Factors contributing to the sustainability of an early childhood obesity prevention intervention: The *Infant Program*
Dr Penny Love
Dr Rachel Laws
A/Professor Kylie Hesketh
Professor Karen Campbell
The Infant Program

Victorian Maternal and Child Health Key Ages & Stages Service
The Infant Program

- Colour Every Meal with Fruit and Veg
- Snack on Fruit and Veg
- Eat Together, Play Together
- Parents Provide, Kids Decide
- Off and Running
- Tap into Water
Evolution of the *Infant Program*: from trial to sustainability

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Evolution: formative research
Evolution: intervention testing

Evolution: small scale implementation
AIM:
To explore the enablers and barriers to the sustained implementation of the Infant Program within Victorian, Australia
Methods

• Convergent parallel mixed methods study
• Online survey of trained facilitators since scale-up (RR: 52.4%)
  – ongoing implementation (5 LGAs)
  – discontinued implementation (5 LGAs)
  – no implementation (4 LGAs)
• Follow-up telephone interviews of sub-sample
  – ongoing implementation (4 LGAs)
  – discontinued implementation (4 LGAs)
  – no implementation (3 LGAs)
Characteristics of Individuals

Implementation Process

Inner Setting

Outer Setting

Intervention Characteristics

Characteristics of Facilitators

Knowledge & beliefs about intervention; self-efficacy; implementation skills; identification with organisation; personal attributes

Implementation decisions; evidence; relative advantage; adaptability; complexity; design quality; cost

Inner Setting

Organisational structure; networks & communications; culture; implementation climate; readiness for implementation

Outer Setting

Participant needs; cosmopolitanism; peer pressure; external policy & incentives

Implementation Process

Coordination; engagement; execution to plan; reflection & evaluation

Thematic analysis

<table>
<thead>
<tr>
<th>CHARACTERISTIC</th>
<th>TOTAL (n=33)</th>
<th>Ongoing (n=15)</th>
<th>Discontinued (n=11)</th>
<th>Never (n=5)</th>
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## Results

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<th>ENABLERS</th>
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<td>Availability of staff to deliver</td>
<td>Ability to maintain attendance of parents</td>
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<td>Confidence of staff to deliver</td>
<td>Management support</td>
<td>Availability of staff to co-ordinate</td>
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<td>Management support</td>
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<td>Alignment to organisational priorities</td>
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<td>Ability to incorporate as routine practice</td>
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<td>Confidence of staff to deliver</td>
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<td>Ability to recruit parents</td>
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<td><strong>ABILITY TO MAINTAIN ATTENDANCE OF PARENTS</strong></td>
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<td>Availability of staff to deliver</td>
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**HIGH likelihood of continuing implementation**

**LOW likelihood of (re) starting implementation**
CONCLUSIONS

ENABLERS OF SUSTAINABILITY

• Management support
• Sufficient funding and staff
• Incorporation into routine practice
• Alignment to organisational priorities
• Recruitment & retention of adequate participant numbers
• Confidence of staff to deliver & coordinate the program

CFIR Constructs

Inner setting - Leadership engagement
Inner setting - Available resources
Inner setting - Compatibility
Inner setting - Relative priority

Outer setting - Patient needs

Individual Characteristics - Attributes
Navigating the sustainability landscape: a systematic review of sustainability approaches in healthcare

J. Lennox³, L. Maher¹ and L. Reed³

Sustaining obesity prevention in communities: a systematic narrative synthesis review

J. Whelan¹, P. Love², L. Mfillie³, S. Allender³ and C. Bell³

Factors for sustaining health programs

- Resourcing
- Leadership
- Partnerships
- Policy & procedures

Factors for sustainability

- Training & capacity building
- Program effectiveness
- Stakeholder participation
- Monitoring progress
- Integration into existing programs/policies
Lessons learnt

• Streamlined administration and evaluation processes
  > Online registration and evaluation system
• Accessible facilitator training
  > Online training course
• Capacity building on implementation processes
  > Case studies and facilitator networking
• Participant online options to complement sessions
  > Program app and website
• High level organisational support
  > Partnership engagement
  > System wide approach to roll out
“I’ve been able to incorporate Infant into my role whereas I think other dieticians or maternal and child health nurses don't have that flexibility”

“I think if you get really, really good training, that puts you in a good place to then deliver”

“Infant provided a structure and some resources for providing a program to mothers addressing many of the issues that we wanted to address”

“The reason we can run so many Infant programs and offer so much support is because we have the funding to do it”

“In the early stages the scheduling was quite difficult.. at age specific times, and juggling the dieticians’ diaries….but we’ve come up with a reasonably good scheduling system now”