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HEPATITIS C PREVENTION, SUPPORT & RESEARCH PROGRAM

PREVENTION & COMMUNITY-BASED SUPPORT

REGIONAL PROJECT FUNDING

GUIDELINES

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Financement régional de projet
Directives*

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* Note: Certain sections of the original Guidelines have been reworked and simplified, in the interests of plain language.

1. INTRODUCTION

1.1 Background

In September 1998, the federal Minister of Health announced a wide-ranging initiative to address hepatitis C. The basic aims of this initiative are to improve blood safety, build knowledge about hepatitis C, and ensure that people infected with hepatitis C through the blood system do not incur out-of-pocket expenses for their medical treatment.

The **Hepatitis C Division** has been created to coordinate the federal response to hepatitis C. An important part of the Division is the ***Hepatitis C Prevention, Support and Research Program***. Established in 1999 following wide stakeholder consultations, the Program's four major goals are to:

- ▶ contribute to the *prevention* of hepatitis C infection;
- ▶ *support* Canadians who are infected with, affected by, or at risk of developing hepatitis C, by encouraging the development and dissemination of useful tools and mechanisms;
- ▶ foster *research* initiatives and increase research capacity – to both strengthen the evidence base guiding policy/program development, and expand the options for prevention, treatment and cure; and
- ▶ strengthen the public's potential to respond effectively to hepatitis C, by raising *awareness* and building the required *capacity*.

Two components – *Prevention* and *Community-Based Support* – account for almost half of the five-year budget of this program (\$23 million out of a total of \$50 million). The remainder is allocated among three other components: *Care and Treatment Support*; *Research*; and *Management, Policy, Evaluation and Public Involvement*.

1.2 These Guidelines

The purpose of these Guidelines is to explain how projects focussed on prevention and community-based support may qualify for funding under the ***Hepatitis C Prevention, Support and Research Program***.

1.3 A Population Health Approach

The delivery of the ***Hepatitis C Prevention, Support and Research Program*** is guided by a "population health approach". A population health approach means identifying the important factors that are at work – both separately and together – that affect the health of a specific population (the "determinants of health" – see *Annex A*) and taking these into account when addressing their health issues.

A population health approach aims to bring about *positive changes* not just in people's health status, behaviours and awareness but, for example, in wider social attitudes which may be harming people's health, in policies and legislation, and even in society's important institutions (including our health and education systems) if shown to be contributing to poor health outcomes.

Some important aspects of a population health approach are that it: encourages collaboration among different sectors, disciplines and levels of government; looks for evidence on which to base policy and program decisions; favours preventive solutions (investing "upstream" versus "downstream"); uses a mix of strategies and interventions; and encourages people to play a meaningful role in their health issues.

2. COMMUNITY INITIATIVES

At the community level, the ***Hepatitis C Prevention, Support and Research Program*** works through its *Prevention* and *Community-Based Support* components.

The ***Prevention*** component is intended to help prevent the spread of hepatitis C, especially among those at greatest risk, while the ***Community-Based Support*** component seeks to strengthen local support through awareness and capacity-building activities.

The objectives of *Prevention* are to:

- ▶ contribute to measures that will prevent the spread of the hepatitis C virus, with particular emphasis on those at greatest risk;
- ▶ build the commitment and capacity of society's key sectors and institutions to pursue and support prevention measures in an integrated and collaborative way.

The objectives of *Community-Based Support* are to:

- ▶ contribute to a better understanding and appreciation in Canadian society of the nature and effects of hepatitis C, and greater sensitivity to and support for persons infected with, affected by, or at risk of hepatitis C infection;
- ▶ enhance the capacity of regional/local community-based organizations to provide support to these persons.

2.1 Funding Priorities

The overall aim of funding is to strengthen community participation. Priority is given to initiatives that use a "community development approach". This means ensuring that priority population(s) are meaningfully involved throughout – for example, in identifying needs, developing and carrying out activities, and/or tracking results.

2.2 Funding Principles

The same principles that guide the *Hepatitis C Prevention, Support and Research Program* guide the funding of community initiatives. These principles highlight the importance of:

- ▶ basing decisions on the best evidence obtainable
- ▶ using a population health approach (see *Annex A*)
- ▶ meeting the needs and priorities of people infected with hepatitis C, those at risk of getting it, and others closely affected (such as family, sexual partners and caregivers)
- ▶ finding practical, immediate ways of making people's lives better
- ▶ contributing to initiatives that will last
- ▶ treating everyone with hepatitis C equitably, regardless of how or when they contracted the disease
- ▶ keeping overhead costs down
- ▶ working closely with community partners, other sectors and societal institutions
- ▶ making sure that community efforts are coordinated and complementary
- ▶ tracking results and performance, in order to continue learning and improving.

2.3 Eligibility Criteria

2.3(1) Your Organization

To be eligible for funding, your ORGANIZATION **must**:

- ▶ be a community-based, voluntary, non-profit group or coalition (coalitions may bring together representatives from health units, educational institutions, family/community support services, mental health agencies and other similar organizations); **and**
- ▶ work in Canada, at the provincial, territorial, regional or local level; **and**
- ▶ be accountable to its constituency or membership through *one* of the following:
 - a democratic governing structure (e.g., an advisory/steering committee, a Board of Directors);
 - incorporation;
 - sponsorship by an incorporated organization; **and**
- ▶ plan to: **either** collaborate with community members infected with, affected by or at risk of contracting hepatitis C, **or** carry out initiatives that increase the understanding and support for these populations.

2.3(2) Your Project

To be eligible for funding, your PROJECT **must**:

- ▶ focus on initiatives directed to people who are infected with hepatitis C or at risk of contracting it, or whose lives are closely affected by the disease;
- ▶ advance the objectives of the *Prevention and Community-Based Support* components, and the goals of the **Hepatitis C Prevention, Support and Research Program** as a whole;
- ▶ demonstrate a commitment to involve members of the priority population in identifying and addressing their own needs, and in other phases of the project, as appropriate;
- ▶ be time-limited and have clear milestones (projects may be funded for up to 36 months, based on regional priorities and needs);
- ▶ demonstrate a population health approach, with strong linkages to the determinants of health (see *Annex A*).

2.3(3) Your Project Activities

Your project ACTIVITIES may not duplicate or overlap with any activity for which another level of government has responsibility (e.g., direct delivery of health care services). They may include – but need not be limited to – the following:

- ▶ peer support
- ▶ needs assessment
- ▶ strengthening organizations (e.g., increase membership, expand volunteer base)
- ▶ training and skills development (e.g., patient empowerment, volunteer training)
- ▶ resource development (tools)
- ▶ workshops and other meetings
- ▶ information and awareness activities (e.g., presentations, posters, brochures, information sessions adapted to client requirements)
- ▶ networking/partnership development with community-based organizations and sectors
- ▶ prevention initiatives.

Your project ACTIVITIES may NOT include any of the following:

- ▶ pure research, in any discipline
- ▶ profit-making activities
- ▶ direct services (e.g., medical) for which another level of government is responsible
- ▶ surveys, unless conducted to support project objectives (e.g., needs assessments)
- ▶ capital costs
- ▶ on-going (core) operations

- ▶ any activity that another level of government is responsible for providing.

3. THE APPLICATION

3.1 How Do I Start?

Please contact your Health Canada – Population and Public Health Branch (PPHB) regional office to discuss your project ideas and to obtain an application form. See *Annex B* of these Guidelines for a complete listing of regional offices.

3.2 What Will Help My Application to Succeed?

The elements of a successful application are listed below:

Priority Population

- ▶ Describe your priority population(s).
- ▶ Explain how your project allows for their meaningful involvement.

Statement of Need

- ▶ Explain how you know your project is needed.
- ▶ Say how you identified your priority population(s), and how they helped you to understand what they need.
- ▶ Estimate how many people (infected, affected, at risk of hepatitis C) your project will reach or benefit.

Population Health Approach

- ▶ Demonstrate a “population health approach” – e.g., identify one to three *major* determinants of health that you plan to address in your project, say why you have selected them, and explain how you will address them.

Objectives

- ▶ State your project objectives clearly.

Work Plan

- ▶ List your:
 - project goal(s)
 - objective(s)
 - activities
 - expected results, including both outputs (e.g., products, events) *and* outcomes

(positive changes).

- ▶ Say who will be responsible for each set of activities.
- ▶ Provide a timetable for your activities.

Evaluation Plan

- ▶ Explain how you will know if your project has worked (e.g., whether you have met your goals and objectives).
- ▶ Include evaluation costs in your budget, but limit them to 10% of your total projected expenditures (you may wish to hire an outside evaluator).

Useful reference: *Guide to Project Evaluation: A Participatory Approach* (Health Canada)
Web site address: www.hc-sc.gc.ca/hppb/familyviolence/html/1project.htm

Detailed Budget

- ▶ Provide a detailed budget, outlining all anticipated costs (see Application Form, *Annex B*).

Partnerships

- ▶ Explain how your organization will partner/collaborate with other sectors (e.g., how will other community-based, non-governmental, voluntary, professional and/or business organizations share the work and/or costs?).

Sharing Knowledge

- ▶ Describe how, and with whom, you plan to share your project results.

Sustainability Plan

- ▶ If you expect your project to continue beyond the funding period, explain how you believe this will happen (e.g., where will the support come from?).

3.3 How Will My Application Be Assessed?

The review process has three stages:

- ▶ First, your application will be reviewed for **completeness** by your regional office (Population and Public Health Branch). If any information is missing, the hepatitis C program consultant will get in touch with you.
- ▶ Once your application is considered complete, it will be reviewed to ensure that it:
 - meets all the **eligibility criteria**; and
 - addresses the current **funding priorities** (Hepatitis C *Prevention and Community-Based Support* components).
- ▶ If your application satisfies these two requirements, it will go forward to a **regional review committee**. The committee will be chaired by Health Canada, and may include community people who work in hepatitis C and related fields,

provincial/territorial government representatives, experts (e.g., on the intended population, project objectives, activities) and Health Canada representatives.

3.4 What Will Happen Next?

- ▶ You will be notified whether or not your project application has been successful.
- ▶ If your application has been successful, the Hepatitis C program consultant in your region will be available to work with you, and to explain the financial, reporting and other administrative requirements that you will have to meet. Your obligations will be set out clearly in the funding agreement which you (as project sponsor) and Health Canada must sign before any funds are released.
- ▶ You may be asked to take part in a provincial/territorial and/or national evaluation.

Please contact your Health Canada – Population and Public Health Branch (PPHB) regional office to discuss your project ideas and to obtain an application form. See *Annex B* of these Guidelines for a complete listing of regional offices.

ANNEX A POPULATION HEALTH - DETERMINANTS OF HEALTH

The overall goal of a population health approach is to maintain and improve the health and well-being of the population as a whole, and to reduce inequalities in health among different groups. This implies a need to understand how various social, economic and physical factors work – both separately and together – to affect collective health and well-being.

Key factors and conditions known to influence population health (the “determinants of health”) include the following:

Income and Social Status

- ▶ This is the single most important determinant of health. Increases in income generally lead to a higher social ranking and, by extension, a greater ability in people to protect their health – through such things as safe housing, and nourishing themselves and their families properly.

Social Support Networks

- ▶ Support from families, friends and communities is linked to better health. Caring and supportive relationships can sometimes offset the negative influences of smoking, physical inactivity, obesity, high blood pressure and other risk factors.

Education

- ▶ The more educated people are, the more likely they are to be healthy. This stands to reason: education increases opportunities for income and job security, and gives people a sense of control over their lives – both key factors influencing health prospects.

Employment and Working Conditions

- ▶ Unemployment, under-employment and stressful work are all associated with poorer health. Conversely, people’s health prospects improve when they have control over their work and are subjected to fewer stress-related demands on the job.

Social Environments

- ▶ Societal values and rules affect the health and well-being of individuals and populations. Living in a socially stable society – one that recognises diversity, and offers safety, good relationships and cohesive communities – can help counteract many health risks.

Physical Environment

- ▶ Physical factors in the natural environment (e.g., air, water quality) can affect health in major ways. Similarly, the human-built environment plays an important role, with housing, workplace safety, community and road design all known to influence health outcomes.

Personal Health Practices and Coping Skills

- ▶ Healthy choices and lifestyles, people's knowledge and behaviours, and their skills for coping with life in healthy ways are all important in determining health. In large part, these depend on the presence of a supportive social environment.

Healthy Child Development

- ▶ Prenatal and early-childhood experiences can have powerful effects on people's long-term health, well-being, coping skills and competence. For example, a low birth weight is known to be associated with continuing health and social problems later in life.

Culture

- ▶ Culture and ethnicity illustrate the links among physical, mental, spiritual, social and economic well-being. For example, people's understanding of their health, their health practices, their dietary and other choices and their concept of family can all affect their health, their interactions with the health system, and how others respond to them. Wider political, economic and geographic factors may also be at work.

Health Services

- ▶ Health services – particularly those that maintain and promote health, prevent disease and restore health – make a clear contribution to the health of a population.

Gender

- ▶ The societal roles, traits, attitudes, behaviours, values, power and influence assigned to people on the basis of their sex can have a profound effect on their health. Each gender must deal with particular health issues, and each may be affected in different ways by the same issue.

Biology and Genetic Endowment

- ▶ The basic biology and organic make-up of the human body are fundamental determinants of health. Inherited predispositions influence the ways in which individuals are affected by particular diseases or health problems.

ANNEX B POPULATION AND PUBLIC HEALTH BRANCH (PPHB) REGIONAL CONTACTS

Contact your Health Canada (Population and Public Health Branch) regional office, and ask for the program consultant working on hepatitis C. (Please note: If you are calling long distance, the program consultant will call you back.)

BC/YUKON

Health Canada
PPHB Regional Office
440F-757 West Hastings Street
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Saskatchewan contact

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ATLANTIC

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For more information, visit Health Canada's Hepatitis C Web site at:
www.healthcanada.ca/hepc

