Table of Contents

1. Background to tools .................................................................................. 3
2. Conceptual Framework for the tool ............................................................ 5
3. Description of the evaluation tools .............................................................. 7
4. Using the tools .......................................................................................... 9
5. Assessment Tool ...................................................................................... 12
6. Context tool ............................................................................................ 38
7. Monitoring tool ........................................................................................ 46
8. End-of-CI tool ........................................................................................ 48
9. Glossary of Terms .................................................................................... 55
References ..................................................................................................... 56

Appendix: Literature review - Conceptualizing the Domains of Community Capacity ................................................................. 57
1. Background to tools

This document describes a series of tools to assess community capacity building for the purposes of evaluating community initiatives (CIs) in Ontario’s Community Health Centres. Community initiatives are defined as:

“sets of activities aimed to strengthen community capacity to address factors affecting collective health”

As community capacity building is central to community initiatives, this tool uses community capacity as the basis for CI evaluation. Community capacity is:

“(1) the characteristics of communities that affect their ability to identify, mobilize, and address social and public health problems’ [and]
(2) the cultivation and use of transferable knowledge, skills, systems, and resources that affect community- and individual-level changes consistent with public health-related goals and objectives.”

This tool was prepared using new and state-of-the-art literature regarding community capacity and evaluations of community programming. This project is not an in-depth literature review: this tool is “literature-informed.” Those searching for an in-depth analysis of the theory of community programming are encouraged to read Kwan et al. (2003) and Rajkumar (1997).

From this literature-informed work, community capacity was broken down into 11 domains, with 29 selected indicators grouped under 4 main action areas (see table 1). For the purposes of creating a tool that could be readily used by practitioners, only the most relevant indicators were included in the main list. Therefore, this grouping of domains and indicators should be seen as a base, from which health centres are encouraged to add specific areas for measurement as deemed relevant to their work. Additionally, different CHCs may wish to prioritize selected indicators, or measure them in greater detail in order to facilitate evaluation of particular CIs.

Evaluating and assessing progress in community-based work is a complex process. This tool is based on the most recent research and literature in this field, and on existing tools that have been widely used across Canada. This being the case, the user should feel confident that they are using a tool that is well-supported by evidence. AOHC and the Ontario CHCs have the potential to be trail-blazers in this work. It is hoped that the tool will facilitate planning and evaluation of CIs, as well as support the development of a collective body of
knowledge from these projects that can be used to support practitioners in their work.

**NB:** It is planned that these tools would be translated into electronic form in order to facilitate easy use by CHC staff.
2. Conceptual Framework for the tool

The tools are based on a conceptual framework for understanding community capacity building. This framework was developed based on the most recent national and international literature in the area (see Appendix), and is presented in the table, below. There are four “essential elements” that are necessary for effective community capacity building. These elements comprise a total of 11 domains. Indicators are then presented for each domain.

It is this understanding of community capacity building that informs the development of the tools presented in this paper.
<table>
<thead>
<tr>
<th>Essential elements</th>
<th>Domains</th>
<th>Selected Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enabling community leadership</td>
<td>Participation</td>
<td>• A broad range of community organizations and populations are involved. 2, 5&lt;br&gt;• Barriers to participation have been overcome. 2, 5, 6&lt;br&gt;• Multiple opportunities for participation exist. 3, 6</td>
</tr>
<tr>
<td></td>
<td>Leadership</td>
<td>• Roles and responsibilities of leaders are defined. 2, 5&lt;br&gt;• (New) community leaders become progressively more involved. 2, 5, 6&lt;br&gt;• Conflict resolution mechanisms are in place. 6</td>
</tr>
<tr>
<td></td>
<td>Community control</td>
<td>• The community influences the project in all phases. 2&lt;br&gt;• Community members have formal representation in the project. 3, 7, 8</td>
</tr>
<tr>
<td>Fostering community identity</td>
<td>Diversity and equity</td>
<td>• Events are accessible to a range of populations, including vulnerable groups. 7, 9&lt;br&gt;• Leadership and other roles are represented by a diverse group. 7</td>
</tr>
<tr>
<td></td>
<td>Sense of community and identity</td>
<td>• Members have a sense of community and pride, including celebrations. 2, 3, 5, 8&lt;br&gt;• Members have concern for, and take action on, community-level issues. 2, 3, 6, 8&lt;br&gt;• The community has defined norms, values, attributes. 2, 6</td>
</tr>
<tr>
<td>Developing skills and resources</td>
<td>Skills, learning, and knowledge</td>
<td>• Relevant needs and strengths have been identified. 5, 6&lt;br&gt;• Learning and training opportunities are present within the community. 3, 5, 6</td>
</tr>
<tr>
<td></td>
<td>Resources</td>
<td>• The CI has access to internal resources. 2, 5, 7&lt;br&gt;• The CI has access to external resources. 2, 5, 8&lt;br&gt;• Resources are pooled and shared equitably. 2, 3, 5, 6, 8</td>
</tr>
<tr>
<td></td>
<td>Reflection</td>
<td>• The community is involved in exploring root causes and searching for solutions. 2, 5&lt;br&gt;• The CI addresses some of the root causes of issues. 5&lt;br&gt;• Agency staff reflect on CI efforts. 2</td>
</tr>
<tr>
<td>Building and utilizing structures and relationships</td>
<td>Community and internal structures</td>
<td>• Areas for CHC support in community have been identified and developed. 3, 5, 7&lt;br&gt;• Community structures have strong relationships and communication. 3, 6, 7&lt;br&gt;• Community agencies have articulated their values and priorities. 6, 8</td>
</tr>
<tr>
<td></td>
<td>External supports and community relations</td>
<td>• External agencies have supportive policies and plans. 3, 5, 7&lt;br&gt;• There are positive external perceptions of the community. 7&lt;br&gt;• There are positive community perceptions of the agency. 3</td>
</tr>
<tr>
<td></td>
<td>Linkages</td>
<td>• Community structures and CHCs have strong current/historical links. 3, 5, 8&lt;br&gt;• Diverse sectors (like-minded and dissimilar) network and work collaboratively. 2, 5, 8</td>
</tr>
</tbody>
</table>
3. Description of the evaluation tools

In this paper we present a total of four tools. It is intended that these tools be used together to support planning, on-going monitoring, and final evaluation of CIs. Practitioners are encouraged to use the Assessment Tool as a way to stimulate discussion with community members, particularly members of the leadership group, to ensure that the evaluation reflects community impressions and that action plans are developed jointly with the community. Management may also be involved in order to ensure that the CI is understood and coordinated with other areas of activity of the CHC.

3.1 Assessment Tool:
The purpose of the Assessment Tool is to take a “snapshot” of the factors that contribute to community capacity at a given point in time. The Assessment Tool is based on the work of PHAC and uses a “journey” metaphor to describe progress related to community capacity. The tool is organized by domains and corresponding indicators in the order they appear in Table 1.

For each indicator, practitioners, community leaders, and/or management are encouraged to discuss the statements under “just started”, “on the road”, “nearly there”, and “we’re there” and indicate the statement that best applies to the CI at that point. If desired, those filling in the tool can add a note to provide further explanation or context. If the CI has already reached the “we’re there” stage, those completing the tool should reflect on whether or not they have done additional relevant work. If so, they should check off the “what’s next” box and add a brief description of the action. From “just started” to “we’re there”, results can be quantified and analyzed accordingly (e.g. with bar graphs, on scales). Additionally, for each indicator, those filling out the tool can list the main relevant enablers and/or barriers that they face.

There are two important considerations to note with respect to assigning a rating to each indicator:

- Although the ratings are based on a “journey” metaphor, the journey rarely follows a straight line from origin to destination. In reality, there can be many deviations along the way, for example, due to the fact that key community leaders might leave the project due to some unavoidable circumstance. Therefore, the practitioners and community leaders who assign the ratings should not “judge” a decrease in a rating as being
necessarily negative; it should be reported as part of the evolution of the CI and strategies modified appropriately.

- In reality, the journey of building community capacity is more often cyclical than linear. The completion of one stage is usually the start of the next. This should be taken into account when completing the form.

At the end of each domain section (e.g. participation, leadership), those filling out the tool have the opportunity to:

- “tell the story” (note main factors relevant to progress on that domain),
- list “best practices or key learnings” (any relevant information they feel should be shared within the CHC and among CHCs in order to improve CIs)
- jot down an action plan, given their current state.

Qualitative data is just as important as quantitative data as practitioners have expressed a desire for qualitative data collection that “tells the story” of their project and helps to capture lessons learned from the experience.

3.2 Context tool:
The context tool provides information to plan the CI and analyze the context in which the CI will operate. This tool – based on current information gathered for CIs – is mainly quantitative and relatively easy to fill out. The information gathered may be updated as necessary, but should primarily be used for preliminary planning. This information will also be collected on an AOHC database of CIs which will be searchable by CHC staff.

3.3 Monitoring tool:
The monitoring tool provides the opportunity to update the type of information collected with the context tool, as well as noting the resources expended on the CI (time, supplies, etc. that might be relevant), as well as progress on other indicators of interest over the monitoring period. As well, any major achievements to date and programming spin-offs should be noted here.

3.4 End-of-CI tool:
At the end of the CI, this tool should be used to provide a final account of the information collected with the context and monitoring tool, as well as an overall impression of the journey of the CI.
4. Using the tools

4.1 When to use the tools
It is envisioned that the tool will be used at three stages of the CI:

- Start of CI:
  - Use Assessment Tool and Context Tool with community and staff (preferably) for a starting point and to look for areas to develop.
  - Questions: “Under what conditions is the initiative operating?”; “What barriers or enablers can we anticipate for this CI?”; “Where should we focus our work?”

- Ongoing Progress:
  - Use Assessment Tool and Monitoring Tool with staff, community, and management for ongoing monitoring, some stories and key learnings, a reflection on the current path, and any changes needed
  - Monitoring may take place monthly among CHC staff, every 3-4 months with community involvement as well.
  - Annual or bi-annual evaluations should also include management.
  - Question: “What is our progress to date?”

- End of CI:
  - Use Assessment Tool and End-of-CI Tool at the end of project to reflect on overall trends, learnings, and next steps
  - Will ideally be done with staff, community, and management
  - Questions: “What did the CI accomplish?”; “How did it evolve or develop over the life of the CI?”; “What did we learn from this experience?”

The use of the tools is summarized in the following table.
# Use of CI Community Capacity Tools

<table>
<thead>
<tr>
<th>Stage of CI</th>
<th>Which Tool to Use?</th>
<th>Purpose</th>
<th>Key Questions to be addressed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Start</td>
<td>Context Tool</td>
<td>Provides general background on project (which can be placed on an AOHC database to be accessible by other CHCs). Should be updated only as required.</td>
<td>Who is doing this CI? What is this CI all about?</td>
</tr>
<tr>
<td>Assessment Tool</td>
<td>To take an initial “snapshot” of the various indicators of community capacity at start of project.</td>
<td>What barriers or enablers can we anticipate for this CI? Where should we focus our work?</td>
<td></td>
</tr>
<tr>
<td>Ongoing progress (every 3-4 months)</td>
<td>Assessment Tool</td>
<td>To take regular “snapshots” to assess changes in indicators of capacity building.</td>
<td>Where have we made progress in capacity building? Where do we need to focus?</td>
</tr>
<tr>
<td>Monitoring Tool</td>
<td>To document key activities, accomplishments, stories and learnings throughout the CI. Anecdotal format.</td>
<td>What has happened? What can we learn from this?</td>
<td></td>
</tr>
<tr>
<td>End of CI</td>
<td>Assessment Tool</td>
<td>To take a final “snapshot” to assess changes in indicators of capacity building over the life of the CI. To summarize learnings in process of doing capacity building</td>
<td>Where have we made progress in capacity building? What did we learn about capacity building?</td>
</tr>
<tr>
<td>End-of-CI Tool</td>
<td>To summarize accomplishments made over the life of the CI. The combination of the final Assessment Tool report and the End-of-CI Tool report summarizes the evaluation and learnings of the CI. A summary of any additional evaluations of the CI (e.g. on areas other than capacity building) can be attached to the End-of-CI Tool.</td>
<td>What was accomplished through this CI?</td>
<td></td>
</tr>
</tbody>
</table>
4.2 How to use the tools

Guidance

- The tool is set up along the following lines
  - Main areas for action
    - Specific domains
    - Selected indicators
  - For each indicator, check off what statement best describes the current state of the CI using the “journey” metaphor
  - Add description/commentary if helpful or relevant
  - NB: “what’s next” is not a prescriptive section, but rather gives a potential example of continuing processes in a given indicator once a CI has reached the “we’re there” stage. You may add a comment or example of what is in your “what’s next” section.
  - Add description of main enablers/barriers, if desired
  - Continue on to the next indicator
  - At the end of each domain:
    - Note the “story” of progressing on that domain
    - Note the key learnings/best practices related to that domain
    - Jot down ideas for an action plan related to that domain
  - NB: all qualitative information should be added based on the perceived relevance by program staff
  - Move on to the next domain and its corresponding indicators
5. Assessment Tool

Enabling community leadership:
Community leadership is fostered by participation and participation necessitates and builds good leadership abilities both formally and informally. Participation should be a process by which a community is able to better influence and determine the processes which shape its health and well-being and, as such, is a critical component of community control.

Participation:
Participation occurs when multiple stakeholders are meaningfully engaged in various components of projects and programs, including decision-making and evaluation. Participation can be measured on a scale, from consultation to community control: different levels of participation are best suited to specific programming objectives.

Leadership:
Strong levels of participation can build community leadership and foster community control over a program (particularly necessary for programming sustainability). Leadership includes both the formal and informal roles of those community members who act to provide direction and vision, engage with others, and enhance project capacity.

Community control:
Community control is in line with Gibbon, Labonte, and Laverack’s (2002) vision of empowerment that: “presumes that the identification of problems, solutions to the problems and actions to resolve the problems are carried out by the community.” Community control is a central tenet of community capacity, particularly when projects can be sustained or designed by communities themselves.
## Assessment Tool

### Enabling Community Leadership: Participation

1. Involving a broad range of community organizations and members
   
   *(For example, involvement from different ages, from various community groups)*

<table>
<thead>
<tr>
<th>Just started</th>
<th>1</th>
<th>On the road</th>
<th>2</th>
<th>Nearly there</th>
<th>3</th>
<th>We’re there</th>
<th>4</th>
<th>What’s next</th>
</tr>
</thead>
<tbody>
<tr>
<td>We have not yet identified who to involve</td>
<td></td>
<td>We have identified the range of who should be involved</td>
<td></td>
<td>We have contacted appropriate representatives</td>
<td></td>
<td>A range of populations and community organizations are involved</td>
<td></td>
<td>e.g. identifying new partners, keeping track of membership</td>
</tr>
</tbody>
</table>

### Overcoming barriers to participation

*(For example, barriers related to finances, accessibility, discrimination, timing, language, cultural norms, gender, literacy, information)*

<table>
<thead>
<tr>
<th>Just started</th>
<th>1</th>
<th>On the road</th>
<th>2</th>
<th>Nearly there</th>
<th>3</th>
<th>We’re there</th>
<th>4</th>
<th>What’s next</th>
</tr>
</thead>
<tbody>
<tr>
<td>We have not yet identified potential barriers to participation</td>
<td></td>
<td>We are identifying potential barriers to participation</td>
<td></td>
<td>We are addressing barriers to participation with community feedback</td>
<td></td>
<td>Our work in overcoming barriers has increased participation</td>
<td></td>
<td>e.g. continually reflecting on new barriers, and identifying facilitating factors</td>
</tr>
</tbody>
</table>

### Enablers

- 
- 
- 

### Barriers

- 
- 
- 

### Describe:

- 
- 
- 

---

13
### Assessment Tool

3. Multiple opportunities for participation
   *(For example, participation at meetings, in project planning, implementation, evaluation; participating from home, with smaller or larger groups)*

| Just started | 1 ☐ | On the road | 2 ☐ | Nearly there | 3 ☐ | We’re there | 4 ☐ | What’s next | ☐ |
|--------------|-----|-------------|-----|-------------|-----|------------|-----|-------------|
| We have not yet identified all potential venues for participation | | | | | | | | | |
| We have ideas for diverse opportunities but are not sure how to proceed | | | | | | | | | |
| Some diverse opportunities exist, but we are still in the process of expanding more | | | | | | | | | |
| There are multiple participation opportunities in place in the program | | | | | | | | | |
| e.g. As project grows, so too do opportunities for involvement | | | | | | | | | |

Describe:

<table>
<thead>
<tr>
<th>Enablers</th>
<th>Barriers</th>
</tr>
</thead>
<tbody>
<tr>
<td>•</td>
<td></td>
</tr>
<tr>
<td>•</td>
<td></td>
</tr>
<tr>
<td>•</td>
<td></td>
</tr>
</tbody>
</table>

**Participation overall:**

**Telling the story of participation**

**Key learnings/best practice regarding participation**

**Action plan regarding participation**
## Assessment Tool

### Enabling Community Leadership: Leadership

1. Roles and responsibilities of leaders
   
   *(For example, community and agency expectations of community leaders, leaders’ expectations of themselves; developing accountability and reporting guidelines)*

<table>
<thead>
<tr>
<th>Just started</th>
<th>On the road</th>
<th>Nearly there</th>
<th>We’re there</th>
<th>What’s next</th>
</tr>
</thead>
<tbody>
<tr>
<td>Roles/responsibilities of community leaders have not been defined</td>
<td>We are defining leadership roles and responsibility with the community</td>
<td>We have defined key roles and responsibilities of leaders</td>
<td>Key roles/responsibilities are finalized and leaders act accordingly</td>
<td>e.g. Redefining roles and responsibilities as project advances</td>
</tr>
</tbody>
</table>

*Describe:*

<table>
<thead>
<tr>
<th>Enablers</th>
<th>Barriers</th>
</tr>
</thead>
<tbody>
<tr>
<td>•</td>
<td>•</td>
</tr>
<tr>
<td>•</td>
<td>•</td>
</tr>
<tr>
<td>•</td>
<td>•</td>
</tr>
</tbody>
</table>

2. (New) community leaders become progressively more involved

*(For example, developing leadership with people who normally don’t fill those roles; working with both informal and formal leaders)*

<table>
<thead>
<tr>
<th>Just started</th>
<th>On the road</th>
<th>Nearly there</th>
<th>We’re there</th>
<th>What’s next</th>
</tr>
</thead>
<tbody>
<tr>
<td>We have not yet identified potential new community leaders</td>
<td>We are in the process of identifying potential new community leaders</td>
<td>We have identified new leaders and are developing ways to support them</td>
<td>New community members have become involved since the inception of the CI</td>
<td>e.g. Mentoring processes, recognizing formal and informal leadership roles</td>
</tr>
</tbody>
</table>

*Describe:*

<table>
<thead>
<tr>
<th>Enablers</th>
<th>Barriers</th>
</tr>
</thead>
<tbody>
<tr>
<td>•</td>
<td>•</td>
</tr>
<tr>
<td>•</td>
<td>•</td>
</tr>
<tr>
<td>•</td>
<td>•</td>
</tr>
</tbody>
</table>
3. Conflict resolution mechanisms
   (For example, collaboration, negotiation, mediation, arbitration)

<table>
<thead>
<tr>
<th>Just started</th>
<th>1</th>
<th>On the road</th>
<th>2</th>
<th>Nearly there</th>
<th>3</th>
<th>We’re there</th>
<th>4</th>
<th>What’s next</th>
</tr>
</thead>
<tbody>
<tr>
<td>We have not yet thought about conflict resolution mechanisms</td>
<td>We are in the process of developing conflict resolution mechanisms</td>
<td>Guidelines are in place regarding conflict resolution in the CI</td>
<td>Conflict is effectively resolved using the mechanisms in place</td>
<td>e.g. monitoring use of mechanisms, learning from conflict situations</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Enablers

Barriers

Leadership overall:

Telling the story of leadership

Key learnings/best practice regarding leadership

Action plan regarding leadership
### Assessment Tool

**Enabling Community Leadership: Community Control**

1. Community influence on project throughout different phases  
(For example, during project planning, implementation, and evaluation; with decision-making responsibilities)

<table>
<thead>
<tr>
<th></th>
<th>Just started</th>
<th>On the road</th>
<th>Nearly there</th>
<th>We’re there</th>
<th>What’s next</th>
</tr>
</thead>
<tbody>
<tr>
<td>The community is not yet involved in all stages of the program</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>We are in the process of identifying avenues of community involvement</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community members are becoming involved in all phases of the program</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The community is involved in and influences all phases of programming</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e.g. a new or expanded program plan due to community involvement</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Describe:

**Enablers**

- 
- 
- 

**Barriers**

- 
- 
- 

2. Formal representation of community members  
(For example, as board members, as signatory bodies for funding)

<table>
<thead>
<tr>
<th></th>
<th>Just started</th>
<th>On the road</th>
<th>Nearly there</th>
<th>We’re there</th>
<th>What’s next</th>
</tr>
</thead>
<tbody>
<tr>
<td>There is not yet any formal involvement of community members</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>We have identified areas for formal community involvement</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>There are areas for formal involvement, but community is not involved</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community members are actively participating in formal representation areas</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e.g. looking at diversity of formal representation, post-involvement activities</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Describe:

**Enablers**

- 
- 
- 

**Barriers**

- 
- 
- 

### Assessment Tool

**Community control overall:**

<table>
<thead>
<tr>
<th>Telling the story of community control</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Key learnings/best practice regarding community control</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Action plan regarding community control</th>
</tr>
</thead>
</table>
**Assessment Tool**

**Fostering community identity:**
Community identity is essential in community based programs in terms of determining who is/isn’t involved and how members conceptualize their membership and their place within the community. Additionally, community identity can influence who does or doesn’t participate and in what capacity.

**Diversity and equity:**
Communities are diverse and, as everywhere, inequities are real and present. Diversity may encompass gender, ethnicity, age, educational background, socio-economic status, and sexual orientation, among many other areas. Equity recognizes that some groups or individuals have more and others have less, and that these disparities are unfair, unjustified, and should be remedied.

**Sense of community and identity:**
A sense of community is characterized by members feeling connected to each other and the space they inhabit, overall levels of respect and concern for each other and for larger issues affecting the community, and a positive perception of the community.\(^2,6-8\)
## Assessment Tool

### Fostering Community Identity: Diversity and Equity

1. Identified vulnerable groups’ involvement in events

   (For example, identifying and actively engaging marginalized populations based on – e.g. - ethnicity, socio-economic status, gender, etc.)

<table>
<thead>
<tr>
<th>Just started</th>
<th>1</th>
<th>On the road</th>
<th>2</th>
<th>Nearly there</th>
<th>3</th>
<th>We’re there</th>
<th>4</th>
<th>What’s next</th>
</tr>
</thead>
<tbody>
<tr>
<td>We have not yet identified vulnerable or marginalized groups</td>
<td></td>
<td>We have identified groups but do not have plans for accessibility or involvement</td>
<td>We have plans in place to increase involvement of marginalized groups</td>
<td>Vulnerable groups are actively involved in CI events and activities</td>
<td></td>
<td></td>
<td></td>
<td>e.g. examining how involvement affects vulnerability of populations</td>
</tr>
</tbody>
</table>

   **Describe:**

   **Enablers**
   - 
   - 
   - 

   **Barriers**
   - 
   - 
   - 

2. Representation of a diverse population in leadership

   (For example, diversity in ethnicity, gender, age, socio-economic group, etc.)

<table>
<thead>
<tr>
<th>Just started</th>
<th>1</th>
<th>On the road</th>
<th>2</th>
<th>Nearly there</th>
<th>3</th>
<th>We’re there</th>
<th>4</th>
<th>What’s next</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community roles and responsibilities are not reflective of CI diversity</td>
<td>We have plans to increase diverse representation in leadership positions</td>
<td>Diversity in leadership representation is increasing</td>
<td>Diverse groups are represented in leadership and other roles</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>e.g. examining how this diversity affects programming</td>
</tr>
</tbody>
</table>

   **Describe:**

   **Enablers**
   - 
   - 

   **Barriers**
   - 
   - 

20
Assessment Tool

Diversity and equity overall:

<table>
<thead>
<tr>
<th>Telling the story of diversity and equity</th>
</tr>
</thead>
</table>

Key learnings/best practice regarding diversity and equity

<table>
<thead>
<tr>
<th>Key learnings/best practice regarding diversity and equity</th>
</tr>
</thead>
</table>

Action plan regarding diversity and equity

<table>
<thead>
<tr>
<th>Action plan regarding diversity and equity</th>
</tr>
</thead>
</table>
## Fostering Community Identity: Sense of Community and Identity

1. **Sense of community and pride**
   (For example, community perceptions of pride, community involvement in celebrations)

<table>
<thead>
<tr>
<th>Just started 1</th>
<th>On the road 2</th>
<th>Nearly there 3</th>
<th>We’re there 4</th>
<th>What’s next □</th>
</tr>
</thead>
<tbody>
<tr>
<td>We have not yet thought about how CI can benefit community identity</td>
<td>We are not sure how to proceed with building community identity</td>
<td>We have incorporated identity-strengthening activities into the CI</td>
<td>CI has helped increase a sense of community and pride</td>
<td>e.g. extending messages of community identity externally</td>
</tr>
</tbody>
</table>

   **Describe:**

   **Enablers**
   - 
   - 
   - 

   **Barriers**
   - 
   - 
   - 

2. **Concern for, and action on, community-level issues**
   (For example, overall concerns and/or issues which may not affect all community members, but which affect a specific population; historic or current issues which affect present-day outcomes (housing developments, environmental contamination, etc.))

<table>
<thead>
<tr>
<th>Just started 1</th>
<th>On the road 2</th>
<th>Nearly there 3</th>
<th>We’re there 4</th>
<th>What’s next □</th>
</tr>
</thead>
<tbody>
<tr>
<td>Members do not yet express concern for community-level issues but have not taken action</td>
<td>Members express concern for community-level issues</td>
<td>CI staff is assisting in action related to community-level concerns</td>
<td>Members are acting on community-wide concerns</td>
<td>e.g. continued identification of emerging issues</td>
</tr>
</tbody>
</table>

   **Describe:**

   **Enablers**
   - 
   - 
   - 

   **Barriers**
   - 
   - 
   - 

---

22
## Assessment Tool

3. Community norms, values, attributes
   *(For example, reciprocity, sharing, open communication, environmental protection)*

<table>
<thead>
<tr>
<th>Just started</th>
<th>On the road</th>
<th>Nearly there</th>
<th>We’re there</th>
<th>What’s next</th>
</tr>
</thead>
<tbody>
<tr>
<td>The community does not yet have defined norms or values</td>
<td>Project staff is aware of the importance of community norms and values</td>
<td>Project staff actively assists the community in defining norms and values</td>
<td>Community has defined group norms and values</td>
<td>e.g. on-going discussions around norms and values, reflection on their role in CIs</td>
</tr>
</tbody>
</table>

### Sense of community and identity overall:

**Telling the story of sense of community and identity**

**Key learnings/best practice regarding sense of community and identity**

**Action plan regarding sense of community and identity**

Enablers

- 
- 

Barriers

- 
- 

Describe:
Community capacity is often defined in terms of its characteristics, such as increased skills of community members, stronger linkages within and without community, and increased access to community and external resources.

Skills, knowledge and learning:
Skills, talents, and abilities in place in a given community are present on both the individual (e.g. the ability to chair a meeting) and community level (e.g. ability to work together and resolve conflict). As starting points, goals, and facilitating factors, these form the bedrock of community capacity building. Necessary and valuable resources exist both within and outside of communities. Increasing resources does not necessarily lead to increased community capacity, but it is an enabling factor, as it creates the space and opportunities for participation and involvement from diverse groups.

Reflection:
Reflection is both a skill and a resource as a process that should help communities uncover the root causes of issues they face and plan for action accordingly. Given that many of the upstream determinants of community health are rooted in external and internal structures (including barriers to access, discrimination, inequity, education opportunities, etc), there are implicit connections between reflection and all domains of community capacity.
# Assessment Tool

## Developing Skills and Resources: Skills, Learning, and Knowledge

1. Identification of needs and strengths
   
   *(For example, current assets to build upon and noted areas for improvement)*

<table>
<thead>
<tr>
<th>Status</th>
<th>Just started</th>
<th>On the road</th>
<th>Nearly there</th>
<th>We’re there</th>
<th>What’s next</th>
</tr>
</thead>
<tbody>
<tr>
<td>We have not yet identified community needs and strengths</td>
<td>1 ☐</td>
<td>2 ☐</td>
<td>3 ☐</td>
<td>4 ☐</td>
<td></td>
</tr>
<tr>
<td>We have a plan to identify community needs and strengths</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>We are working with community to identify needs and strengths</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>With the community, we have identified relevant needs and strengths</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e.g. using identified needs/strengths in planning</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Describe:

<table>
<thead>
<tr>
<th>Enablers</th>
<th>Barriers</th>
</tr>
</thead>
<tbody>
<tr>
<td>•</td>
<td>•</td>
</tr>
<tr>
<td>•</td>
<td>•</td>
</tr>
<tr>
<td>•</td>
<td>•</td>
</tr>
</tbody>
</table>

2. Learning and training opportunities

   *(For example, skill-building exercises, peer-to-peer or agency-to-agency information dissemination)*

<table>
<thead>
<tr>
<th>Status</th>
<th>Just started</th>
<th>On the road</th>
<th>Nearly there</th>
<th>We’re there</th>
<th>What’s next</th>
</tr>
</thead>
<tbody>
<tr>
<td>We have not yet provided learning opportunities in the CI</td>
<td>1 ☐</td>
<td>2 ☐</td>
<td>3 ☐</td>
<td>4 ☐</td>
<td></td>
</tr>
<tr>
<td>We have identified learning/training opportunities for the CI</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>We are providing learning and training opportunities in the community</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Learning and training opportunities are being accessed by the community</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e.g. looking at outcomes of training, evaluating specific opportunities</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Describe:

<table>
<thead>
<tr>
<th>Enablers</th>
<th>Barriers</th>
</tr>
</thead>
<tbody>
<tr>
<td>•</td>
<td>•</td>
</tr>
<tr>
<td>•</td>
<td>•</td>
</tr>
<tr>
<td>•</td>
<td>•</td>
</tr>
</tbody>
</table>
### Assessment Tool

**Skills, learning, and knowledge overall:**

<table>
<thead>
<tr>
<th>Telling the story of skills, learning, and knowledge</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Key learnings/best practice regarding skills, learning, and knowledge</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Action plan regarding skills, learning, and knowledge</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>
### Assessment Tool

#### Developing Skills and Resources: Resources

1. Access to internal resources
   
   *(For example, volunteers, space to meet, community members’ skills and experience)*

<table>
<thead>
<tr>
<th>Just started</th>
<th>1</th>
<th>On the road</th>
<th>2</th>
<th>Nearly there</th>
<th>3</th>
<th>We’re there</th>
<th>4</th>
<th>What’s next</th>
</tr>
</thead>
<tbody>
<tr>
<td>We have not yet identified community-level resources</td>
<td></td>
<td>We have identified what resources exist within the community</td>
<td>We have started contacting community in order to access needed resources</td>
<td>We access the resources we need from within the community</td>
<td>e.g. examining strain on the community caused by accessing resources</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Enablers
- 
- 
- 

#### Barriers
- 
- 
- 

2. Access to external resources
   
   *(For example, materials, childcare, funding, staff knowledge and experience)*

<table>
<thead>
<tr>
<th>Just started</th>
<th>1</th>
<th>On the road</th>
<th>2</th>
<th>Nearly there</th>
<th>3</th>
<th>We’re there</th>
<th>4</th>
<th>What’s next</th>
</tr>
</thead>
<tbody>
<tr>
<td>We have not yet identified relevant external resources</td>
<td>We have identified what resources exist outside of the community</td>
<td>We have started contacting sources for relevant external resources</td>
<td>We access the resources we need from outside of the community</td>
<td>e.g. awareness of other resource areas/sources that may be accessed</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Enablers
- 
- 
- 

#### Barriers
- 
- 
- 

**Describe:**

- 
- 
- 

- 
- 
- 

- 
- 
- 

- 
- 
- 

- 
- 
- 

- 
- 
- 

### Assessment Tool

3. Pooling and sharing of resources and supports
   *(For example, with project partners and members: ensuring those most in need of resources have priority in accessing those resources; addressing gaps in resource availability)*

<table>
<thead>
<tr>
<th></th>
<th>Just started</th>
<th>On the road</th>
<th>Nearly there</th>
<th>We’re there</th>
<th>What’s next</th>
</tr>
</thead>
<tbody>
<tr>
<td>We have not yet thought about how to best pool and share resources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>We have a plan in place to equitably pool and share resources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>We are sharing and pooling some resources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>We are pooling and sharing resources equitably across partners and community</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e.g. examining how resource distribution influences other indicators of equity</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Describe:**

<table>
<thead>
<tr>
<th>Enablers</th>
<th>Barriers</th>
</tr>
</thead>
<tbody>
<tr>
<td>•</td>
<td>•</td>
</tr>
<tr>
<td>•</td>
<td>•</td>
</tr>
</tbody>
</table>

**Resources overall:**

**Telling the story of resources**

**Key learnings/best practice regarding resources**

**Action plan regarding resources**
### Developing Skills and Resources: Reflection

1. Community involvement in “asking why”
   
   *(For example, exploring root causes of issues and searching for solutions)*

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Just started</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>What’s next</td>
</tr>
<tr>
<td>We have not yet begun the process of “asking why” with community</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>On the road</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>We have a plan in place for “asking why” with community</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nearly there</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>We engage the community in “asking why” and searching for solutions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>We’re there</td>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Root causes of issues are explored and solutions are proposed by community</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>What’s next</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e.g. working with the outcomes of “asking why”, incorporating solutions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Describe:**

<table>
<thead>
<tr>
<th>Enablers</th>
<th>Barriers</th>
</tr>
</thead>
<tbody>
<tr>
<td>•</td>
<td>•</td>
</tr>
<tr>
<td>•</td>
<td>•</td>
</tr>
</tbody>
</table>

2. Addressing root causes through CI

*(For example, working on the larger issues that influence original CI issue)*

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Just started</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>What’s next</td>
</tr>
<tr>
<td>We have not yet thought about root causes of the issue addressed by CI</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>On the road</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>We are considering root causes and how they might affect the project</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nearly there</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>We have examined root causes and incorporate our insights into programming</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>We’re there</td>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The CI addresses some of the root causes of issues</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>What’s next</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e.g. linking with others who address these root causes</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Describe:**

<table>
<thead>
<tr>
<th>Enablers</th>
<th>Barriers</th>
</tr>
</thead>
<tbody>
<tr>
<td>•</td>
<td>•</td>
</tr>
<tr>
<td>•</td>
<td>•</td>
</tr>
</tbody>
</table>
### Assessment Tool

3. Reflection in agency staff  
*(For example, in meetings, personally, via evaluation processes)*

<table>
<thead>
<tr>
<th>Just started</th>
<th>On the road</th>
<th>Nearly there</th>
<th>We’re there</th>
<th>What’s next</th>
</tr>
</thead>
<tbody>
<tr>
<td>We have not yet thought about how to encourage reflection within staff</td>
<td>We are in the process of implementing reflection into staff time and training</td>
<td>We encourage reflection on CI efforts and provide them with time and resources</td>
<td>Staff reflects on CI efforts and acts on those reflections</td>
<td>e.g. noting any community responses to staff reflections</td>
</tr>
</tbody>
</table>

#### Describe:

<table>
<thead>
<tr>
<th>Enablers</th>
<th>Barriers</th>
</tr>
</thead>
<tbody>
<tr>
<td>•</td>
<td>•</td>
</tr>
<tr>
<td>•</td>
<td>•</td>
</tr>
</tbody>
</table>

**Reflection overall:**

**Telling the story of reflection**

**Key learnings/best practice regarding reflection**

**Action plan regarding reflection**
Assessment Tool

**Building and utilizing structures and relationships:**
Strong structures and relationships within and between community and external organizations provide the necessary foundations for community capacity through linkages and access to resources. The values and principles of programming and staff influence the processes and outcomes of community initiatives.

**Community and internal structures:**
Just as there are previously existing skills, abilities, and talents within communities, there are also structures such as organizations, networks, and groups. These structures and relations can both enable and hinder community capacity. Strong structures and enabling internal relations ensure that a diverse range of voices are heard and acted upon, affecting participation.

**External supports and community relations:**
External agents include funders, agencies, and health centres external to the community as well as policies and perceptions. Outside agents have a strong role to play in fostering community capacity by challenging external barriers to development such as detrimental policy and negative perceptions within other external agencies. These organizations may also provide communities with resources or links to appropriate sources for collaborative action. A strong relationship between community and external agents is critical to long-term sustainability in capacity building, as learnings can be shared across communities and agencies.

**Linkages:**
Linkages and collaboration with other agencies, communities, networks, organizations, or individuals are considered essential for strong community capacity. These connections foster access to a range of resources, increase opportunities for collective learning action across sectors and groups, and can increase representation and participation of diverse groups. Networks also bring complementary skills together, creating a whole that is greater than the sum of its parts.
## Assessment Tool

### Building and Utilizing Structures and Relationships: Community and Internal Structures

1. **Areas for CHC support of community**
   (For example, health information, funding, linkages with other agencies)

<table>
<thead>
<tr>
<th>Just started</th>
<th>On the road</th>
<th>Nearly there</th>
<th>We’re there</th>
<th>What’s next</th>
</tr>
</thead>
<tbody>
<tr>
<td>We have not yet identified areas for CI support</td>
<td>We have identified areas where we can support community structures</td>
<td>We are working on supporting community structures</td>
<td>As a result of our efforts, community structures are well supported</td>
<td>e.g. sustaining supports, building ability for community to support itself</td>
</tr>
</tbody>
</table>

Describe:

<table>
<thead>
<tr>
<th>Enablers</th>
<th>Barriers</th>
</tr>
</thead>
<tbody>
<tr>
<td>•</td>
<td>•</td>
</tr>
<tr>
<td>•</td>
<td>•</td>
</tr>
</tbody>
</table>

2. **Relationships and communication among community structures**
   (For example, between and among community groups, agencies, councils, membership organizations)

<table>
<thead>
<tr>
<th>Just started</th>
<th>On the road</th>
<th>Nearly there</th>
<th>We’re there</th>
<th>What’s next</th>
</tr>
</thead>
<tbody>
<tr>
<td>We have not yet thought about internal community relationships</td>
<td>We are investigating internal community relationships</td>
<td>Our programming addressed how to improve community relationships</td>
<td>As a result of CI, community relationships are strengthened</td>
<td>e.g. examining effects of stronger relationships among community structures</td>
</tr>
</tbody>
</table>

Describe:

<table>
<thead>
<tr>
<th>Enablers</th>
<th>Barriers</th>
</tr>
</thead>
<tbody>
<tr>
<td>•</td>
<td>•</td>
</tr>
<tr>
<td>•</td>
<td>•</td>
</tr>
</tbody>
</table>
Assessment Tool

3. Values and priorities of community agencies
   (For example, guiding principles, historic or current projects of community agencies)

<table>
<thead>
<tr>
<th>Just started</th>
<th>On the road</th>
<th>Nearly there</th>
<th>We’re there</th>
<th>What’s next</th>
</tr>
</thead>
<tbody>
<tr>
<td>We are not aware of the values and priorities of community groups</td>
<td>We have communicated with community structures re: values/priorities</td>
<td>We work with community structures to articulate values and priorities</td>
<td>CI has assisted community structures to articulate their values and priorities</td>
<td>e.g. examining how values and priorities of structures fit with those of members</td>
</tr>
</tbody>
</table>

Describe:

Enablers
- •
- •

Barriers
- •
- •

Community and internal structures overall:

Telling the story of community and internal structures

Key learnings/best practice regarding community and internal structures

Action plan regarding community and internal structures
### Building and Utilizing Structures and Relationships: External Supports and Community Relations

1. **Supportive external policies/plans**
   (For example, within agency/partners/government; policies which influence community capacity directly or indirectly)

<table>
<thead>
<tr>
<th>Status</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Just started</td>
<td>Current policies do not support the actions of the CI</td>
</tr>
<tr>
<td>On the road</td>
<td>We have identified the need for policy change to support CI and community</td>
</tr>
<tr>
<td>Nearly there</td>
<td>Policies are being developed that support CIs and community</td>
</tr>
<tr>
<td>We’re there</td>
<td>Current policies support the CI and community</td>
</tr>
<tr>
<td>What’s next</td>
<td>e.g. monitoring adherence, monitoring perceptions, publicizing community/external “image”</td>
</tr>
</tbody>
</table>

**Describe:**

<table>
<thead>
<tr>
<th>Enablers</th>
<th>Barriers</th>
</tr>
</thead>
<tbody>
<tr>
<td>•</td>
<td>•</td>
</tr>
</tbody>
</table>

2. **External perceptions of community**
(For example, via the media)

<table>
<thead>
<tr>
<th>Status</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Just started</td>
<td>We have not identified the external perceptions of the community</td>
</tr>
<tr>
<td>On the road</td>
<td>Identified perceptions have not yet been incorporated into CI planning</td>
</tr>
<tr>
<td>Nearly there</td>
<td>We have incorporated external perceptions into CI planning</td>
</tr>
<tr>
<td>We’re there</td>
<td>The CI has led to improved external perceptions of the community</td>
</tr>
<tr>
<td>What’s next</td>
<td>e.g. monitoring perceptions, publicizing community/external “image”</td>
</tr>
</tbody>
</table>

**Describe:**

<table>
<thead>
<tr>
<th>Enablers</th>
<th>Barriers</th>
</tr>
</thead>
<tbody>
<tr>
<td>•</td>
<td>•</td>
</tr>
</tbody>
</table>
3. Community perceptions of agency  
(For example, members’ attitudes about previous programs)

<table>
<thead>
<tr>
<th>Just started</th>
<th>1 □</th>
<th>On the road</th>
<th>2 □</th>
<th>Nearly there</th>
<th>3 □</th>
<th>We’re there</th>
<th>4 □</th>
<th>What’s next □</th>
</tr>
</thead>
<tbody>
<tr>
<td>We have not yet identified community perceptions of agency</td>
<td>Identified perceptions have not yet been incorporated into CI planning</td>
<td>We have incorporated community perceptions into CI planning</td>
<td>The CI has led to improved community perceptions of the agency</td>
<td>e.g. building upon trust and relationship with new communities</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Describe:

**External supports and community relations overall:**

Telling the story of external supports and community relations

Key learnings/best practice regarding external supports and community relations

Action plan regarding external supports and community relations
Assessment Tool

Building and Utilizing Structures and Relationships: Linkages

1. Linkages between community structures and CHC
   (For example, present-day and historical connections; linkages via programs, advocacy, other CIs)

<table>
<thead>
<tr>
<th>Just started</th>
<th>1</th>
<th>On the road</th>
<th>2</th>
<th>Nearly there</th>
<th>3</th>
<th>We’re there</th>
<th>4</th>
<th>What’s next</th>
</tr>
</thead>
<tbody>
<tr>
<td>We are not yet aware of community structures operating in the CI area</td>
<td></td>
<td>We have identified actors and structures within the community</td>
<td></td>
<td>We are in contact with community groups and structure</td>
<td></td>
<td>We have strong connections with community structures</td>
<td></td>
<td>e.g. working on long-term sustainability of connections</td>
</tr>
</tbody>
</table>

Describe:

<table>
<thead>
<tr>
<th>Enablers</th>
<th>Barriers</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. On-going networking and collaboration
   (For example, between dissimilar and like-minded agencies; between government, NGOs, community-based organizations)

<table>
<thead>
<tr>
<th>Just started</th>
<th>1</th>
<th>On the road</th>
<th>2</th>
<th>Nearly there</th>
<th>3</th>
<th>We’re there</th>
<th>4</th>
<th>What’s next</th>
</tr>
</thead>
<tbody>
<tr>
<td>We don’t yet know who we could network with to support CI</td>
<td></td>
<td>We know which organizations could support CI</td>
<td></td>
<td>We are communicating with relevant groups to support CI</td>
<td></td>
<td>There is a broad network of groups that are collaborating to support CI</td>
<td></td>
<td>e.g. maintaining contact and communications, bringing in new partners</td>
</tr>
</tbody>
</table>

Describe:

<table>
<thead>
<tr>
<th>Enablers</th>
<th>Barriers</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Assessment Tool**

**Linkages overall:**

<table>
<thead>
<tr>
<th>Telling the story of linkages</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Key learnings/best practice regarding linkages</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Action plan regarding linkages</th>
</tr>
</thead>
</table>

6. Context tool

This is to collect additional information for the start of each CI: based on AOHC (2007) ¹³

**NB:** Complete the assessment tool, with an eye to current state of indicators, anticipated barriers and enabling factors, and the story of why the CI has been started.

1. Name of person completing report
2. Contact info: e-mail and phone
3. Originating CHC
4. Name of Community Initiative
5. Planned start and end dates of CI (if known)
6. What are the **broad objectives** of your CI? (Check as many as appropriate)
   - Reduce isolation, increase sense of connectedness, and strengthen social relationships/networks/cohesion
   - Reduce fear and improve security/safety
   - Increase trust/understanding
   - Increase community dialogue/interaction
   - Increase community participation
   - Improve living conditions (indoor)
   - Improve community environment (outdoor)
   - Improve work/school/other institutional environment
   - Improve recreational environment
   - Provide new services/facilities (to meet gaps)
   - Improve services/better access
   - Improve delivery systems (ways of doing things)
   - Improve communication with community (services, resource, facilities)
   - Create healthier organizational structures/practices
   - Improve health-supportive policies/policy-making processes
   - Increase community skills, knowledge, awareness
7. What are the specific objectives of your CI? (list up to 5)

8. What are the social determinants of health that this CI is intending to address? (Check as many as appropriate)
   - Healthy child development
   - Education
   - Employment and working conditions
   - Food security
   - Health care services
   - Housing
   - Income
   - Social support
   - Social safety nets and social services
   - Social justice, equity, human rights
   - Peace
   - Stable eco-system, healthy local environment
   - Other (specify): ___________________________

9. What are the health promotion strategies that you plan to use/employ? (Check as many as appropriate)
   - Build healthy public policy
   - Create supportive environments
   - Strengthen community actions
   - Develop personal skills
   - Reorient health services
   - Other (specify): ___________________________

10. What are the specific planned activities you are intending to carry out in this CI?
11. Briefly describe the **origin** of this CI

12. To what extent did this CI evolve from a personal development group, another CI, or any other work in the CHC. If applicable, please list name:

13. What **communities/neighbourhoods** is this CI intended to serve?
14. Please specify age group(s) of the intended population for this CI: (Check as many as appropriate)
- Age is not a specific characteristic of this CI
- 0-4 years
- 5-9
- 10-14
- 15-19
- 20-24
- 25-29
- 30-34
- 35-39
- 40-44
- 45-49
- 50-54
- 55-59
- 60-64
- 65-69
- 70-74
- 75-79
- 80-84
- 85-89
- 90+

15. Please select gender of intended population
- Gender is not a specific characteristic of this CI
- Male
- Female
- Transgender/transsexual/inter-sexed/questioning

16. Please select primary language(s)/culture(s) of intended population. (Check as many as appropriate)
- Language/culture is not a specific characteristic of this CI
- English
- French
- Arabic
- Chinese – Cantonese
Context Tool

☐ Chinese – Mandarin
☐ Chinese – Hakka
☐ Chinese – (other)
☐ Cree
☐ Dutch
☐ German
☐ Greek
☐ Hindi
☐ Inuktitut
☐ Italian
☐ Polish
☐ Portuguese
☐ Punjabi
☐ Russian
☐ Somali
☐ Spanish
☐ Tagalog (Philipino)
☐ Tamil
☐ Ukranian
☐ Vietnamese
☐ Other (specify): __________________________

17. Please select primary description(s) of the role/status/identity of intended population: (Check as many as appropriate)
   ☐ Role/status/identity is not a specific characteristic of this CI
   ☐ Business people
   ☐ Caregivers
   ☐ Community leaders
   ☐ Community members
   ☐ Community volunteers
   ☐ Criminal offenders
   ☐ Employees
   ☐ Employers
   ☐ Family members
   ☐ Gays/lesbians
Context Tool

☐ Health providers
☐ Immigrants
☐ Newcomers
☐ Refugees
☐ Parents
☐ Expectant parents
☐ New parents
☐ Single parents
☐ Persons without a health card
☐ Students
☐ Seniors
☐ Frail elderly
☐ Youth
☐ Children
☐ Other (specify): ______________________________

18. Please select social/economic conditions addressed by CI: (Check as many as appropriate)
☐ Social/economic condition is not a specific characteristic of this CI
☐ Environmental pollution
☐ Environmental degradation
☐ Homelessness
☐ Inadequate housing
☐ Inadequate transportation
☐ Language/cultural barrier
☐ Low-income/poverty
☐ Low literacy
☐ Occupational/workplace risks
☐ Racism/discrimination
☐ Social isolation
☐ Underemployment
☐ Unemployment
☐ Violence/abuse
☐ Victims of violence/abuse
☐ Witnesses of violence/abuse
Perpetrators of violence/abuse

Other (specify): ____________________________________________

19. Please select health condition(s) addressed by CI: (Check as many as appropriate)
   - Health conditions are not a specific characteristic of this CI
   - Arthritis
   - Asthma
   - Diabetes
   - Hypertension
   - Heart Disease
   - HIV/AIDS
   - STIs
   - Physical disability
   - Physical frailty
   - Obesity
   - Eating disorder
   - Chronic pain
   - Physical fitness
   - Nutrition
   - Sexual health
   - Substance use/addictions
   - Alcohol
   - Tobacco
   - Drugs/medication
   - Dental health
   - Mental health
   - Schizophrenia
   - Depression
   - Trauma
   - Other (specify): ____________________________________________

20. Please describe CI partners and roles, if relevant
21. Please list names of CI partners.
7. Monitoring tool

Additional information for on-going evaluations

NB: Complete the monitoring tool with an eye to current barriers/enablers, current action plan, current learnings, and current stories

1. Name of Community Initiative
2. Date of monitoring (from last evaluation to current evaluation)
3. Brief description of activities used since last evaluation
4. Population involved in CI since last evaluation
5. Partners involved in CI since last evaluation
6. Staff time on CI since last evaluation
7. Resources expended on CI since last evaluation (description and value)
8. In-kind resources used since last evaluation (e.g. volunteer hours, donated space)
9. Main achievements to date
10. Report on specific indicators (these could be any other indicators that the participants and the CHC wish to track).
11. Key observations or stories
12. Has the CI led to “spin-off” activities? (e.g. personal development group, increased attendance at health clinic). Please list activities, if relevant.
13. Attach meeting notes, minutes or reports, if necessary.
End-of-CI Tool

8. End-of-CI tool

Additional information to be collected for end-of-CI

NB: Complete the End-of-CI tool with an eye to current status of indicators, life-of-CI major barriers/enablers faced, life-of-CI learnings, and life-of-CI stories to tell.

The important elements to focus on are changes that occurred since the start of the CI, and the reasons for those changes. In this case, the information from the initial Context Tool would be brought back automatically, and any changes could be noted here.

1. Name of Community Initiative

2. Actual start and end dates of CI

3. Did your objectives remain constant throughout the CI?

4. Did you meet your CI objectives? Discuss why or why not.

5. What social determinants of health were addressed through this CI? *(Check as many as appropriate)*
   - Healthy child development
   - Education
   - Employment and working conditions
   - Food security
   - Health care services
   - Housing
   - Income
   - Social support
   - Social safety nets and social services
   - Social justice, equity, human rights
End-of-CI Tool

☐ Peace
☐ Stable eco-system, healthy local environment
☐ Other (specify):__________________________________________
6. Main health promotion strategies used/employed: (Check as many as appropriate)
   - [ ] Build healthy public policy
   - [ ] Create supportive environments
   - [ ] Strengthen community actions
   - [ ] Develop personal skills
   - [ ] Reorient health services
   - [ ] Other (specify): __________________________________________

7. Specific activities used in CI

8. Briefly describe how the CI was determined to be “over”.

9. To what extent has this CI led to any other activities (e.g. personal development group, or other CI)? Please list name:

10. What communities/neighbourhoods did the CI work with?

11. Please specify age group(s) of participating population: (Check as many as appropriate)
   - [ ] Age is not a specific characteristic of this CI
   - [ ] 0-4 years
   - [ ] 5-9
   - [ ] 10-14
   - [ ] 15-19
   - [ ] 20-24
   - [ ] 25-29
   - [ ] 30-34
   - [ ] 35-39
   - [ ] 40-44
   - [ ] 45-49
   - [ ] 50-54
   - [ ] 55-59
   - [ ] 60-64
   - [ ] 65-69
End-of-CI Tool

12. Please select gender of participating population
   - Gender is not a specific characteristic of this CI
   - Male
   - Female
   - Transgender/transsexual/inter-sexed/questioning

13. Please select primary language(s) of participating population: *(Check as many as appropriate)*
   - Language/culture is not a specific characteristic of this CI
   - English
   - French
   - Arabic
   - Chinese – Cantonese
   - Chinese – Mandarin
   - Chinese – Hakka
   - Chinese – (other)
   - Cree
   - Dutch
   - German
   - Greek
   - Hindi
   - Inuktitut
   - Italian
   - Polish
   - Portuguese
   - Punjabi
   - Russian
14. Please select primary description of participating population: (Check as many as appropriate)
   - Role/status/identity is not a specific characteristic of this CI
   - Business people
   - Caregivers
   - Community leaders
   - Community members
   - Community volunteers
   - Criminal offenders
   - Employees
   - Employers
   - Family members
   - Gays/lesbians
   - Health providers
   - Immigrants
   - Newcomers
   - Refugees
   - Parents
   - Expectant parents
   - New parents
   - Single parents
   - Persons without a health card
   - Students
   - Other (specify): ______________________________
15. Please select social/economic conditions addressed by CI: *(Check as many as appropriate)*
   □ Social/economic condition is not a specific characteristic of this CI
   □ Environmental pollution
   □ Homelessness
   □ Inadequate housing
   □ Language/cultural barrier
   □ Low-income/poverty
   □ Low literacy
   □ Occupational/workplace risks
   □ Racism/discrimination
   □ Social isolation
   □ Underemployment
   □ Unemployment
   □ Violence/abuse
   □ Victims of violence/abuse
   □ Witnesses of violence/abuse
   □ Perpetrators of violence/abuse
   □ Other (specify): ________________________________

16. Please select health condition addressed by CI
   □ Health conditions are not a specific characteristic of this CI
   □ Arthritis
   □ Asthma
   □ Diabetes
   □ Hypertension
   □ Heart Disease
   □ HIV/AIDS
   □ STIs
   □ Physical disability
   □ Physical frailty
   □ Obesity
   □ Eating disorder
End-of-CI Tool

- Chronic pain
- Physical fitness
- Nutrition
- Sexual health
- Substance use/addictions
- Alcohol
- Tobacco
- Drugs/medication
- Dental health
- Mental health
- Schizophrenia
- Depression
- Trauma
- Other (specify): ____________________________

17. Please list CI partners, if relevant

18. Comparing the end-point and beginning-point tool, please describe overall CI progress using the following scale:

Overall ease of CI journey:

- □ Major hurdles
- □ Bumpy road
- □ Rough and smooth patches
- □ Fairly smooth
- □ Smooth sailing

Explain:

Attach summary of any other evaluation reports that were completed on this CI.
9. Glossary of Terms

Explanation of Assessment Tool:

Terms:

- **Indicators**: “measurable aspects of a project that can be used to monitor its progress and direction.”
- **Enablers**: Events, situations, or contextual factors that positively affect CI
- **Barriers**: Events, situations, or contextual factors that negatively affect CI
- **Telling the Story**: Explaining the process of the CI regarding overall action area, as deemed relevant by staff
- **Key Learnings/Best Practice**: Points of interest for CI staff (in resident or other CHC) based on overall action areas
- **Action Plan**: Events, projects, or programs designed to enhance the CI with respect to the given indicator area
References


Appendix: Literature review - Conceptualizing the Domains of Community Capacity

Community capacity: brief description and definition
The field of community initiatives has many terms that are not consistently defined. Community capacity was selected as the relevant term of reference due to its mention throughout the rationale for CIs (to strengthen capacity of communities). Several terms are used interchangeably with community capacity; for example community empowerment, community development, and community competence (Kwan et al. 2003).

The definition from Kwan et al. (2003) was used in the development of a recent menu of indicators for the AOHC (Wong and Watson 2007). “The characteristics of communities that affect their ability to identify, mobilize, and address social and public health issues of concern”.
This definition is also part of a Goodman et al. (1998) definition.

Recent work with Toronto communities created the flowing definition: “the potential of a community to build on its strengths in order to work towards and achieve its goals and dreams, given both facilitating and barrier conditions coming from inside and outside the community” (Jackson et al. 2003)

A health department (New South Wales Health Department 2001) defines community capacity as: “an approach to the development of sustainable skills, organisational structures, resources and commitment to health improvement in health and other sectors, to prolong and multiply health gains many times over”.

Reporting from a CDC conference, Goodman et al. 1998 identify two components of capacity building:
“(1) the characteristics of communities that affect their ability to identify, mobilize, and address social and public health problems' [and] (2) the cultivation and use of transferable knowledge, skills, systems, and resources that affect community- and individual-level changes consistent with public health-related goals and objectives.”

There are areas of consistency throughout all the definitions, namely:
(1) they are not focused solely on the health care sector;
(2) skills and strengths are a priority focus; and
(3) the role of structures (organizational, external, and internal) is acknowledged.

The above definitions demonstrate two components of community capacity; capacity as a process/approach and capacity as a set of characteristics. Community capacity is both, as processes are integral to final outcomes. For the case of the AOHC, any conception of community capacity must acknowledge the role of staff and program processes in long-term work building internal capacity.
Domains of community capacity
Given the range of definitions of community capacity, there is no consensus on its domains. Furthermore, indicators to measure community capacity are not entirely evidence-based as evidence in the field is still building (Hawe et al. 2000).

Table I outlines the variance of main domains from selected sources. These sources were selected if they had developed a list or framework of domains and/or indicators of community capacity. Additionally, each tool had elements that made it a good candidate for inclusion. All sources were recognized in related community development literature as important documents. As explained below, there were various ways to determine domains of community capacity: some sources strictly relied on literature reviews while others created or tested concepts with communities and yet others undertook statistical analysis of their domains.

Description of sources
A recent review of reliable, valid, and feasible indicators for use in Ontario’s CHCs notes the dearth of such indicators for community initiatives (Wong and Watson 2007). They refer to PHAC (2007); Kwan et al. (2003); and Hawe et al. (2000) as possible sources for indicators in community capacity, but caution that these indicators should be considered as preliminary as they have not been tested for reliability or validity. While these three sources were in fact tested either via focus groups or surveys with practitioners, literature reviews, and/or statistical analyses, the report authors did not consider this testing to be rigorous enough for inclusion. This restriction hindered development of a comprehensive list of “evidence-based” community capacity indicators in a main list of indicators for all CHCs (Barnsley 2008). Two indicators were related to clinical care and priority health conditions, although these are not mentioned in the other relevant literature. Although limited in scope, the report of Barnsley (2008) is immediately relevant to this draft framework, and, as such, was included.

The authors of PHAC (2007) conducted a literature review exploring definitions and understandings of community capacity and tools measuring the term. The team selected nine domains for PHAC-funded programs based on measurability and possibility for timely change and impact on a local level. Indicators for each domain were selected from the literature. These domains and indicators were reviewed by Canadian “experts” in the field of community capacity measurement, who then provided recommendations for a measurement instrument. The instrument was piloted in focus groups with health promotion practitioners and also tested in 29 PHAC-funded community initiatives in central and northern Canada for face validity, construct validity, and internal consistency. The tool uses a “journey” metaphor, with questions for each domain which can be answered on a scale from “just started” to “we’re there.” This tool was selected for its Canadian context, strength of validity and reliability testing, and recent publication.

Jackson et al. (2003) used an asset-based framework to conceptualize domains of community capacity within so-called “problem areas” in Toronto. This orientation to research was selected to give voice to the issues deemed important by the community and to develop domains and indicators from community experience.
rather than related literature. The research team worked in partnership with community groups and conducted key informant interviews, focus groups and semi-structured open-ended interviews. Qualitative results were coded using a coding framework developed by multiple investigators over time. Themes and indicators mentioned in more than one site and with clear measurable aspects were tested and analyzed. Final indicators and domains were shared with members of a community advisory committee. The final conceptualization of community capacity has the talents, strengths, skills, and abilities of the community and its members as a core domain, which is influenced by inside (internal to the community) facilitating/enabling and barrier conditions, which are in turn affected by outside (external to the community) facilitating/enabling and barrier conditions. Indicators are accompanied by possible measurements. This report was selected for its community-grounded development of domains and indicators and presence of a conceptual framework.

Gibbon, Labonte, and Laverack (2002) compared nine domains of capacity developed by (Laverack 1999) and eight similar domains developed by (Gibbon 1999). Both studies developed the domains of community capacity from literature review and analysis. Gibbon worked with Nepalese women’s groups to develop indicators for each domain and then to rate them in a group facilitated discussion on a scale from 1 to 4. Laverack used themes and situations from community discussions in Fiji to develop statements ranked from 0(unacceptable) to 4(most satisfactory) for indicators. Having numbers assigned to statements was found to influence the participants’ actions and the numbered scale was subsequently removed. Repeating this process over time provided empirical data, thereby overcoming some of the perceived shortcomings of purely qualitative evaluation. Visual representations (a “spider web” approach) were used by Gibbon at numerous points in order to provide feedback to the community to come to their own evaluation conclusions. This work was selected for its historical significance, as the work of Laverack and Gibbon is consistently cited in relevant literature.

Goodman et al. (1998) report on a 1995 symposium at the CDC of community health researchers and community specialists with the aim of identifying domains of community capacity. The starting point for domain selection was an asset-based view of community. Working groups at the symposium identified domains and linkages between domains. The domains are explained in great detail with particular focus on literature. The domains were not determined to be an exhaustive list, but rather a departure point for community-based projects. This work was selected for its strong theoretical basis.

Duignan et al. (2003) developed a practical guide for community project planning and evaluation in New Zealand based on existing assessment tools, the authors’ work in community development, and literature of community development, in particular the work of (Laverack and Labonte 2000). Additional domains were added to reflect the importance of inclusion of Maori and Pacific peoples. This work was selected for its recognition of diversity and equity.

Hawe et al. (2000) undertook an extensive selection and development of domains and indicators of community capacity in order to improve practice and accountability in the field based on a literature review of capacity building in health promotion,
focus groups with urban and rural health promotion workers, and consultations with health and policy workers and managers. Lists of indicators were then provided to program staff who used them in programming and provided feedback on their utility and relevance. The indicators were then tested for reliability and internal consistency, although the authors caution that the indicator testing has not been validated over time, but was rather a static event. The domains are organized into “predisposing factors”, “enabling factors” and “reinforcing factors” and are accompanied by possible sources for information and examples of sub-domains. These sub-domains may be ranked on a scale of 0 (no) to 2 (yes, fully) for quantitative analysis. Domains for organizational capacity and program quality – among others – are also included in the document. This work was selected for the reputation of the authors and the exhaustiveness of selection and description.

Bopp et al. (2000) developed a handbook on assessing community capacity based on literature and work history of the authors. Much of the work was based on the Alberta “Heart of the Land” project, for which the authors consulted with community using a participatory action research methodology and then reflected on the results of the literature and consultations in order to develop a framework for assessing community capacity. Rather than set out numerical rankings, the authors instead developed a list of appropriate questions to ask during community initiatives to see if they are on track. This work was selected for its action and community-centred orientation to research and program planning and evaluation.

As demonstrated, there are various approaches to the development of domains and indicators of community development. Based on the sources described above, a total of 11 domains were chosen. The following table describes the key concepts related to the domains as derived from these sources.
<table>
<thead>
<tr>
<th>Domain Name</th>
<th>Participation</th>
<th>Linkages</th>
<th>Resources</th>
<th>Skills, learning, knowledge</th>
<th>Leadership</th>
<th>Community structures/ internal relations</th>
<th>Sense of community and identity</th>
<th>External agents/ community relations</th>
<th>Community control</th>
<th>Asking why</th>
<th>Diversity and equity</th>
</tr>
</thead>
<tbody>
<tr>
<td>PHAC (2007)</td>
<td>Participation</td>
<td>Linking with others</td>
<td>Obtaining resources</td>
<td>Skills, learning, and knowledge</td>
<td>Leadership</td>
<td>Community structures/ organizational structures</td>
<td>Sense of community</td>
<td>Role of external support</td>
<td>Problem assessment, community program management</td>
<td>Asking why</td>
<td>Community-supported diversity in projects</td>
</tr>
<tr>
<td>Gibbon, Labonte, Laverack (2002)</td>
<td>Participation</td>
<td>Links with others</td>
<td>Resource mobilization</td>
<td>Talents, skills, strengths, abilities</td>
<td>Leadership</td>
<td>Community or organizational structures</td>
<td>Positive perceptions of community, celebrations</td>
<td>Role of outside agents</td>
<td>Sense of control and ownership over process</td>
<td>Asking why</td>
<td>Aboriginal and Pacific People’s involvement</td>
</tr>
<tr>
<td>(Jackson et al. 2003)</td>
<td>Participation</td>
<td>People come together for a common purpose</td>
<td>Resources</td>
<td>Skills</td>
<td>Leadership</td>
<td>Communication</td>
<td>Sense of community, Conflict managed</td>
<td>External barriers and facilitators</td>
<td>Community power</td>
<td>Critical reflection</td>
<td>Caring for others</td>
</tr>
<tr>
<td>(Goodman et al. 1998)</td>
<td></td>
<td>Networks and linkages</td>
<td>Increased resources, Project infrastructure and sustainability</td>
<td>knowledge and skills, On going learning</td>
<td>Leadership</td>
<td>Communication</td>
<td>Sense of community, shared vision</td>
<td>Knowledge of and support for community</td>
<td>Changed organizations</td>
<td>Critical reflection re: project planning</td>
<td></td>
</tr>
<tr>
<td>(Duignan et al. 2003)</td>
<td></td>
<td>Collaboration</td>
<td>Resources, Type/ mix of services</td>
<td>External resource access</td>
<td>Leadership</td>
<td>Expression</td>
<td>Commitment to community, community identity</td>
<td>Community/external relations</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Bopp et al. 2000)</td>
<td></td>
<td>Linkages</td>
<td>Collective efficacy, networks</td>
<td></td>
<td>Leadership</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Barnsley 2008)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Hawe et al. 2000)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Table I: Domains of Community Capacity**
The above domains/areas for measurement have been grouped into 4 “essential elements of community capacity building (which are the main areas for action and evaluation for CIs). Indicators for each domain will be selected from the literature in conjunction with the development of a tool to evaluate CIs.

### Conceptual Framework: Evaluation of Community Initiatives

<table>
<thead>
<tr>
<th>Essential elements for community capacity building</th>
<th>Domains and areas for measurement</th>
<th>Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enabling community leadership</td>
<td>Participation</td>
<td>* To be determined in conjunction with tool development</td>
</tr>
<tr>
<td></td>
<td>Leadership</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Community control</td>
<td></td>
</tr>
<tr>
<td>Fostering community identity</td>
<td>Diversity and equity</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sense of community and identity</td>
<td></td>
</tr>
<tr>
<td>Developing skills and resources</td>
<td>Skills, learning, and knowledge</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Resources</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Reflection</td>
<td></td>
</tr>
<tr>
<td>Building and utilizing structures and relationships</td>
<td>Community and internal structures</td>
<td></td>
</tr>
<tr>
<td></td>
<td>External supports and community relations</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Linkages</td>
<td></td>
</tr>
</tbody>
</table>

Areas of measurement may be evaluated collaboratively by different stakeholders. In keeping with the values and principles of community capacity building, it is suggested that annual or bi-annual evaluations be conducted jointly by agency staff and community members. Additionally, agency management should be involved in evaluating external supports and community relations; resources; and linkages.
The involvement of these key stakeholder groups (agency management, program staff, and community members) in contributing to different parts of the evaluation process is visually represented in the following framework:

**Framework: Stakeholder involvement in evaluation process**

- **Agency management**
  - External supports and community relations
  - Resources
  - Linkages
    - Skills, learning, knowledge
    - Leadership
    - Community control
    - Community/internal relations
    - Reflection
    - Sense of community and identity
    - Participation
    - On-going (brief), funding requirements, demographics

- **Program Staff**

- **Community members**
**Description of domains**

Based on the review of literature and resources described above, 11 domains for community capacity building were identified, grouped under four “essential elements”.

1. **Enabling Community Leadership**

   Effective Leadership within the community is fostered by participation, and effective leadership is necessary to support broad community participation. Through participation a community is able to influence and determine the processes which shape its health and well-being and, as such, it is a critical component of community control.

   **Participation**

   Participation is the most consistent domain of community capacity. It was widely interpreted to mean multiple stakeholders being meaningfully engaged in various components of projects and programs, including decision-making and evaluation (Bopp et al. 2000; Duignan et al. 2003; Public Health Agency of Canada 2007).

   Participation is directly related to diversity and equity (ensuring a wide range of actors and community members are involved). Participation is also a critical element of community control, as community members have a direct say in defining, analyzing, and acting on issues of most concern to them (Gibbon, Labonte, and Laverack 2002). This is dependant on the type of participation. For example, if community is involved simply in consultation, this is not as empowering as genuine control over decision making (see for example (Arnstein 1969).

   Participation is influenced by pre-existing skills, talents, and abilities within a community and a history of community identity (Goodman et al. 1998). It is also enabled by the presence of strong social networks and opportunities for meaningful involvement (Goodman et al. 1998) and, as such, is affected by social and program structures and the organization of programming. Linkages are the mediating factors through which this influence occurs. Another mediating factor is the accessibility of resources to make participation feasible, such as the provision of child care, space for meetings, and compensation for particular activities (Goodman et al. 1998).

   Participation and leadership are a feedback loop, as strong community leadership is reliant on member participation, community participation can be improved with strong leadership, and participation in multiple aspects of a project may strengthen leadership in a community (Goodman et al. 1998).

   **Leadership**

   Leadership includes both the formal and informal roles of those community members who act to provide direction and vision, engage with others, and enhance project capacity (Goodman et al. 1998; MacLellan-Wright et al. 2007). Leadership and skills, talents, and abilities reinforce each other, as leadership is both dependant on, and a builder of, specific abilities, such as conflict resolution, collaborative work, vision, and decision-making (Duignan et al. 2003; MacLellan-Wright et al. 2007). Leadership and participation are also reinforcing, as mentioned above. Strong leaders can act to
remove barriers to community participation and act as a pathway through which resources, structures, and programs flow, and ensure that networks are strengthened within community and between community and external factors (Goodman et al. 1998; Gibbon, Labonte, and Laverack 2002). These connections and opportunities guide overall learning and skill development (Bopp et al. 2000).

Community Control
Community control, in keeping with Gibbon, Labonte, and Laverack's (2002) vision of empowerment presumes that: “the identification of problems, solutions to the problems and actions to resolve the problems are carried out by the community.” Goodman et al. (1998) refer to community power: the ability of a community to have influence and create or resist change (with partners) in matters relevant to the community while (Jackson et al. 2003) emphasize “community members hav[ing] a sense of control and a sense of ownership in relation to planning and implementing local programmes and activities.”

Community control links through virtually all domains of community capacity, as informal leadership, a base of power and participation are increased with community control. Correspondingly, resources such as internal linkages and external political capital may increase in communities who both cultivate these resources and linkages and ensure that the environment is conducive to their development (Goodman et al. 1998).

2. Fostering Community Identity
A sense of community identity is expressed in terms of determining who is/isn’t involved and how members conceptualize their membership and their place within the community. Communities are diverse and, as everywhere, inequities are real and present.

Sense of Community and Identity
A sense of community is characterized by members feeling connected to each other and the space they inhabit, overall levels of respect and concern for each other and for larger issues affecting the community, and a positive perception of the community (Bopp et al. 2000; Goodman et al. 1998; Jackson et al. 2003; Hawe et al. 2000). This is fostered through on-going participation in community structures and linkages (MacLellan-Wright et al. 2007; Hawe et al. 2000).

Reflection and sense of community are interlinked, as group reflection on community circumstances can lead to increased awareness of the issues faced by all and their place within a larger context. In turn, this can affect external agents in issue definition for projects, particularly if the community is involved in the process (MacLellan-Wright et al. 2007; Goodman et al. 1998). Desire of community members to lead and participate within activities and to build networks is fostered by a strong sense of community (Goodman et al. 1998). With a strong sense of community identity, power may be more equally or equitably distributed, therefore influencing the diversity of voices heard in processes (Goodman et al. 1998).

Diversity and equity
The concept of diversity and equity is not always delineated as a separate domain in community capacity, but is often mentioned in reference to participation and community/internal relations. In the case of (Duignan et al. 2003), diversity is an explicit domain due to the authors’ location in New Zealand, where Maori treaty rights guide community involvement in relevant projects. This orientation has been extended to other Pacific peoples as well. Jackson et al. (2003) emphasize that community-supported diversity in projects should be considered an indicator of capacity and Hawe et al. (2000) describe mutual caring for all members of and issues in a community as a predisposing factor for community capacity.

3. Developing Skills and Resources

Community capacity is often defined in terms of its characteristics, such as increased skills of community members, stronger linkages within and without community, and increased access to community and external resources. Reflection is both a skill and a resource in that it is a process that should help communities uncover the root causes of issues they face and plan for action accordingly.

Resources

Resources for community capacity include time, funding, personnel and/or volunteer support, information, and facilities. The ability of a community to mobilize these resources is a key factor in long-term community success (Gibbon, Labonte, and Laverack 2002). Necessary and valuable resources exist both within and outside of communities (MacLellan-Wright et al. 2007; Goodman et al. 1998; Hawe et al. 2000; Duignan et al. 2003). Increasing resources does not necessarily lead to increased community capacity, but it is an enabling factor, as it creates the space and opportunities for participation and involvement from diverse groups (Duignan et al. 2003; Goodman et al. 1998). The distribution of resources within a community will be affected by the diversity and equity represented in community structures and can in turn reinforce or transform this representation (Bopp et al. 2000). As well, the influence from programs, organization, external agents, and larger structures on community-level factors often works through the resources made available from these linkages, such as community health workers, education programs and funding for meetings and activities (Goodman et al. 1998).

Skills, learning, knowledge

Skills, talents, and abilities in place in a given community are present on both the individual (e.g. the ability to chair a meeting) and community level (e.g. ability to work together and resolve conflict) (Jackson et al. 2003; Goodman et al. 1998). As starting points, goals, and facilitating factors, these form the bedrock of community capacity building (Jackson et al. 2003; MacLellan-Wright et al. 2007). Leaders need particular skills, such as decision-making, networking, and mentorship for further leadership, linkages connect complementary and necessary skills, advocacy and action need particular skills such as group organizing, and critical reflection is a skill that facilitates learning (Goodman et al. 1998). Learning for community capacity is a long-term, ongoing process that is inextricably connected to reflection and “asking why” in the community and external organizations (Bopp et al. 2000).

Reflection
“Asking why” is a community process where the root – or upstream - causes of an issue are analyzed with a problem-solving focus. Community control is fostered as a community better understands the base causes of issues and develops change strategies and programming alongside external partners (Gibbon, Labonte, and Laverack 2002; MacLellan-Wright et al. 2007; Duignan et al. 2003). Given that many of the upstream determinants of community health are rooted in external and internal structures (including barriers to access, discrimination, inequity, education opportunities, etc)(Jackson et al. 2003), there are implicit connections between reflection and all domains of community capacity. Furthermore, as this process uncovers issues through community processes, sense of identity and meaning may be influenced (Goodman et al. 1998).

4. Building and Utilizing Structures and Relationships

Strong structures and relationships within a community, and between the community and external organizations, provide the necessary foundations for community capacity through linkages and access to resources. The values and principles of programming and staff influence the processes and outcomes of community initiatives.

Community structures/Internal Relations

Just as there are previously existing skills, abilities, and talents within communities, there are also structures such as organizations, networks, and groups (MacLellan-Wright et al. 2007; Gibbon, Labonte, and Laverack 2002). These structures and relations can both enable and hinder community capacity (Jackson et al. 2003). Strong structures and enabling internal relations ensure that a diverse range of voices are heard and acted upon, affecting participation (Duignan et al. 2003; Bopp et al. 2000). Leadership is also a component of community structures, given that leaders both operate in, and shape, their environments (Goodman et al. 1998). Strong community structures facilitate work with external agencies and structures and may help develop a sense of, and commitment to, a community by its members (Hawe et al. 2000). Structures are essential for community control, as they form a base point for reflection and action (Gibbon, Labonte, and Laverack 2002).

External agents/community relations

External agents include funders, agencies, and health centres external to the community as well as policies and perceptions (Jackson et al. 2003). Outside agents have a strong role to play in fostering community capacity by challenging external barriers to development such as detrimental policy and negative perceptions within other external agencies (Jackson et al. 2003). These organizations may also provide communities with resources or links to appropriate sources for collaborative action (MacLellan-Wright et al. 2007; Gibbon, Labonte, and Laverack 2002). A strong relationship between community and external relations is critical to long-term sustainability in capacity building, as learnings can be shared across communities and agencies (Hawe et al. 2000).
Linkages
Linkages and collaboration with other agencies, communities, networks, organizations, or individuals are considered essential for strong community capacity (MacLellan-Wright et al. 2007). These connections foster access to a range of resources (MacLellan-Wright et al. 2007; Goodman et al. 1998; Hawe et al. 2000), increase opportunities for collective learning action across sectors and groups (MacLellan-Wright et al. 2007; Duignan et al. 2003) and can increase representation and participation of diverse groups (MacLellan-Wright et al. 2007; Hawe et al. 2000). Networks also bring complementary skills together, creating a whole that is greater than the sum of its parts (Goodman et al. 1998; Duignan et al. 2003).

Community identity and a sense of community are strengthened through linkages and collaboration where trust and cooperation is developed (when linkages work beneficially) (Goodman et al. 1998). Increased skills, resources, and sense of community foster an environment conducive to increased community power as well as multiple avenues through which community members may act (Goodman et al. 1998). Of course, the development of strong linkages is dependant on resources, skills, participation and pre-existing organizations and programs (Duignan et al. 2003).
References
Hawe, Penelope, Lesley King, Michell Noort, Christopher Jordens, and Beverley Lloyd. 2000. Indicators to help with capacity building in health promotion. In New South: New South Wales Health Department.