

## **Prevention and Control of Heart Disease and Stroke: National Partnerships for Achieving Cardiovascular Health Program Goals**

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### **Lecture Summary**

**Traditional Partnerships:** Successful prevention and control of heart disease and stroke is an achievable but formidable task. It is a task that requires strategic partnerships between heart disease specialists, stroke experts, general practitioners, nurses, pharmacists, other allied health practitioners, cardiovascular research scientists, public health practitioners, voluntary health organizations and other public and private agencies. Although all of these groups of professionals may share in the vision of promoting health and reducing death and disability, the real challenge is in minimizing duplication of efforts at the national, state and local level, but also in capitalizing on the individual strengths of each organization for maximum synergy. The Health People 2010 partnership that brought together the AHA, CDC and other public health agencies, is one example of these partnerships. Similarly, the emerging partnership between the CDC State Heart Disease and Stroke Prevention Program and the HRSA-Bureau of Primary Health Care Collaboratives for optimal management of hypertension, heart failure and secondary prevention of heart attack survivors is another excellent example of these strategic partnerships. Other strategic CDC partners in CVH include the World Heart Federation, World Health Organization, Heart and Stroke Foundation of Canada, National Stroke Association, International Society of Hypertension in Blacks, Association of Black Cardiologists, and the American College of Cardiology. These partners share common priorities and interests in *Healthy People 2010* and most importantly, have unique competencies through which they address CVH goals.

**Non-Traditional Partnerships:** A wide variety of public and private agencies and organizations whose primary missions lie in the non-health sector can be crucial in the battle to conquer heart disease and stroke. In fact, non-traditional partnerships may be the crucial element in the next wave of public health successes in conquering heart disease and stroke. It is important to emphasize here that the goal of public health is not in lobbying these groups but in providing

them credible and timely information on the burden of CVD, the science base for action and the compelling evidence of the benefit for intervention. Key among these groups are national and state associations of legislators; national governors' associations; federal and state level agencies in education, transportation, agriculture, parks and recreation; real estate and construction and building industry; food industry leaders; civic, tribal, and other community leaders; icons, heroes and heroines in media and entertainment; advertising agencies; and business groups of all sizes; insurance agencies and purchasers of health care. Ultimately, the general public, at the grassroots level, must be involved as crucial partners.

**Examples of Needed Actions:** For both traditional and non-traditional partnerships, a necessary first step is to take action! Developing an implementation strategy that is consistent with the framework of the Public Health Action Plan is important whenever possible. Realigning individual partner strategic plans with the Healthy People 2010 goals and objectives (as was well-implemented by the AHA) is an important start. Other actions that support and strengthen the public health work force through funding, continuing professional education, training and other skill-building activities are also very important. Joint interventions may be built around (1) population-based health education and health promotion activities; (2) public awareness campaigns, especially of signs and symptoms of heart disease and stroke; (3) policy development and environmental change; (4) facilitation of relationship development and resource sharing, and (5) information sharing. Other sample activities in the schools, worksites, health care, and community settings that require strategic partnerships will be discussed.

### **Selected References**

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