker, with community members as translators. Provides technical support and training to community stakeholders to improve health and collaboration strategies.
- **Convener and broker of relationships:** Serves as a catalyst of partnerships with towns, cities, counties, state agencies, nonprofits, and businesses.
- **Developer of standards:** Works with national, state, and local organizations to disseminate model practices that have guided community-based PSE strategies.
- **Evaluator of evidence-based practice and practice-based evidence:** Promote/fund evaluation of promising, research-based practices that improve health promotion.
- **Monitor:** Identifies social indicators that present ways to promote community health.
- **Grantor:** Structures funding levels to align with community needs and resources required to achieve public health goals; administers funds in a neutral, coordinated way.

Several communities have set up new 501(c)(3) organizations to serve as brokers of funding and PSE strategies. For example, Live Well Omaha (LWO) has a governance structure that involves representatives from multiple sectors as well as written roles and responsibilities for its board of directors. (For more information, visit www.livewellomaha.org.)



COMMUNITY HOME EXAMPLES

- Buffalo County Community Partners; Kearney, Nebraska: www.bcchp.org
- The Health Collaborative; Austin, Texas: www.healthcollaborative.net
- Community Health Improvement Partners; San Diego, California: www.sdchip.org
- Lycoming County Health Improvement; Williamsport, Pennsylvania: www.lchic.org
- Kanawha Coalition for Community Health Improvement; Charleston, West Virginia: www.healthykanawha.org
- Massachusetts Partnership for Healthy Communities; Boston, Massachusetts: www.masspartnership.org

SUMMARY: ESTABLISHING A HOME FOR HEALTHY COMMUNITIES WORK

For long-term sustainability, a coalition needs both a stable base of operations and fiscal agent (i.e., a “community home”) to position its efforts in the community and help ensure continuation of essential coalition functions, even in the face of internal or external change. The community home should meet several criteria: be an objective broker of public health resources; have the capacity to solicit and accept a variety of funding sources; appeal to a variety of community-based organizations; have in place internal infrastructure to manage competing interests; and be able to shift priorities according to changes in coalition goals and community needs. The community home can be based within one of several entities, such as an existing business, nonprofit organization, or government agency. Or, it can reside in a dedicated 501(c)(3) organization.



MODULE 4

Building Coalition Members' Skills

The American Society for Training and Development (ASTD) estimated that in 2008, U.S. organizations spent \$134.07 billion on employee learning and development (Kranz, 2009). Employers dedicate a great deal of resources to training because they realize it is a good return on investment. Employees benefit as well; training helps them grow their careers by developing new skills, knowledge, and capabilities. Those same benefits help coalition members contribute to sustainability.

Coalitions function best when there are rewarding relationships, acquisition of new knowledge and skills, and collaborative practices between a diverse membership. When both members and leaders feel that the coalition infrastructure supports a learning environment that yields positive results based on participation, then the chances for long-term sustainability are improved. Coalition sustainability is important because of the amount of money, time, and energy involved in putting together multiple agencies and diverse groups of individuals into a cohesive and functioning entity. (Cramer, 2006)

Coalitions can benefit their members by creating new connections and networks in the community as well as exposing them to new skills and information, which helps them improve their ability to work on multiple levels—individual, inter-organizational, intra-organizational, community, and policy (McLeroy, Bibeau, Steckler, & Glanz, 1998).

Member training is a key factor related to improved coalition functioning (Feinberg, Greenberg, & Osgoode, 2004). Training in collaborative decision-making and leadership empowerment can improve levels of member participation (Metzger, Alexander, & Weiner, 2005). Moreover, coalitions with strong collaborative processes are more likely to perceive themselves as effective (Feinberg, Greenberg, & Osgoode, 2004). Joint training programs can help coalition members use new information, work toward a common language, and develop a mutually agreeable process for reaching their goals. Also, repeat training on key topic areas not only helps reinforce material but also reduces member turnover (Feinberg, Greenberg, & Osgoode, 2004).

Suggested Training Topics

Coalition training is geared toward two general areas—collaboration and public health content. Collaborative training can include, for example, team building, leadership training, communication, and project planning. Training topics geared toward improving public health content include current community strategies to promote physical activity and nutrition, understanding of health equity, and elements of the built environment. Coalition members will be more responsive to training if it's designed to address a mutually recognized problem, or if the content aims to help them achieve a planned task.

Because many potential training topics exist, a coalition should use a combination of strategies to determine training priorities:

- 1. Conduct a formal survey:** This method involves surveying members on training needs (by live interviews, paper and pen, or online assessment). Such assessments usually contain a list of training issues or topics that members can rank or comment on. The advantage of a formal survey is that it can reach all coalition members. For an example of a brief, informal training needs assessment developed by the Minnesota Department of Health, see Example 6 in the Appendix on page 103.
- 2. Discuss training needs as part of a meeting agenda:** This method involves brainstorming a list of training needs at a face-to-face meeting, with the goal of reaching a consensus on priority topics. The advantage to this method is that results are based on group consensus.
- 3. Consult with coalition coordinators or technical assistance staff:** Coalitions often have access to staff from member organizations (often funding organizations). Such individuals typically have received high-level training on coalition development and program planning. The advantage of this method is that coalition coordinators or technical assistance observers can provide a detached perspective on a coalition's strengths and weaknesses.
- 4. Consult the literature:** Ongoing coalition research may provide information that coalitions need in order to work more effectively toward specific policy goals. The advantage of this approach is that it offers a look at current best practices for coalition processes and public health content.

With methods 1 and 2, coalition members play a role in identifying training needs, which creates buy-in and support for any planned training activities. Methods 3 and 4 are also very important, because such efforts could illuminate new training needs or priorities. For example, coalition discussion leaders may think they are effectively reaching a consensus on issues or have member buy-in. However, an independent observer may notice that people are quiet or not volunteering their resources to accomplish certain tasks, and thus may recommend team building or facilitation training. These methods provide a scientific or objective check on assumptions about training needs.

Training Approaches

Several methods may be used to offer training to coalition members. The most common is through a workshop presented to full coalitions or task groups. Joint workshops are particularly advantageous when topics involve improving collaboration—e.g., team building, leadership, or project management. Participants can discuss training content and reach consensus on solutions. For example, an evaluation of public health policy training for Steps to a Healthier Washington showed many benefits of bringing together staff from participating organizations. The study found long-term improvements in participant self-efficacy and reported changes in work that were attributed to the training. In addition, these efforts provided an opportunity for organizations to reach consensus on defined policy goals and develop relationships to improve collaborative efforts on projects of mutual interest (Dilley, 2010).

Self-help or one-on-one training approaches also can promote learning on topics such as fostering collaboration/leadership skills and improving public health content. These approaches include mentoring, self-help guides or books, online training (e.g., e-learning, webinars), and CD or DVDS. Of course, some approaches involve a combination of in-person training and electronic media.

Regardless of the approach, coalitions should ensure that training participants have enough time to accomplish the learning objectives, that training content is relevant to the participant, that follow-up opportunities to apply learned skills are provided (shortly after the training), and that a variety of teaching methods (e.g., visual, auditory, applied hands-on work) are used.

Summary: Building Coalition Members' Skills

A coalition infrastructure that supports learning and training—whether through workshops, one-on-one training, or other means—not only provides long-term benefits to coalition members, it helps sustain the efforts of the coalition itself.

Training generally covers the topics of collaboration and public health content. A coalition should use a combination of strategies to determine specific training priorities. These strategies include conducting a formal survey, discussing training needs at a coalition meeting, consulting with coalition coordinators or technical assistance staff, and consulting the literature.

MODULE 5

COMMUNICATION STRATEGIES

Communication is the sharing of meaning by sending and receiving symbolic cues (Grice & Skinner, 2004). In other words, when you communicate, you share your knowledge and ideas with someone else. Communication can occur on five different levels; the levels are differentiated by the number of people involved, the formality of the situation, and the opportunities for feedback.

1. Intrapersonal—communication with yourself.
2. Interpersonal—communication between yourself and another person.
3. Group—communication that generally takes place with three or more people interacting and influencing one another to reach a common goal.
4. Public—communication that occurs when one person speaks face-to-face with an audience.
5. Mass—one person or group communicating to an audience—one so large that it cannot be gathered in one place—through a print or electronic medium, such as a newspaper, magazine, radio, television, or computer (Grice & Skinner, 2004).

Communication strategies are important to sustainability because the way a message is sent can be as important as the content of that message (Grice & Skinner, 2004). Sustainability communication efforts have three main objectives:

1. Communicating a policy message through media: communication directed at soliciting the support of relevant community and organizational leaders and decision-makers.
2. Internal Communication: communication directed at managing the work of a coalition or planning group.
3. Community-wide communication: communication directed at keeping community members, leaders, and key decision-makers up-to-date on the overall Healthy Communities effort.

(The Social Marketing Module has additional information on developing and disseminating messages to build support for coalition policy efforts). See Module 6 “Social Marketing Strategies” on page 84.

1. Communicating a Policy Message Through Media

Coalitions may not have enough funds to invest in advertising as a strategy for population-based behavior change. However, media can be strategically targeted toward a defined population to develop public or decision-maker support around PSE strategies—rather than specific behavioral change—with the intent of achieving social change. Coalitions can partner with funders to promote their position or use “earned media” (press events and editorials) to increase awareness. For a press release example, see example 7 in the Appendix on page 104. However, if coalitions use media to promote PSE strategies, they are advised to work with trained professionals. For more on working with media, see the call-out box below and visit *CDC's Media Access Guide: A Resource for Community Health Promotion* at <http://www.cdc.gov/healthycommunitiesprogram/tools/pdf/mediaaccessguide.pdf>.

ISSUES TO CONSIDER WHEN WORKING WITH MEDIA

Know what makes news; consider these factors for media events or paid advertising:

- **Conflict, competition, or controversy:** These tactics worked well in the campaign against tobacco companies and could be used with the fast-food industry. With sufficient communication and education, these competitors might become collaborators.
- **Timely, ground-breaking, or unusual information:** Scientific discoveries, survey results, new funding, or a different twist on an old problem are all newsworthy.
- **Information that affects a large number of people:** Explain to media contacts how your issue impacts the public or a certain population group.
- **Personal appeal/names:** Individuals telling personal stories leverage larger messages.
- **Visuals:** Television, Web and print news are visual media. Photo essays, videos, demonstrations and other visual aids help ensure that your strategy gets air time.
- **Local angles:** Local surveys, statistics, or examples are important to local viewers, as well as to local media.
- **Prominence:** Enlist a well-known figure (e.g., mayor, politician, sport figure, media star, subject matter expert) to pitch a point of view.
- **Clear and unambiguous message:** Make your message and call-to-action easily understood and limited to one or two key points, or sound bites, for each news message.
- **Framing your message:** Position your message for newsworthiness and public retention. For example, the N.Y. State Public Health Interest Research Group framed its policy message as: "3,000 kids born today will eventually die from smoking-related diseases."

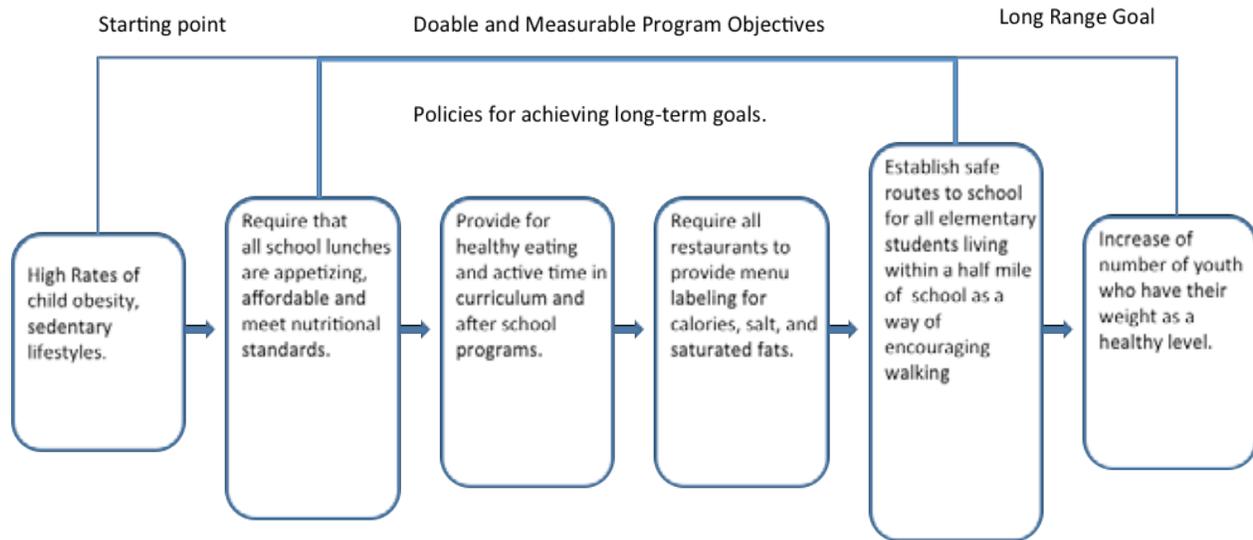
Crafting Your Messages

As your coalition develops messages around a particular issue, consider what other community members and organizations are thinking. Ask stakeholders, subject matter experts, etc. their opinions about the issue. Then compare those opinions with feedback from the general public. Finally, gauge how local media is covering the issue.

For more information on crafting messages, visit the *Smart Chart Tool 3.0* at http://www.smartchart.org/content/smart_chart_3_0.pdf.

Objectives and Decisions

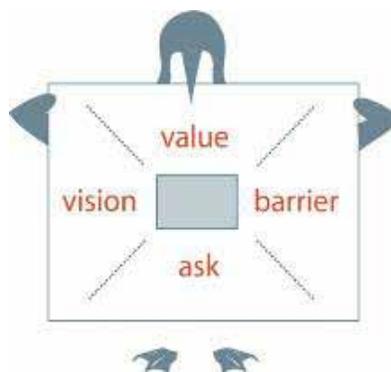
When communicating with decision-makers, be clear about your objectives as well as the actions you want her/him to take. Objectives should be SMART (Specific, Measurable, Achievable, Relevant, and Time-bound) and link to your goals (see below).



Policy Objectives Logic Model

A message box (example below) can help you craft your coalition’s message(s). Before meeting with a decision-maker, prepare responses for each message box section.

- **Value:** Make sure your messages are based on values or concerns held by the decision-maker. Determine where they stand on the issue at hand and what they care about.
- **Barrier:** Overcome barriers, don’t reinforce them. For example, if the decision-maker is budget-sensitive, say, “This policy will save X dollars over 5 years.” Document your claims.
- **Ask:** Ask the decision-maker to take an action that moves your coalition toward its objective AND is within their comfort zone (or offers benefits that outweigh risks).
- **Vision:** Make clear that your coalition and the decision-maker have a shared vision for change. Emphasize rewards and plans for success.



2. Internal Communication

This section describes written communication activities related to coordination-staff support tasks—i.e., managing meetings and keeping all coalition members up-to-date on coalition developments. Studies show that implementation levels are higher when coordination staff support the coalition rather than carry out coalition work, and that frequent, productive communication increases coalition member satisfaction [Emerging Theories in Health Promotion Practice and Research By Ralph J. DiClemente, Richard A. Crosby, Michelle C. Kegler, p 256 – 260, John Wiley & Sons, Inc, 2002 and, What is internal communication? Phil Rabinowitz, http://ctb.ku.edu/en/tablecontents/sub_section_main_1149.aspx].

Why internal communication is important to sustainability:

- Allows members to plan agendas and prepare for meetings.
- Creates a shared vision and promotes predictability, which, in turn, promotes trust.
- Makes the roles and expectations of each coalition member (i.e., what they need to do, and when) clear.
- Enables coalition leaders to track the work of members and program planners.
- Promotes coordination and collaboration among coalition members or work groups.
- Help motivate members by communicating a sense of success and forward movement.
- Updates members on work progress, which promotes a sense of accomplishment and success as well as commitment to the coalition mission.

Major tasks to consider:

- Make draft agendas available several days before each meeting.
- Make meeting notes available soon after meetings; they indicate next steps, who is responsible for them, and when. For other meeting management suggestions, see www.bookmeetingroom.com/effective-meeting-management.
- Conduct effective face-to-face meetings or conference calls that observe effective meeting-management practices, which include running meetings with skilled facilitators who employ consensus-building and conflict-management skills.
- Develop and distribute to all coalition members clear, specific (who, what, where, when, and how much) action plans (long- and short-range) for accomplishing goals.
- Distribute to all members periodic updates, reports, or newsletters documenting the progress of coalition efforts and recognizing the accomplishments of individuals.

3. Community-Wide Communication

This is communication that aims to keep community members, leaders, and key decision-makers from all sectors up-to-date on the overall Healthy Communities effort and encourage their input on goals, objectives, and activities [Source: Based on Community Toolbox, University of Kansas, Promoting Interest in Community Issues, http://ctb.ku.edu/en/tablecontents/sub_section_main_1059.aspx].

Why community-wide communication is important to sustainability:

- Promotes decision-maker buy-in around coalition vision, mission, and plans.
- Conveys sense that coalition funds and other resources are being used wisely; improves name recognition, and reputation.

- Increases awareness of potential funding or other resource development opportunities.
- Increases likelihood of support for coalition strategies.
- Sets the stage for collaboration or coordination between organizations.

Major Tasks to Consider:

[Source: Based on Community Toolbox, University of Kansas, Promoting Interest in Community Issues, http://ctb.ku.edu/en/tablecontents/chapter_1005.aspx]

- Develop media products for keeping community up-to-date on developments in the field or coalition strategies.
- Distribute newsletters by Web site or e-mail.
- Use social media (e.g., Facebook, Twitter).
- Communicate regularly (person-to-person, phone, or e-mail) with community leaders on issues relevant to their interests.
- Write regular columns in community weeklies, newspapers, trade publications, or other relevant publications.
- Release periodic sustainability reports or annual action plans (print or electronic).
- Publish annual reports highlighting current plans and progress as well as future strategies.
- Distribute personal e-mails from coalition members to contacts.
- Schedule appearances on talk shows (e.g., radio, TV, podcasts).
- Present at civic organization gatherings (e.g., PTOs, Elks, Chamber of Commerce, school superintendents, local trainings, conferences).

Though much focus has been paid to various types of media in message dissemination, another way to deliver messages is through conversations we have with others, such as family members and friends. Research has shown the effectiveness of message delivery, comprehension, and action through the use of interpersonal and small group communication. In particular, this research has demonstrated that good old-fashioned word of mouth has been effective in helping individuals to make decisions, ranging from household products to health matters (Beebe, Beebe, & Redmond, 2005). The bottom line: Communication cuts across all coalition activities. Since most individuals make decisions using some combination of information from a media message and interpersonal communication (either seeking or giving advice/opinion), consider using more than one method, so your message can have the most impact (Severin & Tankard, 2001).

SUMMARY: COMMUNICATION STRATEGIES

Effective communication is an important component of sustainability, helping to keep all Healthy Communities work vital, cohesive, and in-sync. Sustainability-related communication efforts have three main objectives: to manage the work of the coalition (internal communication); to keep stakeholders, local leaders, and others in the community well-informed about coalition efforts (community-wide communication); and to utilize various media to build support for Healthy Communities policies among local leaders and other decision-makers (communicating policy message). When communicating about policy, try to craft messages that will appeal to or resonate with the intended audience (i.e., specific groups or populations). In addition, consider how the issue is perceived in the community and frame, fortify, or reframe, as appropriate.

MODULE 6

SOCIAL MARKETING STRATEGIES

Social marketing campaigns are critical for jump-starting a coalition’s efforts to modify a given behavior, gain public support for PSEs, or to help decision makers understand and support Healthy Community efforts. Social marketing strategies promote a social good, whereas commercial marketing promotes making a profit (Andreasen, 1995). If your coalition or community organization plans to launch a social marketing campaign, enlist the help of a social-marketing professional. Here are a few basic concepts to remember:

Diffusion of innovations: This concept suggests that ideas are adopted by priority audiences, individuals, and social systems when they are seen as beneficial and feasible (Rogers, 1995). In promoting public health policies, coalitions and organizations must use varied diffusion strategies (e.g., mass communication, print media, interpersonal communication, one-on-one communication) to gain support. Perceptions differ among segments of the population and between individuals; therefore, marketing strategy messages must be customized to particular market segments or groups with a shared set of beliefs, values, or unique interests (Kotler, Roberto, & Lee, 2002).

Agenda setting: Mass media influences what stories audiences consider newsworthy (Brooks, 2004; McCombs & Shaw, 1994). Encouraging media to have a positive impact on health policy is clearly valuable. A common marketing model used by health organizations is known as the “4 Ps of Marketing”—Product, Price, Place, and Promotion.



4 Ps of Marketing	Explanation
Product/Needs	Product is designed to appeal to perceived needs of individuals/groups.
Price (total cost)	Perceived value of product (e.g., better than alternatives, public good, increased visibility/influence, financial gain) exceeds cost.
Place/Accessibility	Product is easy to obtain or pervasive in society.
Promotion or Communication	Processes that make people aware of price-value/cost cap through advertising, public relations, or personal selling.

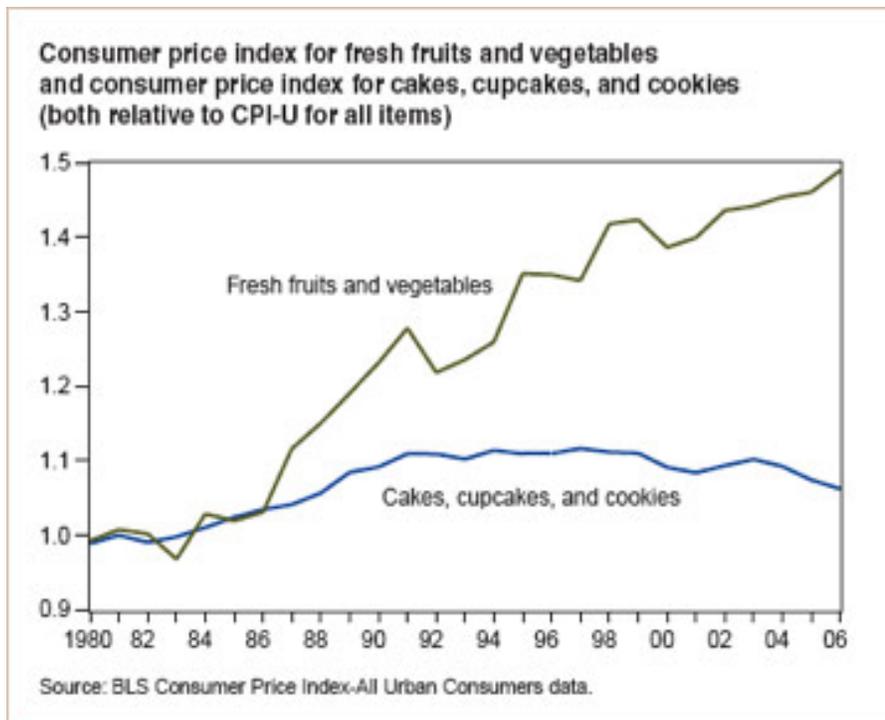
http://www.cdc.gov/nccdphp/dnpa/socialmarketing/training/basics/marketing_mix.htm

The table below shows how businesses use the 4Ps to promote unhealthful products and how health focused organizations can counter-market using PSEs. Here policies emerge as a core component of a social marketing strategy or counter-marketing campaign. For example, enforcing laws that make it illegal for minors to purchase tobacco is a “place” strategy.

Four Ps of Marketing for Unhealthful and Healthful Behaviors		
Part	Commercial Strategy Examples	Public Health Strategy Examples
Product	<ul style="list-style-type: none"> Designed to appeal to perceived needs of individuals/groups (e.g., nicotine in tobacco, caffeine and sugar in soft drinks, fat in fast food). 	<ul style="list-style-type: none"> Design products with clear warning labels/designs that reduce positive mental imagery. Create attractive, fun, and safe environments for physical activity.
Price	<ul style="list-style-type: none"> Keep unhealthful food and beverages affordable. Produce low-cost generic cigarettes. 	<ul style="list-style-type: none"> Taxes on unhealthful products and incentives for healthful eating, physical activity, or tobacco cessation.
Place	<ul style="list-style-type: none"> Make product easy to purchase (e.g., placing products in a prominent area in a store). 	<ul style="list-style-type: none"> Make the healthful choice the easy choice (e.g., create physical activity opportunities accessible through location or safe, affordable transportation).
Promotion	<ul style="list-style-type: none"> Use image promotion as advertising strategy; associate products with fitness, social acceptance, and fun (e.g., toys in meal packs). 	<ul style="list-style-type: none"> Associate behaviors/health opportunities using similar approach with billboards, earned media, financial incentives, and messages from leaders or other prominent figures.

Likewise, the graph below shows that the consumer price indices for healthful foods are much higher than those for unhealthy foods. In this case, a public health “price” strategy (i.e., policy) would increase the price of unhealthy foods. Almost every public health policy would likely touch on one of the 4 Ps.

Consumer Price Indices for Healthful and Unhealthful Foods



SUMMARY: SOCIAL MARKETING STRATEGIES

Social marketing campaigns are critical for jump-starting a coalition’s efforts to modify a given health behavior among community members, gain public support for policy strategies, and to help decision makers understand and support coalition and community efforts. Key concepts include:

- Diffusion of innovations: Use a variety of methods to disseminate public health messages widely, but be prepared to tailor those messages to appeal to specific groups.
- Agenda setting: Use the “4Ps of Marketing” (Product, Price, Place, and Promotion) model to encourage media to have a positive impact on health policy.

SECTION 4: APPENDIX

The following resources are a compilation of activities and examples from Healthy Communities grantees. You can customize them to reflect your organization's needs when developing your own tools and resources.

Activity A:

Evaluation Questions

Thank you for taking the time to fill out these evaluation questions. We appreciate any comments that you have.

1. After today's summit, I understand/have a better understanding of what the coalitions goals are for sustainability.

1	2	3	4	5
Strongly disagree	Disagree	Undecided	Agree	Strongly agree
Comments:				

2. The facilitators stimulated interest in the discussion and activities.

1	2	3	4	5
Strongly disagree	Disagree	Undecided	Agree	Strongly agree
Comments:				

3. The objectives for today's meeting were met.

1	2	3	4	5
Strongly disagree	Disagree	Undecided	Agree	Strongly agree
Comments:				

4. The discussion and activities led to a better understanding of how the coalition will develop a framework for a sustainability plan over the next 6 months.

1	2	3	4	5
Strongly disagree	Disagree	Undecided	Agree	Strongly agree
Comments:				

5. I felt comfortable participating in the activities and contributing to the discussion.

1	2	3	4	5
Strongly disagree	Disagree	Undecided	Agree	Strongly agree
Comments:				

Please write any additional comments on the back of this evaluation. Thank you.

DeKalb County Board of Health, Health Assessment and Promotion, Office of Chronic Disease Prevention, Live Health DeKalb Coalition.

Activity B:**WAYS TO INCREASE SUSTAINABILITY**

Complete individually, in pairs, or small groups. Review sustainability factors below. Mark * for items where you are strong and ✓ for ones you need to work on. Prioritize factors and create action plans to work on highly rated issues.

Design and Implementation Factors (resources, e.g., staff, money, time)

- Create an internal organizational structure that streamlines processes that foster collaboration and enable priority-setting, planning, resource development and allocation, and evaluation.
- Develop a system of communication that informs and collects feedback from key community decision-makers.
- Implement a project that is supported by the community.
- Set clear expectations and communicate them effectively (internally and externally).
- Engage in public relations to keep your activities visible.
- Build in time during your current funding cycle for evaluation.
- Build on established activities.
- Choose an effort that is based on a demonstrated need in the community.
- Choose strategies that align with the group's priorities; help other groups fulfill their mission.
- Develop and implement a plan for sustainability with clear goals and objectives (deliverables).
- Ensure that coalitions and task groups have adequate staff support.
- Obtain enough resources to generate an initial success.
- Make intentional efforts to leverage existing funds to secure more funds and in-kind support.
- Include a training component to create a constituency of supporters.
- Obtain technical assistance to address strategic planning and sustainability needs.
- Include policy, systems, and environmental change to yield long-term outcomes.
- Have a separate group focus on sustainability so that others can focus on desired outcomes.
- Make evaluation a priority; continuously monitor and revise strategies to demonstrate outcomes.
- Create sustainability short- and long-term benchmarks for organizational and policy strategies.

Organizational Setting Factors (Structures and processes related to the organization of the effort)

- Create a strong institution (stable organization, projects are aligned with goals).
- Establish strong organizational leadership.
- Make sure the strategy or activity fits with the member organization's mission, activities, and priorities.
- Develop and nurture well-positioned communicators and program champions.

Environmental Factors (Contextual factors in political, economic, and social environment)

- Look for competing problems that may be barriers to sustainability (e.g., economic slump).
- Create a strong match between community needs and available resources to set project priorities.
- Involve the community in decision-making to build commitment for the project.
- Be flexible; look for windows of opportunity (e.g., new federal/state initiatives, elections).
- Seek funding and other resources from those with available assets and interests in community improvement.
- Build capacity by establishing relationships with funders, other organizations, community at-large, media, and others.
- Encourage funders to increase the proportion of funds dedicated to prevention and strive to set up long term funding sources.

Adapted from University of Kansas Work Group for Community Health & Development 2010b; Mancini & Marek, 2009; Baum et al. 2006; LaPelle et al, 2006; Kaufman, 2002; Holder & Moore, 2000; DeJong & Davidson, 2000; Shediac-Rizkallah & Bone, 1998; Bracht et al, 1994; Goodman & Steckler, 1989b.

Activity C: Current Picture/Pending Items Example

Existing HCC Policy Strategies:						
Strategy	Activities	Begin/End Dates	Partners	Status	Barrier	Reach
<ul style="list-style-type: none"> Implement environmental-change strategies that promote physical activity and safety in the built environment. 	<ul style="list-style-type: none"> Build traffic-calming measures (e.g., traffic circles) to increase pedestrian safety and encourage walking. Develop walking guides and maps to illustrate points of interest within walking distance of downtown (less than 15 minutes). Develop policies that support bicycle use (e.g., identify commercial and public spaces where new bike lanes and racks can be placed). 	<ul style="list-style-type: none"> Year 2 (August 2009) 	<ul style="list-style-type: none"> City Community Planning & Development Transportation Manager – City Public Works Department Department of Transportation 	<ul style="list-style-type: none"> One of the new eight traffic circles was installed in the city, and the work on the second one is about to start. The city's Parks and Recreation Department will complete the project by April 2011. The City has entered into a contract to purchase various bicycle racks for city facilities, city right-of-way, and for private property. 	<ul style="list-style-type: none"> The bidding process has been a challenge for this project, thus requiring the city to go out to bid a second time for the install. 	<ul style="list-style-type: none"> 60000

<ul style="list-style-type: none"> Modify and enhance worksite wellness and vending machine policies. 	<ul style="list-style-type: none"> Year 2 	<ul style="list-style-type: none"> County Health Department Consortium for a Live Healthy County CHART Team Johnson University-Department of Nutrition City personnel department Chamber of Commerce 	<ul style="list-style-type: none"> We have met with outside funding sources and initiated a process to get a grant approved. The city manager has approved initial plans for the stairwell improvement initiative. 	<ul style="list-style-type: none"> This was a challenge because attaining approval to change the vending machines from regular snacks to healthy snacks was difficult. We had resistance from the in-house committee initially handling the vending machines. We addressed this by working with the city manager and the Parks and Recreation Department to fully explain the coalition's initiative, goals and objectives 	<ul style="list-style-type: none"> 500
<ul style="list-style-type: none"> Partner with the county and local organizations to develop a community food distribution policy. 	<ul style="list-style-type: none"> Spring (April) 2010 	<ul style="list-style-type: none"> City Parks & Recreation -Department Department of Agriculture and Consumer Services Institute of Food and Agricultural Sciences Extension Service. 	<ul style="list-style-type: none"> Memo of understanding completed with City of North Miami for Year 1. 	<ul style="list-style-type: none"> The largest challenge here has been the lack of staff available to make the market happen. To have an effective and sustainable market, you want to be able to have the right people in place to kick it off and manage the vendors and venue. 	<ul style="list-style-type: none"> 500
<ul style="list-style-type: none"> Facilitate the use of food stamps at farmers markets. 	<ul style="list-style-type: none"> August 2009 	<ul style="list-style-type: none"> City Parks and Recreation Department Department of Agriculture and Consumer Services Institute of Food and Agricultural Sciences Extension Service. 	<ul style="list-style-type: none"> Department of Agriculture shows supports for Food Stamp (Electronic Benefits Transfer, EBT program) and volunteers to lead next year 	<ul style="list-style-type: none"> Discuss and implement a Food Stamp Program (Electronic Benefit Transfer (EBT) program) with city officials and local farmers markets. 	<ul style="list-style-type: none"> 7000

<ul style="list-style-type: none"> • Create a policy restricting sales of unhealthy, com-petitive foods and beverages sold on school campuses. 	<ul style="list-style-type: none"> • Define wellness policy options and nutrition standards based on research and model policies. • Reach agree-ment that the policy will align with statewide nutrition stan-dards adopted for food served outside of the federal school meals programs. • Develop compo-nents of a draft policy. • Provide policy-education sessions with decision-makers and community members. 	<ul style="list-style-type: none"> • Spring (April) 2010 	<ul style="list-style-type: none"> • City Parks and Recreation Department • Department of Agriculture and Consumer Services • Institute of Food and Agri-cultural Sciences Extension Service. • City schools 	<ul style="list-style-type: none"> • District superintendent is in support of draft wellness policy. 	<ul style="list-style-type: none"> • Marketing agency representatives will be attending the next public hearing on the draft policy. 	<ul style="list-style-type: none"> • 95000
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Activity D: Criteria Grid

Criteria Grid One way to analyze your coalition’s efforts is to use the criteria grid below to help analyze options so that you can make an informed decision.

- A. **Identify efforts.** Identify which efforts may end (see Step 4). List entire effort or components of each effort (such as individual responsibilities of one position).
- B. **Select criteria.** Determine which criteria are most critical when deciding what to continue. Brainstorm criteria and have group vote on which ones to use. Give each person 1/3 as many votes as there are items to select from (e.g., 12 items, each person gets 4 votes).
- C. **Choose response options.** Select what response options you will use to apply criteria (e.g., yes/no/unknown or 1-4). Choose options that are simple, but provide meaningful data.
- D. **Create grid.** Use flip chart to draw grid with proposed activities on one side of the grid and criteria on the other. If you have many criteria, split them into two level Zour tips a -highly desired/needed or criteria that add value. If any “must have” criteria exist, make sure your effort meets them before considering whether it meets others.
- E. **Gather data.** You may need to collect more information to decide whether efforts meet the criteria. You may need to contact others to determine whether anyone else is doing the same work before deciding whether you have met another criterion. Once you have selected criteria and created your grid, decide who will gather needed information for each criterion.
- F. **Complete grid.** Compare each activity to criteria and add relevant comments. Start in small groups; then, tally responses prior to large group discussion.
- G. **Review grid.** Once grid is complete and responses are summarized, review it and highlight efforts that met most criteria. Ask for questions and clarifications; then, move to general or specific impressions.
- H. **Move to Step 6 or gather additional data.** You may be ready to make decisions or your grid may have gaps. If you can get the information reasonably quickly, postpone the decision. Decide who will collect the information and by when. If it is difficult or impossible to get, make your best guess or leave spaces blank and decide how to gather this information in the future.

CRITERIA GRID

Coalition/Organization Name _____

Scale(s) used: 1= No; 2= Probably Not; 3= Probably Yes; 4= Yes

	PSE Strategy 1	PSE Strategy 2	PSE Strategy 3
Criteria 1			
Criteria 2			
Criteria 3			
Criteria 4			
Total			

Activity E: Sustainability Decisions***Sustainability Decisions***

- List each effort to be considered (from Step 4) on colored post-it notes. On different colored notes, list following options:
 1. Maintain within same organization/as is
 2. Ask another organization to take over
 3. Do not continue
 4. Needs further research/discussion

Use Criteria Grid and decision-making process that was agreed to in Step 2.

- Post categories and efforts on separate places on wall. Ask for recommendation of an activity or strategy for one category. If you agree, place it under appropriate category; if not, set it aside. Continue until you have discussed each item. Then, return to set-aside items and decide whether to continue each. Proceed until you reach agreement on all efforts. You may modify items that you decide to continue, but discuss later.
- Review decisions to ensure that group is comfortable. If people hesitate, you may need more discussion. You may have missed key criterion or some criteria that you selected were over- or undervalued. If so, return to Step 5; revise criteria grid by changing criteria or scale.
- If you decide to continue most or all of what you have been doing, prioritize list to ensure that you can reasonably sustain strategies and efforts that group most highly values.

Activity F:

JUSTIFICATION FOR CONTINUED SUPPORT

Group/Organization: _____ **Prepared by:** _____ **Date:** _____

Essential Effort	Justification			Resource Ideas
<ul style="list-style-type: none"> List (a) effort that is essential to continue; (b) health benefit you are trying to sustain 	<ul style="list-style-type: none"> What results have you achieved that justify continuing this effort? 	<ul style="list-style-type: none"> To whom is this effort important? Are they committed to finding resources for this effort? 	<ul style="list-style-type: none"> What cost effectiveness (or other financial justification) can you document for this effort? 	<ul style="list-style-type: none"> (a) Identify resources needed to continue effort; (b) list possible sources of resources; (c) list strategies for future resource stability.

Adapted from California Healthy Start Field Office, 1998

Center for Civic Partnerships

www.civicpartnerships.org

© 2001, Public Health Institute

Example 1

SMART Objectives are:

1. **Specific:** Objectives should provide the “who” and “what.” Use only one action verb, because objectives with more than one verb imply that more than one activity or behavior is being measured. Remember, the greater the specificity, the greater the measurability.
2. **Measurable:** The focus is on “how much” change is expected. Objectives should quantify the amount of change expected. The objective provides a reference point from which a change in the target population can clearly be measured (e.g., over the next 12 months).
3. **Achievable:** Objectives should be attainable within a given time frame and with available community resources.
4. **Realistic:** Objectives are most useful when they accurately address the scope of the problem and action steps that can be implemented within a specific time frame. Also, make sure the objective addresses the scope of the health issue and proposes reasonable next steps.
5. **Time-bound:** Objectives should provide a time frame indicating when the objective will be measured or a time by which the objective will be met. Including a time frame in the objectives helps to plan and evaluate the strategy.

Project Period Objectives are SMART, span the lifecycle of a project period (e.g., 3 years or 5 years), and identify the long-term objective for the selected priority area(s).

Annual Objectives are SMART objectives that quantify the results achieved within a 12-month period and identify policy, systems, or environmental strategies promoting healthy practices and increased exposure to healthy environments.

Activities are milestones or actions that a community team implements in order to achieve an objective. Activities support the accomplishment of annual objectives. Milestones are the most significant activities that a community team will conduct and not the day-to-day tasks, such as conference calls.

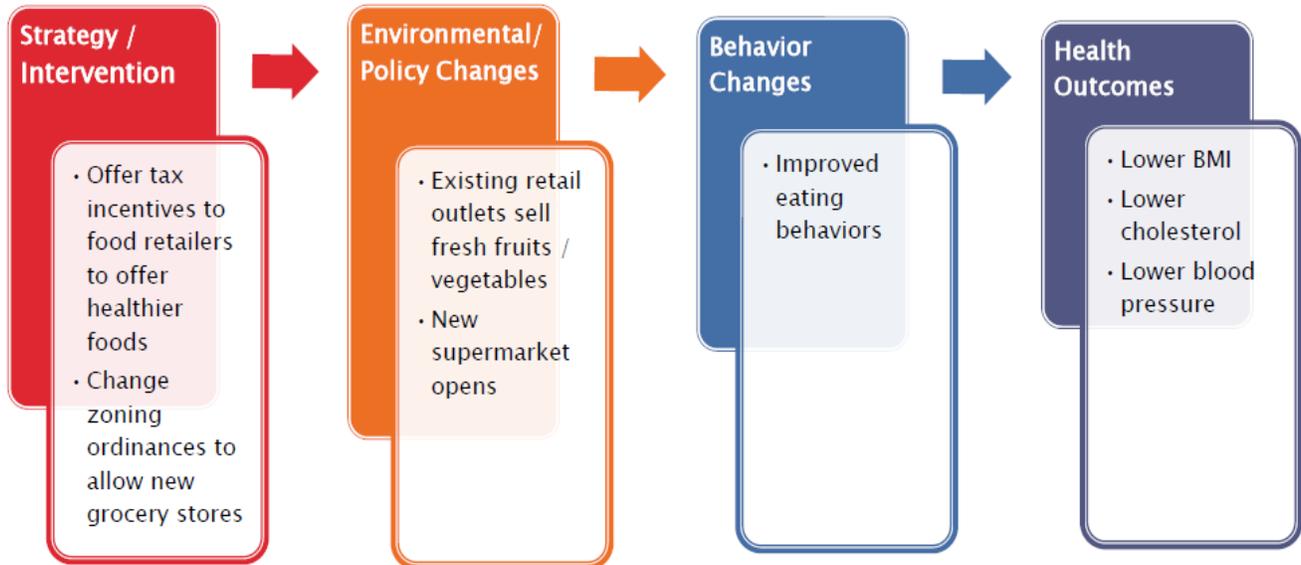
Example of a Community Action Plan with SMART Objectives

Project Period Objective	Description of the Objective	Priority Area
By Year 3, increase the percent of total miles of physical infrastructure for walking by 30%.	Very few neighborhoods and community common areas have sidewalks, trails, or walking paths that can support residents' need for active transportation to school and work and the ability to be physically active within the majority of the community.	Obesity and Physical Inactivity
Annual Objective	Description of the Objective	Sector
At the end of 12 months, increase percent of developments (e.g., housing, schools and commercial) with paved sidewalks to 100%.	Current sidewalk ordinance does not require sidewalks to be paved for new housing developments with less than 120 homes; schools and commercial developments can receive a waiver if building in rural areas (designated by certain zip codes). Ordinance must be evaluated, revised, and approved to exclude such exceptions and begin developing stronger sidewalk networks.	Community-At-Large
		Number of People Reached
		167,000
Activities	Activity Title	Description
	Gap analysis on existing ordinance	Review sidewalk ordinance for policy language and language gaps
	Meeting with county architecture board	Meet with county architecture board about sidewalk development and share draft of revised ordinance language for new developments
	City council meeting	Attend city council meeting to inquire about stance on sidewalks for future developments and current budget for developing sidewalk network
	Town hall meetings	Hold town hall meetings with neighborhood home owners associations to build local support for revised ordinance

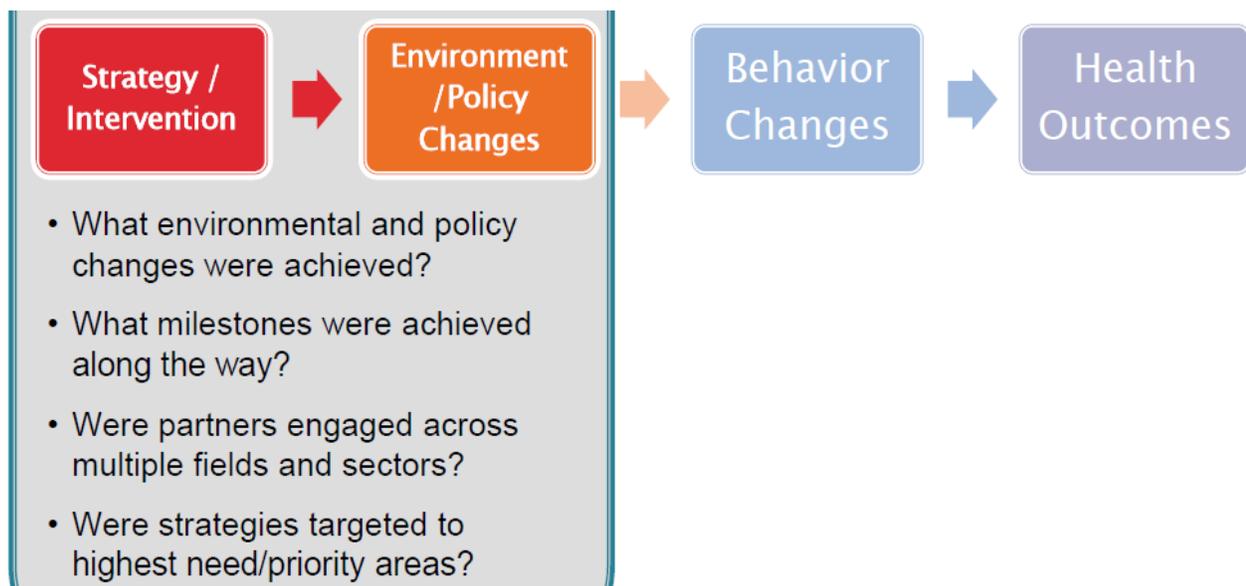
Centers for Disease Control and Prevention. Community Health Assessment and Group Evaluation (CHANGE) Action Guide: Building a Foundation of Knowledge to Prioritize Community Needs. Atlanta: U.S. Department of Health and Human Services, 2010.

Example 2:

Using Logic Models to Think About Evaluating Policy, System, and Environmental Change



Focus on Policy, System, and Environmental Change as the Outcome



ICF Macro

<http://www.macrointernational.com/>

Example 3: Executive Summary for Partners



In September 2004, a group led by the Cleveland Department of Public Health (CDPH) applied for and received funding from the CDC for a 5-year Steps to a Healthier-US (Steps) Cooperative Agreement program. The Steps program gave Cleveland the opportunity to implement programs to reduce the burden of obesity, diabetes, and asthma, and decrease the prevalence of the three related health risk factors: physical inactivity, poor nutrition, and tobacco use and exposure. CDPH took the approach of preventing problems from happening or reoccurring by implementing educational programs, developing policies, and administering services across entire populations. In Cleveland this meant using the neighborhoods as a catalyst for change. Steps is in its 5th and final year of programming, dollars are slated to cease on September 21st, 2009. There have been many successes, yet so much still needs to be done. For this reason, Steps partners are creating a white paper that will outline the need, rationale, and evidence for establishing a Cleveland-Cuyahoga County Chronic Disease Collaborative, an outgrowth of the Steps to a Healthier Cleveland program. Its mission is to promote innovative community partnerships to improve the health of Clevelanders and their neighborhoods.

To sustain these efforts, we need additional funds to continue implementing change to reduce the burden of chronic disease. We are asking the Cleveland Foundation to organize a Grantmakers Forum that will allow Collaborative members to share the white paper and elaborate on the many successes achieved over the past 5 years. The hope is to continue the work that has begun, and to expand our reach beyond Cleveland into the inner-ring Cuyahoga County suburbs. We know that in order to engage policy leaders at the state level, we have to continue demonstrating the success first at a local and regional level. The creation of a Cleveland-Cuyahoga County Chronic Disease Collaborative could be the catalyst for significant change to reduce chronic diseases.

CDPH Steps Successes

- Designed and implemented worksite wellness competitions attracting over 2,907 participants.
- Ohio State University (OSU) Extension set up 42 new community gardens in Steps neighborhoods, engaging 1,429 members.
- American Dietetic Association (ADA) of Greater Cleveland averages 2,064 more screenings for blood glucose per year with Steps funds.
- Cleveland Metropolitan School District serves 1,125 students Grab and Go breakfasts every school day with Steps support.
- During 2006–2008, 556 students have crossed finish line of Rite Aid Cleveland Marathon through We Run this City youth marathon program.
- Over 5,000 Cleveland youth in grades 3–6 learned basic nutrition, food safety, and importance of physical activity through Steps supported nutrition outreach education.
- Over 88 businesses have become members of Healthy Cleveland Business Council.
- In 2005, the Walk a Hound, Lose a Pound program was introduced to Cleveland, and spun off into walking clubs in Ohio City and Tremont in 2008.
- Cleveland Cuyahoga County Food Policy Coalition was created.
- Since 2004, over 700 healthcare providers have been trained through Cuyahoga County Board of Health's DIET (Dietitians Involved in Education and Training) program; 588 toolkits have been distributed in Greater Cleveland area.

Adapted from Steps to a HealthierUS (Steps) Cleveland

Example 4: Executive Summary Action Plan

Activate Quad Cities (AQC) Action Plan for Sustainability 2009–2011

Mission: Create a social and physical environment that encourages healthy lifestyles through a community coalition of government, school, health care, corporate, faith-based, and not-for-profit organizations.

Guiding Principles:

- AQC will advocate for policy changes that support healthy lifestyles.
- AQC promotes increasing physical activity and encouraging healthy eating through coordinated opportunities, education, and a supportive environment.
- In order to accomplish our goals, we must partner with and support other organizations with similar goals to improve wellness.
- Promotional materials and initiatives will be developed in culturally sensitive ways.
- Through our initiatives, we will impact costs related to obesity and inactivity.
- AQC will strive to develop wellness conscious work force to position Quad Cities as a community of choice for new businesses.

Goals and Objectives:

Goal 1 - Comprehensive Safe Routes to School (SRTS) program will be implemented at 50% of elementary and middle schools in Quad Cities by Oct. 31, 2011. (AQC division responsible: Schools)

1. Multi-disciplinary SRTS teams will be established in seven Quad Cities school districts by May 31, 2009.
2. Sustainable training plan for SRTS facilitators will be established by May 31, 2010.
3. Each multi-disciplinary team will submit at least one proposal for federal SRTS funding to their state DOT by Oct. 31, 2009.
4. SRTS programs will be implemented at a minimum of five new school sites by Oct. 31, 2009, five additional by Oct. 31, 2010, and five additional by Oct. 31, 2011.

Goal 2 - Create a sustainable culture of wellness (built environment and policy change) at minimum of 100 Quad Cities businesses, faith based or not-for-profit organizations by Dec. 31, 2011. (AQC division responsible: Corporate/Health care and Agency/Faith-based)

1. Create and implement distribution plan for "Creating a Healthy Workplace" initiative to QC businesses by May 31, 2009.
2. Develop versions of "Creating a Healthy Workplace" initiative targeting faith-based community and not-for-profit agencies and distribute through Parish nurse programs and Agency Directors Association respectively by Dec. 31, 2009.
3. AQC will partner with at least five annual community wellness "programs" to add sustainable component to programs by Dec. 31, 2011.
4. AQC will explore opportunities with Quad Cities' providers of employee wellness programs to include built environment and policy change components in their programs ongoing through Dec. 31, 2011.

Goal 3 - Policies (zoning/development codes) addressing Complete Streets and land usage conducive to livable/walkable communities will be implemented at both regional and municipal levels of government by Dec. 31, 2011. (AQC division responsible: Government)

1. Government division will consider policies to address gaps where sidewalks have not been developed throughout Quad Cities by Mar. 31, 2010.
2. Government division will identify multimodal corridors in Quad Cities that would be implemented by each city and would feed into the Quad City Area Long Range Transportation Plan by Dec. 31, 2010.
3. Bi-state Regional Commission will conduct workshop for developers, bankers, and planners that will focus on context sensitive solutions related to active mobility needs, such as narrower streets, trail systems, and sidewalks in developments, by Mar. 31, 2010.

Goal 4 - All Quad Cities residents will have access to seasonal fruits and vegetables by Dec. 31, 2011. (AQC division responsible: Agency/Faith-based and Government)

1. Surveys of fruit and vegetable availability through food banks, grocery stores, farmers markets and convenience stores will be completed by Dec. 31, 2009.
2. Based on data collected in surveys, the top three needs will be identified and an action plan developed to address those needs by June 30, 2010.
3. Action plans will be implemented by Dec. 31, 2011.

Goal 5 - Inclusive wellness policies will be passed, implemented, and enhanced in the seven Quad Cities school districts by Dec. 31, 2010. (AQC division responsible: Schools)

1. District wellness committees will be formed by June 30, 2009.
2. Policies with guidelines addressing physical activity and food in classrooms, special events, and fundraisers will be passed by each district's school board by May 31, 2010.
3. Policies will be implemented by December 31, 2010.

Goal 6 - Quad Cities YMCAs will continue to provide leadership for AQC, and coordinate expansion of community partners' role in securing sustainable resources for AQC by Jan. 1, 2011. (AQC entities responsible: AQC Leadership Team & Quad Cities YMCAs)

1. Funding plan for 2009, including operational and initiative costs, will be developed and will include the shift in funding from YMCAs to community resources by Jan. 1, 2009.
2. A long-term, sustainable funding plan and expansion of community's role in sustaining AQC will be developed by Sept. 1, 2009.
3. YMCA will continue to provide five staff persons to AQC, and plan for cultivating new leadership at AQC leadership and division levels to respond to ongoing strategic direction and increased staffing/volunteer needs will be completed and implemented by Dec. 31, 2009.

Adapted from Activate Quad Cities (AQC) Strategic Plan for Sustainability 2009-2011
<http://www.activatequadcities.org/>

Example 5: Membership Guidelines



Membership Guidelines

Steering Committee—provides meeting minutes, agendas, guidance, committed staff, meeting space, website, promotional materials, and templates. Will pursue grant opportunities and monitor information provided from National Supporters.

- The membership guidelines will be created by Steering Committee.
- These guidelines will be reviewed yearly by Steering Committee.
- Any changes to membership guidelines must be adopted by majority vote of steering committee .
- The adopted guidelines will be distributed to members each year, will be available on web site at www.achievecommunities.org, and provided to prospective members.
- Ensure match between coalition mission and vision and member interests.

Member Expectations:

- Coalition members will develop and implement plans to accomplish vision and mission of Live Well Stark County.
- Attend (at least 60%) of general coalition meetings (approximately 1 ½ hours per ?).
- Serve as a member of a sub-committee and attend sub-committee meetings as defined in sub-committee roles.
- Participate in identifying, selecting, and promoting innovative policies and environmental changes centered on health of Stark County residents.
- Help assess community needs and identify changes needed and/or existing resources.
- Develop plans of action to carry out Live Well Stark County Mission.
- Assist in evaluating and monitoring of strategies.
- Membership/agency commitments will be one year in length.

Personal Qualities of Member:

- Commitment to improving the health of Stark County Residents.
- Knowledge of Stark County and its residents.
- Broad perspective of identifying and creating policies centered on health.
- Enthusiastic and resourceful, able to ensure that his/her role on the coalition and activities is a fit with his/her interests and resources.

Member Benefits:

- Shared efforts toward common goals.
- Members/member agencies will be recognized in media, education materials, web site, grant proposals, and any other coalition material.

Live Well Stark County: March 2010

Example 6: Training Needs Assessment

TRAINING NEEDS ASSESSMENT		
<p>This survey should be completed by coordinators, steering committee, or members coalitions/organizations and should reflect perceptions about overall training needs. Identified training opportunities then can be provided to individuals to improve their effectiveness or build capacity for carrying out tasks.</p>		
<p>Step 1. Identify which areas of skills and knowledge listed below are most important. Review list & rank training needs on scale from 1-10 (10 = high need). Add to/delete from this list depending on work your group does.</p>		
<p>Step 2. In <i>Order of Priorities</i> column, assign number from 1-24 based on what is most to least important. If several are listed as 10s, you may need discussion to rank them or agree to train on all areas rated "10".</p>		
Training Needs Ranking: 1=inadequate 5=adequate 10=completely adequate		Order of Priorities
Administrative		
1	Manage finances (resource development & fund-raising)	
2	Manage budgets & writing budget justifications	
3	Write clear goals & SMART-specific objectives	
4	Develop effective action plans or project management	
5	Structure coalitions/organizations for effectiveness	
6	Use Internet technologies (e.g. list serves & web sites) & social media (e.g., Twitter) as communication tools	
Process or Collaborative		
7	Sustain Healthy Communities Movement in your community	
8	Sustain coalition/organization or specific strategies	
9	Assess needs/preferences of community (i.e., collecting/using data)	
10	Recruit & maintain coalition membership	
11	Decision making, conflict resolution, and problem-solving methods	
12	Orient & determine roles for new coalition/organization members or volunteers	
13	Hold effective meetings (i.e., meeting management & leadership)	
14	Keep members enthusiastic & invested in coalition/organization & its strategies	
Public Health Content		
15	Improve knowledge of health issues (e.g., work with community sectors on policies related to physical activity, healthy eating, tobacco, or health access/quality)	
16	Understand public health policies & how they relate to creating sustainable environmental & systems changes	
17	Work with media to support policy strategies	
18	Methods for gathering factual health information (e.g., literature reviews)	
19	Enlist support from key decision-makers for issue, coalition/organization & strategies	
20	Influence key health decisions & leaders in community	
21	Work with disparate populations (i.e., health equity)	
20	Evaluate coalition/organization operations & effectiveness	
21	Evaluate strategy successes	
22	Effective presentation or persuasion skills	
23	Write effective peer-reviewed journal articles	
24	Write effective success stories	

<http://www.health.state.mn.us/>

Example 7: Press Release Example**FOR IMMEDIATE RELEASE**

Contact: Allen Strouse

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COMMUNITY RALLIES FOR HEALTHIER FOOD OPTIONS**PRESS CONFERENCE AND CELEBRATION TO FOLLOW; RESIDENTS, FAITH LEADERS, SUPERMARKET OWNERS, AND ELECTED OFFICIALS TO ATTEND**

Harlem, a neighborhood that lacks enough supermarkets to meet neighborhood needs, has the highest rates of obesity and diabetes in New York City. The Harlem community is rallying for healthier food options. East and Central Harlem residents, in conjunction with the Harlem Food & Fitness Consortium, are hosting a press conference on April 28th to release a report on food justice, "Supermarket Closings in East and Central Harlem" which gives recommendations on how to improve community health by increasing access to healthy, affordable food in Harlem.

Community members and advocates, including Mike Hernandez of the Healthy Monday Campaign and James Subudhi of We Act for Environmental Justice, will address the press conference at 5:30pm on Tuesday, April 28th on the Northeast corner of 103rd Street and Lexington Avenue, at a now-vacant lot where a supermarket once stood. The press conference and report will share community visions for the changes that residents would like to see in supermarkets and food access. A community celebration will follow from 6pm to 7:30 at Union Settlement Association, 237 East 104th Street between 2nd and 3rd Avenues.

"We wanted to make sure we documented the burdens that Harlem residents experience in trying to purchase nutritious food," said Hernandez. "The diseases that we face in such large numbers cannot be addressed by better nutrition education alone. We need to make sure that efforts are made to preserve current supermarkets and develop new ones as well as other venues for good food. Our lives depend on it."

Since the town hall meeting, there have been encouraging signs that various government agencies are responding to this crisis, including a \$10 million revolving loan fund established by Governor Patterson. Members of the Consortium are eager to work with government agencies to implement the loan program and to locate appropriate empty stores that could be utilized to develop supermarkets. We are releasing our report now to give a voice to community members, so that our concerns can shape the public policies being designed to promote healthy food access. Recommendations include using government subsidies and incentives to establish new supermarkets and preserve existing ones on the condition that stores provide good jobs, healthy and affordable foods, universally accessible shelves, a clean environment, and good service. The report also highlights possible sites for new supermarkets in Harlem.

The activism of Harlem residents makes clear that food access is about justice and community empowerment. As Emma Jackson says, "When we work together in unison, we understand how to solve problems that affect all of us."

Check us out on YouTube! <http://www.youtube.com/watch?v=Clmsxgx44RY>
<http://www.ymcanyc.org/>

GLOSSARY OF SUSTAINABILITY TERMS

The key terms that are related to and support the concept of sustainability in relation to chronic disease prevention and management are defined below:

ACHIEVE (Action Communities for Health, Innovation, and Environmental change): This CDC Healthy Communities Program initiative supports national partners in their efforts to fund and mobilize communities to develop and implement policy strategies aimed at preventing or managing health risk factors for chronic disease.

Action Plan: A step-by-step timeline of action taken to achieve a particular goal, including details on “who, what, where, when, and how much.”

Assets: Resources needed for accomplishing coalition objectives and carrying out related strategies. Examples include skills, influence, connections, and funding.

Benchmark: A measurement that indicates when a goal or objective has been met or a strategy has been successfully implemented.

Chronic Disease: A disease that is long-lasting or recurrent, including cancer, heart disease, stroke, asthma, and arthritis.

Community Capacity: The resources or assets available to a coalition or community for accomplishing their goals.

Coalition: An entity composed of several diverse organizations or constituencies that have agreed to work together to achieve a common goal.

Coalition Coordinator: A staff member (paid or unpaid) who works to ensure that coalition organizational practices are maintained—e.g., that appropriate people are involved and engaged; meetings occur as planned; internal and external communications are effective; and action steps are implemented.

Collaboration: Collaboration results from people working together and sharing resources to achieve a common goal. It is a well defined relationship entered into by two or more organizations to achieve common goals, and includes a jointly developed structure and shared responsibility, authority, accountability, resources, and rewards.

Communication: Activities designed to keep coalition members and key stakeholders up-to-date, involved, and supportive of Healthy Communities activities. Also includes social marketing tasks for engaging the media in order to reach coalition objectives.

Communication Strategies: A series of steps taken to update and inform coalition members and external leaders about the importance of a specific strategy and a coalition's overall progress.

Community Capacity: Characteristics of communities that affect their ability to identify, mobilize, and address social and public health problems and include citizen participation and leadership, skills, resources, social and organizational networks, sense of community, community power, and understanding of community history.

Community Champions: Members of the community who help promote the importance of policy strategies or the Healthy Communities Movement.

Community Competence: The skillful application of community capacity that includes commitment, participation, conflict management, decision making, and communication.

Community Home: A long-term base of operations in a community that enables stakeholders to maximize resources for identifying and addressing public health challenges.

Community Network: Cross relationships and other connections that help to foster the purpose and goals of a coalition or Healthy Communities Movement.

Community Participation: The creation of opportunities to enable all members of a community to actively contribute to and influence the development process and to share equitably in the fruits of development.

Cooperative Agreement: A close collaboration between a funding agent and one or more recipients, in which the recipients agree to accomplish a set of goals and objectives. **Demonstration Project:** An organized implementation and evaluation of a novel or small-scale approach aimed at assessing the merits of its widespread use.

Earned Media: Favorable publicity for no cost through promotional efforts or events other than advertising (i.e., paid media).

Empowerment: Refers to increasing the spiritual, political, social, or economic strength of individuals and communities. For coalitions, it means ensuring that members know their roles and have the skills, resources, confidence, and authority to carry out their responsibilities.

Environmental Change (Environment): Physical, social, or economic factors designed to influence people's practices and behaviors. Examples of alterations or changes to the environment include:

- *Physical:* *Structural* changes or the presence of programs or services, including the presence of healthy food choices in restaurants or cafeterias, improvements in the built environment to promote walking (e.g., walking paths), the availability of smoking cessation services to patients or workers, and the presence of comprehensive school health education curricula in schools.
- *Social:* A positive change in attitudes or behavior about policies that promote health or an increase in supportive attitudes regarding a health practice, including an increase in favorable attitudes of community decision makers about the importance of nonsmoking policies or an increase in nonacceptance of exposure to second-hand smoke from the general public.
- *Economic:* The presence of financial disincentives or incentives to encourage a desired behavior, including charging higher prices for tobacco products to decrease their use or the provision of nonsmoker health insurance discounts.

Executive (Steering) Committee: A group of individuals responsible for general operating policy, procedures, and related matters affecting coalition activity as a whole. In some cases, steering committees work with community decision-makers to set or obtain policy priorities and to identify task groups to achieve specific objectives.

Facilitator: A discussion leader who enables a process to happen, or enables and encourages people to find their own solutions to problems or tasks. It also can refer to a discussion leader who is skilled at group problem-solving techniques and in building consensus toward an action or decision.

Four Ps of Marketing: As aspect of social marketing, this refers to Product, Placement, Price, Promotion—a strategy to make the perceived benefits of a behavior more important than its cost.

Health Disparities: Differences in health that are not only avoidable and unnecessary, but unjust and unfair' distributions of underlying social determinants of health, such as access to quality health care, housing, educational opportunities, safe jobs, racism, and discrimination.

Health Equity: Achieved when everyone has the opportunity to attain their full health potential, regardless of social position or other socially determined circumstance.

Healthy Communities Movement: A community-based participatory process to improve community life, primarily through policies that creates positive, lasting changes to local systems and environments.

Infrastructure: In context of Healthy Communities work, infrastructure can refer to four areas: 1) Structuring an organization, coalition, or other community planning group to optimally achieve community health objectives; 2) Creating a network of key stakeholders to accomplish stated goals; 3) Changing the built environment to encourage healthful behaviors; and 4) Changing systems within organizations to improve health.

Institutionalization: The process of establishing a policy as a permanent or ongoing fixture in a community or making it part of a structured and usually well-established system.

Jurisdiction: A geographical area over which a court or government body—on the municipal, county, state, or national level—has the power and right to exercise authority.

Memorandum of Understanding (MOU): A document that identifies the mutual roles, responsibilities, and resource commitments between two or more parties involved in a particular effort.

Mentors: Individuals with expertise or experience with a specific strategy to guide the efforts of individuals or, in the case of healthy communities work, the efforts of communities.

Milestones: Short-term accomplishments leading to an eventual longer-term outcome, such as the achievement of a coalition objective.

Mission Statement: Describes the overall purpose of a coalition or organization.

Partnerships: Coalition members, external stakeholders, or decision-makers who support the work of a coalition. The goals are to foster cooperative or collaborative relationships between those people or groups working together.

Policies: Laws, regulations, rules, protocols, and procedures, designed to guide or influence behavior. Policies can be either legislative or organizational in nature. Policies often mandate environmental changes and increase the likelihood that they will become institutionalized or sustainable. Examples of legislative policies include taxes on tobacco products, provision of county or city public land for green spaces or farmers markets, regulations governing the National School Lunch Program, and clean indoor air laws. Examples of organizational policies include schools requiring healthy food options for all students, a district ban on the sale of less than healthy foods throughout the school day, menu labeling in restaurants, required quality assurance protocols or practices (e.g., clinical care processes), or a human resources policy that requires healthy foods to be served at meetings.

PSE: Policy, Systems, and Environmental Changes. In the context of sustainability, this can refer to **Policies** that help create sustainable changes in **Systems** and **Environments**.

Resources: Assets such as funding, in-kind contributions, human talents, and connections.

Sector: A segment of the community—e.g., business, schools, community institutions, workplace, health care.

SMART Objectives: Objectives that are Specific, Measurable, Achievable, and Time-bound. For example: "The number of schools that offer nutritious breakfast and lunch food options in cafeterias will increase from 20% (current level) to 40 percent by October of (year)."

Social Capital: Features that enhance coordination and cooperation within and among organizations. Social capital involves "the relationships and structures within a community, such as networks, civic participation, reciprocity, and trust, which promote cooperation for mutual benefit" (Putnam, 1995, p. 66); it is a bonding relationship between community members and results from their participation (Putnam, 1995; Minkler & Wallerstein, 2005).

Social Justice: The equitable distribution of advantages, assets, and benefits among all members of a society.

Social Marketing: The application and adaptation of commercial marketing concepts and techniques to the analysis, planning, implementation, and evaluation of programs designed to bring about behavior change of target audiences to improve the welfare of individuals or their society. Social marketing emphasizes thorough market research to identify and understand the intended audience and what is preventing them from adopting a certain health behavior and to then develop, monitor, and constantly adjust a program to stimulate appropriate behavior change. Social marketing programs can address any or all of the traditional marketing mix variables—product, price, place, or promotion.

Social Media: Primarily Internet- and mobile-based tools for sharing and discussing information online.

Socio-Ecological Model: Shows how effective strategies for community change occur across individual, interpersonal, organizational, community, and public policy levels. While individual approaches to behavioral change are broadly used and valued in health promotion efforts, these changes are best achieved if reinforced, rewarded, and supported by social norms and networks found within communities and environments that support positive health decisions (Green, Richard, and Potvin, 1996; Stokols, 1996). Policies, laws, regulations, rules, protocols, and procedures established at the municipal level or within organizations can impact the larger population and promote sustainability when threaded through social and environmental infrastructures.

Socioeconomic: Describes the financial and cultural characteristics of a population.

Stakeholder: A person or organization with direct interest, involvement, or investment in a coalition or its efforts.

Strategies: Means by which policy, programs, and practices are put into effect as population-based approaches (e.g., offering healthy food and beverage options in vending machines at schools, implementing activity breaks for meetings longer than one hour) versus individual-based approaches (e.g., organizing health fairs, implementing cooking classes, disseminating brochures).

Strategic Member Recruitment: Process of selecting coalition members and external partners based on how their availability, skills, interests, and resources to support planned objectives.

Sustainability: A community's ongoing capacity and resolve to work together to establish, advance, and maintain effective strategies that continuously improve health and quality of life for all.

Sustainability Plan: A written, community-based plan to achieve sustainability. The plan should include goals, objectives, strategies, community-home structures, resources, and roles of community decision-makers. http://www.civicpartnerships.org/docs/tools_resources/sustainability.htm

Sustainability Planning Team: A group of individuals and organizations that takes responsibility for developing sustainability plan.

Sustainable Communities: People and local organizations and agencies should be empowered to create attractive and economically thriving communities and neighborhoods. They need support to overcome challenging economic, social, and cultural barriers, such as community conflict, power inequalities, economic burden, and disparities. Sustainable communities should be:

- *Active, cohesive, and safe* with a strong local culture and shared community activities.
- *Well run* with effective and inclusive participation, representation, and leadership from a variety of community sectors.
- *Environmentally sensitive* in providing places for people to live.
- *Well designed*, featuring environments that provide opportunities for physical activity.
- *Well connected* via transportation and communication resources that link people to jobs, schools, health-care, and other services.
- *Thriving* with a flourishing and diverse local economy.
- *Well served* with public, private, community, and voluntary services that are appropriate to people's needs and accessible to all.
- *Fair for everyone*, including those in other communities, now and in the future.

Systems Change: Change that impacts all elements, including social norms of an organization, institution, or system; may include a policy or environmental change strategy. Policies are often the driving force behind systems change. Examples are implementing the National School Lunch Program across the state school system or ensuring a hospital system goes tobacco-free.

Transformational Leaders: Change agents who are good role models and who can create and articulate a clear vision, empower followers to achieve at higher standards, lead as peer problem-solvers, build broad-based involvement and participation, and act in ways that make others want to trust them.

Transportation Planners: Professionals who work in a field that involves the evaluation, assessment, design, and positioning of transportation facilities (e.g., streets, highways, footpaths, bike lanes, and public transport lines).

Vision Statement (Inward or Outward): An inward vision statement is a vivid description of the organization as it effectively carries out its operations. An outward vision statement describes the ideal state of a population that the organization is addressing. In the case of tobacco policies, for example, an outward vision statement could be "a tobacco-free society."

RESOURCES

Web site addresses of nonfederal organizations are provided solely as a service to our readers. Provision of an address does not constitute an endorsement of an organization by CDC or the federal government, and none should be inferred. CDC is not responsible for the content of other organizations' web pages.

Center for Civic Partnerships

www.civicpartnerships.org

The Center for Civic Partnerships provides a variety of services related to sustainability and organizational development, including fee-for-service consultation, training, and facilitation, to organizations and collaboratives working to sustain their community improvements. The Center's web site features a tips, tools, and resources on a variety of topics, including sustainability, collaborative function, volunteer management, organizational development, evaluation, and organizational learning. They provide a topic overview and links to online tools, how-to guides, and practical resources and can be accessed at

www.civicpartnerships.org/toolsRes.htm.

Phone: 916-646-8680 Email: ccp@civicpartnerships.org.

For information on purchasing the complete Sustainability Toolkit or sustainability technical assistance services, visit www.civicpartnerships.org/docs/publications/sustainability_toolkit.htm.

Center for Collaborative Planning

www.connectccp.org

This organization has many resources, including a workshop on collaborative self-assessment.

Centers for Disease Control and Prevention

<http://www.cdc.gov/eval/resources.htm#logicmodel>

CDC's Evaluation Working Group has links to resources on developing logic models.

Coalitions Work

<http://www.coalitionswork.com>

A consulting group and web-based resource for tools on building, planning, assessing, and evaluating coalitions and partnerships and their initiatives.

Community Toolbox

<http://ctb.ku.edu>

A web-based resource with collaborative tools for building healthy communities. Refer to Chapter 11 for recruiting volunteers; Chapter 16 for information, tips, and checklists for facilitating meetings; chapter 39 for information on how to use evaluation for sustainability; Chapter 42 for identifying financial resources; and Chapter 46 for planning for long-term sustainability.

Energize, Inc.

www.energizeinc.com/welcome.html

A training, consulting, and publishing firm specializing in volunteerism. This web site contains a resource library with articles, e-books, and website links; referral network listing courses, conferences, and resource centers; and a forum for exchanging ideas and tips.

Foundation Center

www.foundationcenter.org

This organization collects, organizes, and communicates information on U.S. philanthropies. Free searchable online Grantmakers database (basic information), weekly e-mail bulletin; webinars on grant-seeking process; and fee-for-service online database of grant opportunities.

Free Management Library

www.managementhelp.org

This is an extensive online library on a wide variety of topics, including evaluation, facilitation, fundraising, volunteer management, and many other useful topics for non-profit organizations and their partners.

FundsNet

www.fundsnet.services.com

Web site with an extensive listing of funders by name and category with links to web sites—fundraising ideas, kits, and resources also are available.

Grants.Gov

www.grants.gov

A centralized site for identifying and applying for federal government grants that can be searched by keyword, eligibility, sub-agency, or by category and agency (requires registration to apply online for grants).

Grantsmanship Center

www.tgci.com/index.shtml

In addition to posting funding notices, the Center offers training on grant writing, corporate support, and social enterprise.

Idealist

www.idealists.org

This web site includes articles, links, best practices, and tools for non-profit management of paid and volunteer staff. The FAQ addresses questions about nonprofit organizations.

Innovation Network – Point K Learning Center

www.innonet.org/pointk

The Center features free, practical tools and resources for non-profit planning, evaluation, and action. The interrelated Evaluation Plan Builder™ and Logic Model Builder™ walk you through developing an evaluation plan or logic model and provide helpful information and resources. The site includes an extensive list of resources, including workbooks, tip sheets, planning and evaluation links, and publications. Free registration is required to use online tools.

Institute for Cultural Affairs

www.ica-usa.org

This organization offers courses in Technology of Participation® (ToP) to help groups think, talk, and work together. ToP uses structured methods that recognize and honor the contributions of all, allows groups to manage more data in less time, pool individual contributions into larger patterns, and welcome diversity while minimizing conflict. Courses are available throughout California and other parts of the U.S.

Interaction Institute for Social Change

www.interactioninstitute.org

The Institute offers workshops on facilitation, team work, leadership, and organizational change with reduced rates for non-profits. Their 3-day Essential Facilitation course teaches critical strategies and skills for helping groups solve problems, resolve conflict, and build agreement.

Prevention Institute

<http://www.preventioninstitute.org/>

Taking a comprehensive, integrated approach to solving complex health and social issues, the Institute advances prevention efforts that address multiple problems concurrently. The Spectrum of Prevention and other tools and resources are invaluable for a comprehensive understanding of prevention strategies that work.

For information on obtaining the complete *Why and How of Local Policy*, Cohen, 2010; visit

<http://www.preventioninstitute.org/>.

ServiceLeader.org: For Volunteer Managers

www.serviceleader.org/new/managers/index.php

This organization provides information on all aspects of volunteer management, including best practices, toolkits, and downloadable forms. Also contains a section on virtual volunteering if your organization involves or would like to involve online volunteers.

Sustainability Training Institute

www.financeproject.org/special/engage/sti.cfm

The Finance Project offers courses for facilitators, program leaders, grantees, and interested individuals in effective sustainability planning. Their Sustainability Planning Workbook helps users clarify their vision, identify key issues in sustaining their work, and develop strategies to achieve long-term goals.

Sustaining Grassroots CommunityBased Programs: A Tool Kit for Community and Faith Based Service Providers

<http://ncadistore.samhsa.gov/catalog/productDetails.aspx?ProductID=17868>

This toolkit produced by the Substance Abuse and Mental Health Services Administration is designed to help grassroots groups develop sustainable organizations and program services. It provides information to guide sustainability planning, sample tools, fill-in-the-blank templates and worksheets covering organizational assessment and readiness, effective marketing strategies, financial management, sustainability strategies, and results-oriented evaluation.

TCC Group <http://www.tccgrp.com/pubs/evaluation.php>

The Group offers a number of valuable evaluation resources on their website, including, *The Sustainability Formula: How Nonprofit Organizations Can Thrive in the Emerging Economy*

414+14 <http://www.tccgrp.com/pdfs/SustainabilityFormula.pdf>.

Theory of Change—Aspen Institute Roundtable on Community Change and Act Knowledge

www.theoryofchange.org

This site provides an overview of theory of change principles and history and a section with advanced topics for more experienced TOC users. It provides a detailed example of how a coalition created their theory of change. An interactive, online suite of tools for creating, sharing, and using theories of change is being developed by ActKnowledge.

W.K. Kellogg Foundation Evaluation Toolkit, Handbook, and Logic Model Development Guide

- www.wkkf.org/Default.aspx?tabid=90&CID=281&ItemID=2810002&NID=2820002&LanguageID=0
- www.wkkf.org/Pubs/Tools/Evaluation/Pub770.pdf
- www.wkkf.org/Pubs/Tools/Evaluation/Pub3669.pdf

These resources are for grantees, but useful for anyone seeking to develop an evaluation or Logic Model. The Toolkit is a condensed, online version of the Handbook, a guide for designing and conducting a project evaluation. The Logic Model manual provides specific exercises, forms, and checklists to help create your own model, and information on developing a theory of change integrated with that Logic Model.

TECHNOLOGY SITES

Web site addresses of nonfederal organizations are provided solely as a service to our readers. Provision of an address does not constitute an endorsement of an organization by CDC or the federal government, and none should be inferred. CDC is not responsible for the content of other organizations' web pages.

Facebook

<http://www.facebook.com>

Causes on Facebook empowers anyone with a good idea or passion for change to impact the world. Using the Facebook platform, individuals mobilize their network of friends to grow lasting social and political movements.

Google AdWords

<http://www.google.com/adwords>

Google AdWords is an advertising program that allows you to only reach people interested in your organization's information and services. When Google users search on keywords related to your organization, your ad appears next to relevant Google search results under the Sponsored Links sections. A click on your ad takes users directly to your web site.

Google Grants

<http://www.google.com/grants>

Google Grants is an in-kind donation program awarding free AdWords advertising to select charitable organizations. Google supports organizations sharing their philosophy of community service to help the world in areas such as science and technology, education, global public health, the environment, youth advocacy, and the arts.

LinkedIn

www.linkedin.com

LinkedIn is a professional networking site that allows you to reconnect with past and present colleagues and share resources and information with industry experts.

Nonprofit Commons

<http://www.nonprofitcommons.org>

Nonprofit Commons is a nonprofit archipelago in Second Life, consisting of 4 virtual locations (sims). Housing over 80 social benefit organizations, the Nonprofit Commons is managed by a community of volunteers, under the leadership of TechSoup Global: <http://www.techsoup.org>. Nonprofit Commons was designed to create a community of practice for nonprofits to explore, learn and use about the virtual world. Free virtual office space is provided to qualifying groups to meet and network, create a cooperative learning environment and foster outreach, education, and fundraising.

Twitter

<http://twitter.com>

A social networking site that allows you to post current information about your organization that ranges from event information, educational links, resources, or a request for support.

REFERENCES

- Adler, P., & Kwon, S. (2002). Social capital: Prospects for a new concept. *The Academy of Management Review*, 27(1), 17.
- Andreasen, A. R. (1995). *Marketing social change: Changing behavior to promote health, social development, and the environment*. San Francisco: Jossey-Bass Inc.
- Beery, B., Senter, S., Pearson D., Schwartz, P., & Hager, L. (2006). *On sustainability -assessing the long-term impact of three TCWF Initiatives*. Accessed January 20, 2010 at http://www.calwellness.org/pub_reflections/nov_2006.htm
- Beebe, S. A., Beebe, S. J., & Redmond, M. V. (2005). *Interpersonal communication: Relating to others* (4th ed.). Boston, MA: Allyn & Bacon.
- Bens, I. (2005). *Facilitating with ease! Core skills for facilitators, team leaders and members, managers, consultants and trainers*. Hoboken, NJ: John Wiley & Sons, Inc.
- Berkeley Media Studies Group (2009). *What surrounds us shapes us: Making the case for environmental change*. Berkeley, CA: Berkeley Media Studies Group. Retrieved from <http://www.preventioninstitute.org/component/jlibrary/article/id-175/127.html>
- Bossert, T. J. (1990). Can they get along without us? Sustainability of donor-supported health projects in Central America and Africa. *Social Science and Medicine*, 30 (9):1015-1023.
- Braveman, P., & Egerter, S. (2008). *Overcoming obstacles to health: Report from the Robert Wood Johnson Foundation to the Commission to Build a Healthier America*. Princeton, NJ: Robert Wood Johnson Foundation.
- Brooks, A. (2004). Transformational Learning Theory and implications for human resource development. *Advances in Developing Human Resources*, 6:211-225.
- Brownson, R. C., Fielding, J. E., & Maylahn, C. M. (2009). Evidence-based public health: A fundamental concept for public health practice. *Annual Review of Public Health*, Vol. 30: 175-201.
- Butterfoss, F. D. (2007). *Coalitions and partnerships for community health*. San Francisco, CA: Jossey-Bass.
- Butterfoss, F. D., Goodman, R., & Wandersman, A. (1993). Community coalitions for prevention and health promotion. *Health Education Research*, 8(3), 315-330.
- Butterfoss, F. D., Kegler, M. C. (2009) Toward a comprehensive understanding of community coalitions: Moving from practice to theory. In DiClemente, R., Crosby, L., & Kegler, M. C. (Eds.) *Emerging Theories in Health Promotion Practice and Research*, (2nd ed.). San Francisco, CA: Jossey-Bass.
- Butterfoss, F. D., & Whitt, M. D. (2003). Building and sustaining coalitions. In Bensley, R. J., & Brookins-Fisher, J. (Eds.). *Community health education methods: A practitioner's guide*, (2nd ed.). Sudbury, Massachusetts: Jones and Bartlett.
- Center for Civic Partnerships, Public Health Institute (2001). *Sustainability toolkit: 10 steps to maintaining your community improvements*. Oakland, CA: Public Health Institute.
- Centers for Disease Control and Prevention (CDC). (2008). *Media access guide: A resource for community health promotion*. U.S. DHHS, CDC, National Center for Chronic Disease Control and Prevention, Division of Adult and Community Health, Healthy Communities Program. Accessed from <http://www.cdc.gov/healthycommunitiesprogram/tools/pdf/mediaaccessguide.pdf>
- Centers for Disease Control and Prevention. (2010). *Community Health Assessment and Group Evaluation (CHANGE) action guide: Building a foundation of knowledge to prioritize community needs*. Atlanta, GA: U.S. Department of Health and Human Services.
- Center for Prevention Research and Development. (2006). *Evidence-based practices for effective community coalitions*. Champaign, IL: Center for Prevention Research and Development, Institute of Government and Public Affairs, University of Illinois.

- Center for Substance Abuse Treatment. *Sustaining grassroots community-based programs: A toolkit for community- and faith-based service providers*. (2008). HHS Publication No. (SMA) 08-4340. Rockville, MD: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services. Accessed on January 22, 2010 from <http://download.ncadi.samhsa.gov/prevline/pdfs/SMA08-4340.pdf>
- Chavez, V., Chehimi, S., Cohen, L. (2007). *Prevention is primary*. San Francisco, CA: John Wiley & Sons, Inc.
- Chavis, D. M. (1995). Building community capacity to prevent violence through coalitions and partnerships. *Journal of Health Care for the Poor and Underserved*, 6(2), 234–245.
- Chrislip, D., & Larson, C. (1994). *Collaborative leadership*. San Francisco, CA: Jossey-Bass.
- Community Anti-Drug Coalitions of America (CADCA). (2009). *Sustainability primer: Fostering long-term change to create drug-free communities*. Alexandria, VA: Author.
- Cramer, M. E., Atwood, J. R., & Julie, A. (2006). A conceptual model for understanding effective coalitions involved in health promotion programming. *Public Health Nursing*, 23(1): 67–73.
- DeVol, R., & Bedroussian, A. (2007). *An unhealthy America: The economic burden of chronic disease—charting a new course to save lives and increase productivity and economic growth*. Santa Monica, CA: Milken Institute.
- DeJong, W., & Davidson, L. (2000). *Building long-term support for alcohol and other drug prevention programs*. Retrieved on September 20, 2010 from <http://www.higheredcenter.org/services/publications/building-long-term-support-alcohol-and-other-drug-prevention-programs>
- DiClemente, R. J., Crosby, R. A., Kegler, M. C. (2002). *Emerging theories in health promotion practice and research*. San Francisco: Jossey-Bass.
- Dilley, J. A., Reuer, J. R., Colman, V., & Norman, R. K. (2009). Policy and systems change: Collaborative training to increase knowledge, motivation, and self-efficacy for achieving public health; Steps to a healthier Washington: From making pamphlets to making policies. *Health Promotion Practice*, 10:1285.
- Eng, E., & Parker, E. (1994). Measuring community competence in the Mississippi delta: The interface between program evaluation and empowerment. *Health Education Quarterly*, 21:199-220.
- Fawcett, S. B., Schultz, J. A., Francisco, V. T., Berkowitz, B., Wolff, T., Rabinowitz, P. W., & Oliverius, R. W. (2008). Using Internet technology for capacity development in communities: The case of the Community Tool Box. In Rothman, J., et al., (Eds.) *Strategies of Community Intervention*. (7th ed.). Peosta, IA: Eddie Bowers Publishing.
- Fawcett, S. B., Francisco, V. T., Schultz, J., Berkowitz, B., Wolff, T. J., & Nagy, G. (2000). The Community Tool Box: A web-based resource for building healthier communities. *Public Health Reports*, 115, 274-278.
- Fawcett, S. B., Schultz, J. A., Carson, V. L., Renault, V. A., & Francisco, V. T. (2003). Using Internet-based tools to build capacity for community-based participatory research and other efforts to promote community health and development. In Minkler, M., & Wallerstein, N. (Eds.) *Community-based participatory research for health*. San Francisco: Jossey-Bass.
- Feighery, E., & Rogers, T. (1990). *Building and maintaining effective coalitions*. Palo Alto, CA: Health Promotion Resource Center, Stanford Center for Research in Disease Prevention.
- Feinberg, M., Greenberg, M. T., Osgoode, D. W., Anderson, A., & Babinski, B. (2002). The effects of training community leaders in prevention science: Communities that care in Pennsylvania. *Evaluation and Program Planning*, 25(3):245-259.
- Feinberg, M. E., Greenberg, M. T., & Osgoode, D. W. (2004). Readiness, functioning, and perceived effectiveness in community prevention coalitions: A study of communities that care. *American Journal of Community Psychology*, 33(3-4):163-176.
- Florin, P., Mitchell, R. E., Stevenson, J. F., & Klein, I. (2000). Predicting intermediate outcomes for prevention coalitions: A developmental perspective. *Evaluation and Program Planning*. 23(3), 341-346.

- Frieden, T. R. (2010). A framework for public health action: The Health Impact Pyramid. *American Journal of Public Health, 100*(4):590-595.
- Friedman, A. R., & Wicklund, K. (2006). Allies against asthma: A midstream comment of sustainability. *Health Promotion Practice, 7*(2 Supplement):140-148S.
- Giles, W. H., Holmes-Chavez, A., & Collins, J. L. (2009). Cultivating healthy communities: The CDC perspective. *Health Promotion Practice, 10*(2 Suppl):86-87S.
- Goodman, R. M., Speers, M., McLeroy, K., Fawcett, S., Kegler, M., Parker, E., Smith, S., Sterling, T., & Wallerstein, N. (1998). Identifying and defining the dimensions of community capacity to provide a basis for measurement. *Health Education and Behavior, 25*(3), 258-278.
- Goodman, R. M., & Steckler, A. (1989). A framework for assessing program institutionalization. *Knowledge in Society: The International Journal of Knowledge Transfer, 2*, 57-71.
- Granner, M. L., & Sharpe, P. A. (2004). Evaluating community coalition characteristics and functioning: A summary of measurement tools. *Health Education Research: Theory & Practice, 19*(5): 514-532.
- Great Britain Forestry Commission. *Sustainability*. Accessed on January 21, 2010 from <http://www.forestry.gov.uk/forestry/edik-59fmzf>
- Green, L. W., Richard, L., & Potvin, L. (1996). Ecological foundations of health promotion. *American Journal of Health Promotion, 10*(4):270-281.
- Grice, G. L., & Skinner, J. F. (2004). *Mastering public speaking* (5th ed.). Boston, MA: Allyn & Bacon.
- Holder, H. D., & Moore, R. S. (2000). Institutionalization of community action projects to reduce alcohol use and related problems: Systematic facilitators. *Substance Use & Misuse, 35*, 75-86.
- Hornik, R. C. (2002). Epilogue: Evaluation design for public health communication programs. In Hornik, R. C. (Ed.), *Public health communication: Evidence for behavior change*. Mahwah, NJ: Lawrence Erlbaum Associates.
- Hornik, R. C., & Yanovitzky, I. (2003). Using theory to design evaluations of communication campaigns: The case of the National Youth Anti-Drug Media Campaign. *Communication Theory, 13*(2), 204-224.
- Institute of Medicine. (2002). *The future of the public's health in the 21st century*. Washington, D.C.: National Academies Press.
- Institute of Medicine. (2002). Unequal treatment: Confronting racial and ethnic disparities in health care. *Journal of National Medical Association, 94*(8):666-668.
- Jacobs, R. W. (1997). *Real time strategic change: How to involve an entire organization in fat and far-reaching change*. San Francisco, CA: Berrerr-Koehler Publishers, Inc.
- Johnson, K., Hays C., Center, H., & Daley, C. (2004). Building capacity and sustainable prevention innovations: A sustainability planning model. *Evaluation and Program Planning, 27*:137-149.
- Juster, H. R., Loomis, B. R., Hinman, T. M., Farrelly, M. C., Hyland, A., Bauer, U. E., Guthrie S., & Birkhead, G. S. (2007). Declines in hospital admissions for acute myocardial infarction in New York State after implementation of a comprehensive smoking ban. *American Journal of Public Health, 97*(11): 2035-2039.
- Kawachi, I., Subramaniam, S. V., & Almeida-Filho, N. (2002). A glossary for health inequities. *Journal of Epidemiological Community Health, 56*:647-652.
- Kelsey, D., & Plumb, P. (2007). *Great Meetings! How to Facilitate Like a Pro*. Portland, Maine: Hanson Park Press.
- Kotler, P., Roberto, N., & Lee, N. (2002). *Social marketing: Improving the quality of life*. Thousand Oaks, CA: Sage Publications, Inc.

- Kranz, G. (2009). The implications of SCORM conformance for workplace e-learning. *Electronic Journal of e-Learning*, 7 (2):183-90. Retrieved on September 23, 2010 from <http://hdl.handle.net/2381/4604>.
- Kung, H. C., Hoyert, D. L., Xu, J., & Murphy, S. L. (2008). Deaths: Final data for 2005. *National Vital Statistics Reports*, 56(10):1-21.
- Lasker, R. D., & Weiss, E. S. (2003). Creating partnership synergy: The critical role of community stakeholders. *Journal of Health and Human Services Administration*, 26(1):119-39.
- Lasker R., Weiss, E., & Miller, R. (2001). Partnership synergy: A practical framework for studying and strengthening the collaborative advantage. *Millbank Quarterly*, 79(2):179-205.
- Lobstein, T., Baur, L., & Uauy, R. for IASO International Obesity Task Force. (2004). Obesity in children and young people: A crisis in public health. *Obesity Reviews*, 5 (Suppl. 1):4-85.
- Mackenbach, J. P., Stirbu, I., Roskam, A. R., Schaap, M. M., Menvielle, G., Leinsalu, M., & Kunst, A. E. (2008). Socioeconomic inequalities in health in 22 European countries. *New England Journal of Medicine*, 358:2468-2481.
- Marek, L. I., Mancini, J. A., & Brock, D. J. (2009). *Continuity, success, and survival of community-based projects: The National Youth at Risk Program Sustainability Study*. Retrieved on April 1, 2010 from <http://pubs.ext.vt.edu/350/350-801/350-801.pdf>
- Mattesich, P., Murray-Close, M., & Monsey, B. (2001). *Collaboration: What makes it work – a review of the research literature on factors influencing successful collaboration* (2nd ed.). St. Paul, MN: Amherst H. Wilder Foundation.
- McCombs, M., & Shaw, D. (1993). The evolution of agenda-setting research: Twenty-five years in the marketplace of ideas. *Journal of Communication*. 43(2), 58-67.
- McLeroy, K., Bibeau, D., Steckler, A., & Glanz, K. (1988). An ecological perspective on health promotion. *Health Education Quarterly*, 15(4):351-377.
- Metzger, M. E., Alexander, J. A., & Weiner, B. J. (2005). The effects of leadership and governance processes on member participation in community health coalitions. *Health Education and Behavior*, 32(4):455-473.
- Minkler, M., & Wallerstein, N. (2005). Improving health through community organization and community building: A health education perspective. In Minkler, M. (Ed.) *Community organizing and community building for health* (2nd ed.). New Brunswick, NJ: Rutgers University Press.
- National Network for Collaboration. (1996). *Collaboration framework ... Addressing community capacity*. Fargo, ND: Author.
- Noar, S. M. (2006). A 10-year retrospective of research in health mass media campaigns: Where do we go from here? *Journal of Health Communication*, 11, 21-42.
- Norris, T., Ayre, D., & Clough, C. (2000). *Facilitating community change*. San Francisco, CA: The Grove. Retrieved from <http://www.tylernorris.com/pubs/fcc.html>
- Norris, T. (2001). America's communities movement: Investing in the civic landscape. *American Journal of Community Psychology*, 29(2):301-307.
- Norris, T., Wong, E., & Solomon, L., (2009). *The sustainability framework*. Oakland, CA: Kaiser Permanente. Retrieved on April 5, 2010 from <http://www.tylernorris.com/pubs/sustainability-framework.pdf>
- Northouse, P. G. (2001). *Leadership* (2nd ed.). Thousand Oaks, CA: Sage.
- Oxford University Press. (2007). *The shorter Oxford English dictionary* (6th ed.). New York: Author.
- Pluye, P., Potvin, L., & Denis, J. L. (2004). Making public health programs last: Conceptualizing sustainability. *Evaluation and Program Planning*, 27(2):121-133.

- Public Health Law and Policy. (2010). *How to create and implement healthy general plans: The general plan as a tool for change*. Retrieved on April 5, 2010 from http://www.phlpnet.org/system/files/HealthyGP_SectionIII.pdf
- Putnam, R. D. (1995). Bowling alone: America's declining social capital. *Journal of Democracy*, 6(1): 65-78.
- Ralser, T. (2009). *ROI for nonprofits: The new key to sustainability*. Hoboken, NJ: Wiley.
- Rappaport, J. (1984). Studies in empowerment: Introduction to the issue. *Prevention in Human Services*, 3, 1-7.
- Rifkin, S. B., & Pridmore, P. (2001). *Partners in planning: Information, participation and empowerment*. London and Oxford: Macmillian/TALC.
- Rogers, E. M. (1995). *Diffusion of innovations* (4th ed.). New York, NY: The Free Press.
- Roberts, M., & McCombs, M. (1994). *Agenda setting and political advertising: Origins of the news agenda*. *Political Communication*, 11(3):249-62.
- Scheirer, M. A., Hartling, G., & Hagerman, D. (2008). Defining sustainability outcomes of health programs: Illustrations from an on-line survey. *Evaluation and Program Planning* 31(4): 335-346.
- Schwarz, R. M. (2002). *The skilled facilitator*. San Francisco: Jossey-Bass Inc.
- Severin, W. J., & Tankard, J. W. (2001). *Communication theories: Origins, methods, and uses in the mass media* (5th ed.). Boston, MA : Addison-Wesley Longman.
- Shea, S., Basch, C. E, Wechsler, H., & Lantigua, R. (1996). The Washington Heights-Inwood Healthy Heart Program: A 6-year report from a disadvantaged urban setting. *American Journal of Public Health*, 86(2): 166-171.
- Shediach-Rizkallah, M. C., & Bone, L. R. (1998). Planning for sustainability of community-based health programs: Conceptual frameworks and future directions for research, practice and policy. *Health Education Research*, 13(1), 87-108.
- Steckler, A., & Goodman, R. M. (1989). How to institutionalize health promotion programs. *American Journal of Health Promotion*, 3(4), 34-44.
- St. Leger, L. (2005). Questioning sustainability in health promotion projects and programs. *Health Promotion International*, 20(4), 317-319. Retrieved from: <http://heapro.oxfordjournals.org/cgi/reprint/20/4/317>
- Stokols, D. (1996). Translating social ecological theory into guidelines for community health *American Journal of Health Promotion*, 10(4):287-298.
- Story, M., Kaphingst, K. M., Robinson-O'Brien, R., & Glanz, K. (2008). Creating healthy food and eating environments: Policy and environmental approaches. *Annual Review of Public Health*, 29: 253-272.
- Stunkard, A.J., & Penick, S.B. (1979). Behavior modification in the treatment of obesity: The problem of maintaining weight loss. *Archives General Psychiatry*, 36(7):801-806.
- Swerissen, H., & Crisp, B. (2004). The sustainability of health promotion interventions for different levels of social organization. *Health Promotion International*, 19(1):123-130.
- Swinburn, B. A. (2008). Obesity prevention: The role of policies, laws and regulations. *Australia and New Zealand Health Policy*, 5(12). Retrieved from <http://www.anzhealthpolicy.com/content/5/1/12>
- The California Endowment. (2009). Regional initiative helps open school grounds after school hours, creating safe environments where children can play. *Healthy Eating Active Living Storybank*. Retrieved from http://www.healthyeatingactive-communities.org/communications3_23.php
- The Finance Project (2002). *Sustaining comprehensive community initiatives: Key elements for success*. Washington, DC: The Finance Project. Retrieved from www.financeprojectinfo.org/Publications/sustaining.pdf

- Themba-Nixon, M. (2007). *Prevention is primary: Strategies for community wellbeing*. Retrieved from <http://www.preventioninstitute.org/TextTOC.html>
- Trust for America's Health. (2009). *Prevention for a healthier America: Investments in disease prevention yield significant savings, stronger communities*. Retrieved from <http://healthyamericans.org/reports/prevention08/Prevention08.pdf>
- Twiss, J., Duma, S., Look, V., Shaffer, G. S., & Watkins, A.C. (2000). Twelve years and counting: California's experience with a statewide healthy cities and communities program. *Public Health Reports*; 115:125-133.
- United Nations General Assembly (1987) *Report of the World Commission on environment and development: Our common future*. Transmitted to the General Assembly as an Annex to document A/42/427 - Development and International Cooperation: Environment. Retrieved on January 20, 2010 from <http://www.un-documents.net/wced-ocf.htm>
- United Nations. (1981) *Popular participation as a strategy for planning community level action and national development*. New York: United Nations.
- United Nations General Assembly (2005). 2005 World Summit outcome, resolution A/60/1, adopted by the General Assembly on 15 September 2005.
- University of Kansas, Work Group for Community Health and Development. (2010a). Developing a committee to help with financial sustainability. In *Getting grants and financial resources*. Retrieved from http://ctb.ku.edu/en/tablecontents/section_1299.htm
- University of Kansas, Work Group for Community Health and Development. (2010b). Understanding nonprofit status and tax exemption. In *Managing finances*. Retrieved from http://ctb.ku.edu/en/tablecontents/section_1308.htm
- Whitehead M. (1992). The concepts and principles of equity in health. *International Journal of Health Services*. 22:429-445.
- Wilson, P. (1996). Empowerment: Community economic development from the inside out. *Urban Studies*, 33(4-5), 617-630.
- Wolff, T. (2001). A practitioner's guide to successful coalitions. *American Journal of Community Psychology*, 29(2):173-191.
- Wong, E., Norris, T., & Solomon, L. (2009). *Kaiser Permanente Community Benefit*. Unpublished manuscript.
- Zimmerman, M. A. (1984). Taking aim on empowerment research: On the distinction between individual and psychological conceptions. *American Journal of Community Psychology*, 18(1): 169-177.