Promoting Wellness for People in Mental Health Recovery

A Step-by-Step Guide to Planning and Conducting a Successful Health Fair



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For additional copies of the manual, contact the UIC Center on Psychiatric Disability and Co-Occurring Medical Conditions.

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Chapter I - Introduction and Purpose of the Guidebook We have created this guidebook to help groups and programs that serve people living with mental health and/or substance use problems plan and conduct health fairs.

Why offer health fairs to people in recovery?

- ⇒ Many are managing serious medical conditions that can be improved with education and support.
- ⇒ Health fairs provide personalized health information, including body mass index, blood pressure, cholesterol, and blood sugar levels.
- ⇒ Health fairs are a popular way to help people become aware of and make choices that lead to a satisfying lifestyle centered on wellness.
- ⇒ Health fairs teach people about risk behaviors and factors under their own control, such as what they eat and habits like sleeping, walking, smoking, or alcohol use. By learning about these things, people can make more informed choices about next steps.
- \Rightarrow Health fairs encourage prevention in order to avoid new medical conditions.

What are the Benefits of a Health Fair?

Access to health screenings and tests are the major benefit of attending a health fair. Additionally, fairs include education, support, training, and tangible resources. Health fairs can also include information tables, booths staffed by health providers and selfhelp group representatives, cooking demonstrations, and brief exercise classes like aerobics or yoga. Information tables are especially important because two primary goals of health fairs are making people aware of health issues and providing tools to manage them. For instance, a health fair participant might learn about the impact of smoking on life expectancy, and then, receive information on QuitLines, nicotine replacement therapy, and smoking cessation support groups.

At the same time, a health fair can be fun and rewarding for participants by offering them raffle prizes (pedometers, gift cards), wellness services such as massage and reflexology, and information about local clinics, farmers' markets, and so forth.

A Wellness Partnership

The authors of this guidebook represent a collaboration between the University of Illinois at Chicago (UIC) Center on Psychiatric Disability and Co-Occurring Medical Conditions and the peer partnership program, Collaborative Support Programs of New Jersey (CSPNJ). CSPNJ began by conducting health screenings and fairs throughout the state of New Jersey (including self-help centers, community mental health programs, community events, and peer conferences). They also conducted these events at the annual Alternatives consumer conference in Nebraska, Oregon, California, and Florida. CSPNJ also helped local peer-operated groups and agencies, as well as psychiatric rehabilitation programs across the country, to plan and conduct health fairs throughout the year as well as during Wellness Week (www.promoteacceptance.samhsa.gov/10by10/wellness_week.aspx). Beginning in 2010, UIC joined CSPNJ in hosting health fairs at which over 480 participants voluntarily contributed their screening results to a research effort designed to better understand whose health was at risk and why (http://www.cmhsrp.uic.edu/health/ health_screening.asp). Our shared vision and commitment to wellness and recovery motivated us to work together in addressing the issues that peers face as they manage their physical and emotional health.

This guidebook is written from our practical and personal perspectives. We learned a lot of the details "the hard way" when running health fairs around the country. Throughout this guidebook, we share tips and tools that we have found to be helpful. We offer insights so that you can plan a rewarding event for the people you care about.

You Can Do It!

It is important for readers to keep a sense of perspective! We offer many details in this guidebook, but it's good to bear in mind that fairs can range from small, simple events to larger, more complex ones. We share how we started with small health screenings, and worked our way up to larger health and wellness fairs.

8 Dimensions of Wellness



Food for Thought!

- Wellness is a process of becoming aware of and making choices for a selfdefined and satisfying lifestyle.*
- Many people make positive changes after receiving education, their screening results, and peer support at health fairs.
- Therefore, health fairs can help people become aware of and make choices for a self-defined and satisfying lifestyle.



Start with a Health Fair Committee

As you read this guidebook, you'll see that you need to identify and organize many people. You'll also need to obtain health testing kits and supplies, educational resources, space for the fair, transportation for attendees, furniture, and more. To help guide your efforts, we've included a **Health Fair Checklist and Timeline** and a **Health Fair Milestone Timeline** in the Appendix. These outline the main tasks that need to be accomplished for a successful fair, starting approximately 6-12 months before your event.

Forming a **Health Fair Committee** of people from your organization (and the community, as relevant) to plan and implement your event also will ensure success. As the old saying goes, "Many hands make light work."

Good luck!

As with any kind of event where everything comes together for a short period of time, planning is critical. Throughout this guidebook, we provide the nuts and bolts of running a fair, along with helpful tips and planning worksheets. You'll also find simple handouts that your staff/volunteers can use to operate the screening stations and record test results. Also included are sample promotional flyers, example maps showing where to place stations and booths, Medical Fact Sheets, and a Health Passport that you can distribute at your fair. Finally, we also share the benefits that participants gained from attending our fairs.

We hope this guidebook will serve as a roadmap for planning your own successful health fair, and wish you luck!

Chapter 2 - Reasons to Conduct a Health Fair

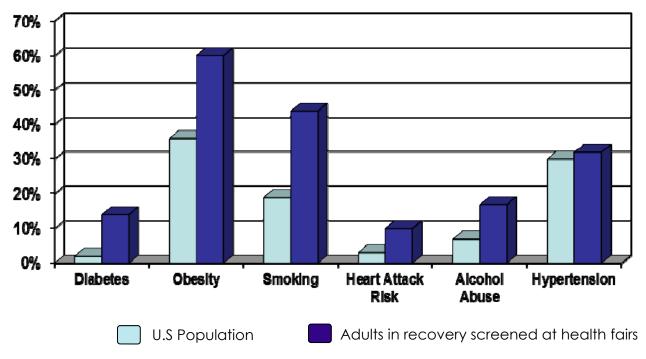
Generally, the driving force behind health fairs is a desire to improve the health and wellness of participants. People living with mental health and substance use disorders are good candidates because they experience more medical problems than people in the general population. The most common of these are preventable conditions including cardiovascular, respiratory, metabolic, and infectious diseases. Others include asthma, chronic pain, migraine headaches, and kidney disease. Many times, these medical conditions are linked to the use of psychotropic medications, the health consequences of poverty, a lack of early detection and treatment, and limited access to health care. Health fairs are an excellent way to introduce people to some of their risks, offer them confidential testing, and help them make a plan for next steps on their journey to wellness. In this chapter, we'll help you consider your reasons for holding a health fair, and how to harness that motivation for a successful event.

A Public Health Crisis

If you are part of the mental health community, chances are you've noticed that many of the people served and supported are living with serious health concerns and medical issues. We sure did! People we knew and cared about were struggling with diabetes, high blood pressure, shortness of breath and other breathing problems, chronic pain, and more. We soon learned that these were not just local issues. Studies show that all of these medical conditions reduce people's quality of life and result in early death for people in recovery. Far too many of our friends, family members, clients, and peers are dying prematurely – as many as 25 years earlier than others in our country (NASMHPD, 2006)! Additionally, these medical problems complicate people's lives, cause dissatisfaction, and decrease productivity. We see it around us every day -people who are capable of working or working more, but are reluctant to get a job or increase their hours because they manage so many medical symptoms and doctor's appointments. People in recovery are made so ill by their physical conditions that they enter nursing homes in their late 50s or earlier, while many in the general population do not do so until their late 80s.

We decided it was time to learn more and take action by holding health fairs for people in the mental health system.

Responding to a Health Crisis



Source: http://www.cmhsrp.uic.edu/download/A Public Health Concern.pdf

Indeed, our concerns were born out by the data we collected from 457 adults with serious mental illnesses who attended one of our health fairs in New Jersey, Illinois, Maryland, and Georgia.

Our participants had much greater rates of diabetes, obesity, heart attack risk, smoking, alcohol abuse risk, and hypertension than those in the general U.S. population. Many also were identified as being treated for these conditions, but still had higher than normal blood pressure, blood sugar, and cholesterol.





How Does a Fair Help?

People may wonder how health fairs can really make a difference in the face of such odds. Research shows that health fairs are useful in helping people become aware of their health status and medical issues. We learned that fairs also increase knowledge about general health, and offer information specific to each individual's personal risk for developing medical problems.

As is reflected in the literature, we also found that our fairs positively affected health beliefs, including increased feelings of control over one's health and ability to take care of health concerns.

Getting the Conversation Started

When planning our health fairs, we hoped to promote wellness, prevent illness, and help those already living with medical conditions learn how to better manage them. We hoped to get conversations started about participants' health beliefs, health risks, and healthier lifestyles. We sought to share new health and wellness strategies, while helping people look at how their health beliefs were affecting their overall wellness. We also wanted to help those who were underutilizing health care learn about available supports, treatments, and services, while exposing them to health care workers and peers who have started on the road to wellness. We wanted everyone to see that, while it can be intimidating to learn about health risks, it also can be empowering when we learn ways to start managing our health and see peers who are working on wellness.

Much is being done within and outside of the public mental health system to help people get the health care they need and deserve. At the same time, some health disparities result from things under people's own control, such as health habits and routines that they can change to feel better physically, emotionally, and socially. We wanted to help people "connect the dots" between how they were feeling, their health habits, and their physical health status.



When we first began holding health fairs at community mental health events, we were happy to see three things:

- 1. People were lining up, sometimes far exceeding the plans we had made for small events. People wanted to know their blood pressures, their blood sugars, their body mass indexes, and other health indicators.
- 2. Some people were already getting treatment and making lifestyle changes to control their health risk factors.
- 3. Many people wanted more information on personal changes, and support for managing or improving their health conditions.

In other words, health fairs were not just our vision. They also were wanted by many people who directly benefitted from them.

Additionally, health fairs not only benefit participants, they also can have an impact upon an agency and surrounding community. Health fairs have been shown to help stakeholders:

- ⇒ collect information about illnesses within certain populations (such as the mental health community) to develop new programs or policies;
- $\Rightarrow~$ define and perfect health fair procedures that can work within community settings; and
- \Rightarrow improve the health of those screened.

Indeed, when we supported a large psychiatric rehabilitation agency in conducting health fairs, we helped them reach their goal to gather more information for their ongoing wellness assessment. We also gave agency leadership a chance to express to their staff and clients the vital role that wellness plays in mental health recovery.



We heard many stories about how people got on the road to wellness after participating in one of our health fairs.

"Tyrone" found out that he had a healthy BMI (body mass index) because he exercised regularly, but was startled to find out from the health fair nurse that his LDL ("bad" cholesterol) was high and his HDL ("good" cholesterol) was low. He was surprised to learn that, even though he felt physically fit, a combination of smoking and poor diet was placing him at risk for high cholesterol and poor heart health. He decided to follow up with his doctor after the event.

"Jane" was told during a health screening that she had very high blood pressure. She had already lost two sisters to heart disease, so she decided to lose the weight she had gained while taking antidepressants rather than adding a new medication. "[After losing] 40 pounds, [my blood pressure] dropped like a stone," Jane said. "I am not considered a cardiac risk anymore. Screenings are crucial. Paying attention and taking action saved my life."*



Why Do You Want to Host a Fair?

There are many reasons to hold a health fair. You may want to use the information gathered to add services or influence state policy. Your program or state may be implementing a health improvement initiative, and thus, needs information about the health of people served. You might be partnering with researchers to gather information on the health differences between those living with mental health/ substance abuse concerns and the general population. The information gained from a health fair can help peers take control of their own health and well-being. Health fair data also may be beneficial for use in grant applications for funding future wellness initiatives, or for designing and monitoring services designed to improve wellness.

Typically, however, the main reason organizations or stakeholders offer health fairs is to help the people served or supported improve their health and wellness.

WHY OFFER A HEALTH FAIR?

You never know where a health fair will lead. It will be worth it if:

- ⇒ One person who is not receiving medical care finds out about his high blood sugar and gets treatment before it has a bad impact
- ⇒ Someone decides to reduce salt intake after learning that she has high blood pressure
- ⇒ Someone resolves to form a lunchtime walking group at his work place or program
- ⇒ A participant plans to start drinking water instead of soda, sweetened tea, or energy drinks
- \Rightarrow An attendee cuts down on or quits smoking
- ⇒ Someone reduces or quits drinking alcohol

All of these things happened to people who attended our fairs!

Chapter Summary

There are many reasons to hold a health fair. We decided to offer them because we noticed that people around us were getting sick and dying before their time. We have seen how health fair attendees can benefit greatly from their participation. Many started walking groups, decided to replace soda with water, or saw a doctor for medical concerns identified by health screening. This chapter provided information and inspiration for why you should offer a health fair in your own program or community.

What are your top reasons for holding a health fair?

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Chapter 3 - Who Will You Reach & How Will You Advertise?

One of the first steps in planning a health fair is figuring out whom to reach. Many details about location, advertising, tests to be offered, and information booths will grow out of the needs of the group you target. For example, a health fair for adult women would make available some different tests and resources than would a health fair for teenagers. In this chapter, we discuss how to go about defining your target group. We also review different approaches you can use to advertise your fair and reach the most people. Your Health Fair Committee can draw from these ideas to create marketing strategies based on the needs and strengths of the people you most want to reach.

Who are you Targeting?

Whether you are located within a peer recovery program or a more traditional community-based agency, you may want to target either your whole organization, a specific group within the organization (such as those with diabetes or those who have limited access to primary care), or a specific branch of your program if it is large and spread across a city or state. You also may decide to open up the event to people in the community who are not members of your program, but who would benefit from free or low-cost screening and resources.

One of the challenging realities you face in planning a health fair is that you are unlikely to reach everyone in your target group, unless you begin with substantial funding, work with your city's public health department to reduce costs, or find a benefactor to underwrite most expenses. If it's large, reaching an entire organization or whole community can be time intensive and costly. You are more likely to secure free testing kits, informational materials, free products, and wellness services for your fair if it is moderately sized and only 1-2 days in length. The larger and longer the fair, the more difficult you may find it to get enough free tests, products, and services. Indeed, we have found that starting small will allow you to have a successful event that you can expand in the future.

Whom do You Most Want to Reach?

Choosing Advertising Strategies

The characteristics of your target group will influence how best to reach them. If your audience is limited to your organization's or program's members, then phone calls, texts, emails, and other client/member communications will work well. Your Health Fair Committee will find it beneficial to visit various sites, talking about the event, passing out appealing flyers, and answering questions. You also will want to put up posters at your sites, and put the information on your web site, if possible.



When collaborating with other organizations and welcoming their members, people from each group will need to be involved in making sure that the right advertising materials and messages reach members of their organizations. A health fair that welcomes the public usually requires a larger effort by a Marketing Subcommittee, and includes newspaper listings, public service announcements via radio and TV (including cable), posters in the community, online social networking, and more.

Which of your partners will be involved in marketing?

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Designing Your Advertising Materials

Advertising materials need to be clear and simple, but eye-catching. Too much text is distracting. Pictures are helpful in marketing materials, but need to be chosen carefully. For example, photographs depicting people as ill or vulnerable may turn off those who don't view themselves that way, in spite of whatever medical conditions they are managing. Pictures that show needles or people having blood drawn may scare away those who are squeamish.

Marketing materials must be proofread carefully, both to avoid mistakes in language and grammar, and to make sure that what you are saying is accurate and complete. Sending people to the wrong building, or telling them to register at the wrong phone number can be disastrous! Make sure that multiple people carefully review all of your marketing materials.



Sequence your Approach

You will find it useful to sequence your marketing materials to build interest. With this strategy, you start by putting out a "save the date" announcement, then share more information as plans are finalized, and finally, send reminder messages to potential participants to build awareness and excitement.



- Who is invited/Who may benefit
- The dates and times
- The fair location, and how to get there
- What, if anything, it costs to attend
- How people need to prepare, if at all
 For example, do any tests require fasting?
- Whom to call with questions or for additional information
- The sponsors and your program/organization information

Why a person should come
 In many ways, this angle is the hardest. You want to be sure to "sell
 the benefits" of attending, based on the interests and needs of the
 people you wish to reach.

Marketing Health Fairs at Conferences

You may be interested in holding your health fair during a conference, such as a statewide peer or mental health meeting. This can be a good way to reach a large number of people in a short amount of time. You'll need to approach the conference organizers ahead of time to secure their permission. Once you have the okay, then your marketing approach best includes:

- ⇒ Mention of the fair in the conference announcement and confirmation packet
- \Rightarrow Posters in the conference registration area
- \Rightarrow Mention during opening remarks from the podium
- \Rightarrow Signage throughout the conference area
- ⇒ Conference volunteers encouraging people to attend and pointing them in the right direction

We've included sample flyers in the Appendix that you can adapt to your needs.

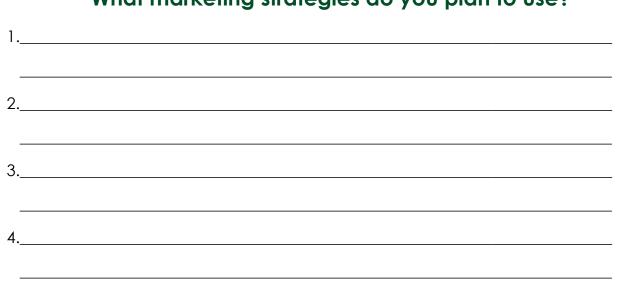
Get the Word Out....and Get it Out Again!

Keep in mind that advertising and marketing are an ongoing process. People will not decide about attending your health fair based on a single message. To spread the word, you'll find it most effective to reach clients/members via multiple phone calls, texts, or emails. You may have to hang your posters repeatedly and in different locations, and visit lots of client/member or staff meetings to generate interest.

We recommend multimedia strategies to reach the most people possible. Some people are reached better by hearing things, others by seeing pictures, and still others by reading words. Some see and "process" texts and tweets by the hundreds, while others may not use a computer or smartphone in a typical month. If you use varied ways to reach people, you are more likely to have a good turn-out on the day of your fair.

Chapter Summary

Key points to consider when organizing a health fair include whom you want to reach and how best to get the word out, given your target group's characteristics. Advertising materials should be simple, easy to read, and eye-catching and contain critical details, such as who, what, when, where, and why. It is important to set aside time for a team to proofread advertising materials before they are distributed. This chapter provided marketing tips and example flyers that you can adapt to your needs.



What marketing strategies do you plan to use?

Chapter 4 - Preparing Attendees for Your Fair

Your health fair will be most effective if everyone you're hoping for shows up. But, equally important is helping attendees to be fully prepared for your event. Just like when visiting the doctor, people need to be prepared for what to expect as health fair participants. Let's walk through the practical and emotional considerations.

Practical Preparation

Many health fairs, including ours, simply ask people to show up and do not require any advance preparation such as paperwork or fasting. If preparation will be needed at your fair, make sure that people know what is required <u>before</u> they arrive. If they will need to complete a brief health history as part of a screening process, for example, ask them to bring a list of their current medical conditions, how these are being treated, if at all, and medications they are taking. If the tests you are offering require fasting, tell participants in advance for how long to avoid food, whether certain beverages are permitted during the fasting period (such as water), and whether you'll have healthy snacks available for them after the testing is complete.



If a pharmacist or other professional will be doing "medication checkups" at your event, participants will need to be reminded to bring current, accurate medication lists (or their actual meds if that is easier for them). If you are offering mammograms for women, they will need to be reminded not to wear any lotion or deodorant to the fair. For any urine testing, remind participants to drink as much water as possible (i.e., 1-2 glasses) before attending. Make sure the location you have chosen has available bathrooms! You also will want to buy only latex-free surgical gloves and bandages to use during your event.

Transportation Needs

Practical preparation includes helping people arrange transportation to and from your health fair. It's best to help people think in advance about where the fair will be located and how they plan to get there and back. If they do not have access to transportation, your Health Fair Committee can work with individuals or groups to identify options. We have found it best if agencies provide vans or buses to take those without transportation to and from the event. Drivers need to know for how long they will be expected to wait as people are registered and go through the fair (usually an average of 1-2 hours, depending on the extent of the activities at your fair).

Child Care Needs

Preparation may include helping parents (or other caretakers) arrange for child care during the time of the health fair. Some fairs make a room available for children, including a couple of small tables with chairs that have inexpensive coloring books, crayons, modeling clay, beading, and dollar-store books. You might help arrange for a babysitting swap, where parents who know each other can take turns watching the kids while the others attend the fair.

Evening or Weekend Hours?

If many of the people in your target group are employed or in school, you'll want to consider offering your fair in the late afternoon and evening, or on a weekend, to accommodate people's work and school schedules.

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What Practical Needs do You Anticipate for Your Group?

Emotional Preparation

For many of us, receiving information about our health can be an emotional experience. This is especially the case if our health is not optimal, we're at risk for diseases or health conditions, or we have family histories of health problems. Some people fear being judged for their poor health or learning that their health is poor. Some may fear the discomfort of having blood drawn. Thus, for many people, preparation for a health fair should take place on an emotional level as well a practical one. Fears can be gently addressed when first talking about the fair by letting everyone know that you are sensitive to these common concerns. You can emphasize that the people running the fair are not judgmental and that many of them struggle with health issues of their own (if this is true). It helps to reassure people that no one will be lectured, and that everyone will be offered support to understand test results and help to identify any next steps they may wish to take. You also can describe exactly how blood will be drawn, which is via a finger prick that feels like a paper cut. People often are relieved to learn that the amount of blood needed to determine blood sugar and blood cholesterol is very small (i.e., a droplet). However, if you plan to take a larger amount of blood for any tests, then explain how that will feel and the supports that will be available to help people manage their discomfort.

Some people's desire for privacy may lead them to avoid sharing health information with others. If you include tests for sensitive health conditions, you may increase their reluctance to participate in your fair. One way to help deal with privacy issues is to emphasize at every step -- including marketing materials, at registration, and during reminder calls -- that the health fair is confidential and anonymous. Explain that anonymous means that people are known only by a number and not their name, and that confidential means that their results will not be reported by name to anyone else. You also can emphasize that every step of the health fair is optional, and participants are free to choose which tests to accept and which to decline.

The Power of Peer Support!

Arrange to have peer specialists available throughout the fair to offer emotional and practical support. Peers can reassure, and share that they too had misgivings and fears, but are feeling much better since they got on the road to healthier living.

What Emotional Needs do You Anticipate for Your Group?

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Excitement is Contagious!

We have found that sharing the benefits of a health fair with genuine enthusiasm is an excellent way to prepare people. This can be done at different points in the process. For example, when holding information sessions in advance of a fair, we are sure to show our enthusiasm and passion for why we think the fair will be helpful, and why to sign up for this don't-miss event!



Marketing materials can attract attention by conveying excitement about the fair and what to expect. This is especially true if there will be free give-aways, healthy food or beverages, prizes, or services such as massages or facials.

Additionally, when pre-registering people or issuing reminders, we've found it helpful to again show enthusiasm for why people should come, what they can expect, and how they might benefit.

The Value of Pre-Registration

Perhaps the best time to prepare attendees is during a pre-registration process. By having people (or groups) sign up in advance, you can explain how to prepare for the event, give them designated time slots for when to arrive, and follow up with reminders by phone, email, or text.

Having a well-organized pre-registration process also will help those preparing the event know how many attendees to expect, and thus, how many supplies to order. Additionally, with pre-registration, your Health Fair Committee can determine how to staff the fair appropriately. We have found it beneficial to sign up attendees at staggered times, so that the fair stations/booths do not get "backed up" and privacy is not compromised due to overcrowding.

Preparation via Marketing

If pre-registration is not possible, then your advertising efforts become all the more important. Ads will need to convey the information you cannot provide in person prior to your event. People will need to read about whether to fast, bring health information or medications, or prepare their skin/bodies in any manner for testing. Without preregistration, you might use phrases such as these in marketing materials:

- ⇒ Do not eat anything for 10 hours before coming to the fair, but it's okay to drink a small amount of water
- ⇒ Please bring a list of your medical conditions and any medicines or supplements you take
- \Rightarrow On-site peers and professionals will answer your questions and give support
- \Rightarrow Your privacy is guaranteed
- \Rightarrow All tests are strictly voluntary and confidential
- \Rightarrow Freebies and give-aways are available

For fairs that must be run on a "stop-in" basis -- such as those at a conference -- you can use a sign-up table at the entrance of the event to register people on-site and let them know what to expect before they enter the fair. This also helps you to regulate "traffic flow" through the health fair stations and booths.



Chapter Summary

When preparing for a health fair, a very important consideration is how to attract and support your attendees. After all, the attendees are why the health fair is being held, and without them, there is no fair. Don't forget that all health fairs have an emotional as well as a physical component. Plan to have support available for those who need it, and also to reassure participants about privacy and confidentiality concerns. Your health fair will be most effective if all of your target group shows up, knows what to expect, and knows what they need to do to prepare.

Chapter 5 - Choosing the Venue for Your Fair

Deciding where to have your fair involves a lot of interrelated decisions. Who you will screen, how many people can be screened at one time, and what screening stations you will provide are decisions that will impact the location of your fair. If you've never planned a fair before, these may be tough decisions for the Health Fair Committee the first time out (they will get easier each time you host a fair and gain experience). We learned the hard way that it's all too easy to underestimate resource needs like space, signage, efficient flow of attendees, and comfortable waiting areas.

One key step is finding a location that people can get to easily, and that has appropriately sized, accessible, and welcoming space. Finding the perfect venue includes some strategic decisions that may not be obvious at first, such as determining for how long you need the space, availability of extra room for people waiting to enter the fair, a quiet place for staff and volunteers to take a break, and whether the venue will lend you tables, chairs, and a refrigerator (or if they will let you bring these in). Let's look at some of the primary decisions involved in selecting an appropriate venue.

In-House or in the Community?

One of your first venue decisions is whether you would like to hold your event at your peer or professional program, or elsewhere in the community. A primary factor in this decision is whether you have enough space in-house to host a fair with the desired number of testing stations and information booths. You may decide to start very small, such as by offering access to a nurse in your lobby to take blood pressures and provide fact sheets. Alternatively, you may choose to host a large multi-day event, with screening vans in the parking lot and busses bringing people from a wide range of locales. The latter type of fair typically requires a large amount of resources that may be out of reach for you. As a first-time event, we recommend starting larger than one nurse in your lobby, but smaller than a multi-day event bussing in people from across your local area.



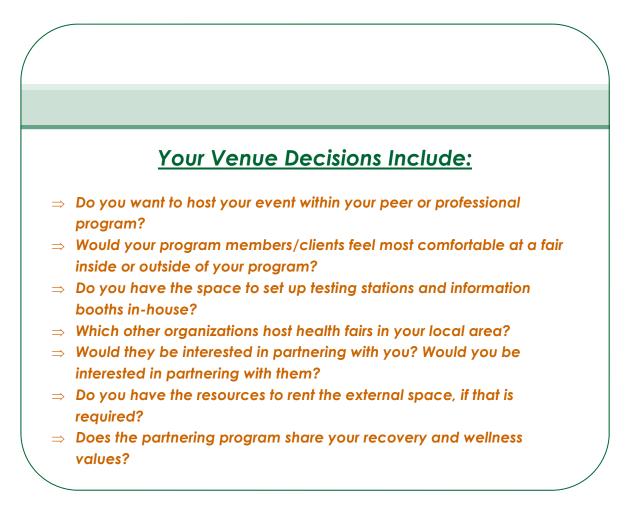
When deciding whether to stay within or go outside of your program, it's useful to consider whether your target audience would be more comfortable being screened at your program (benefits being that it's familiar and peers will be there for support) or outside of your program (benefit being that there is perhaps more anonymity for sensitive tests, such as for substance use or HIV infection). If your Health Fair Committee is unsure, it would be helpful to do an informal survey of your members/clientele to see whether they have preferences about where they'd most like to attend a health fair.

If you decide to look outside your program, we recommend thinking beyond the mental health or substance abuse communities for partners. In fact, public schools, colleges, doctor's offices, trade associations, places of worship, and many other groups conduct fairs to improve the health of their members. Sometimes health fairs are offered to meet a particular need, such as a local affiliate of the American Diabetes Association hosting a community fair to offer blood sugar testing, information, and resources. Other times, fairs are offered to a specific group, such as one focusing on the needs of people at a local senior center. CSPNJ scheduled its first major fair during the annual mental health peer conference in New Jersey, where they knew there would be over 250 peers in attendance whom they could reach with health screening and information. Screening at statewide conferences can be a big success!



When planning your venue, think outside the box. At CSPNJ, we worked with a local health program to bring a "screening bus" to our agency's annual picnic, which offered free testing for blood pressure, blood sugar, cholesterol, and HIV infection. People were lining up all day! Often times, health fairs are offered as a component of an academic training program, with space provided by a university or college. For example, colleges of nursing and medicine conduct health fairs to provide their practitioners-in-training with experience doing testing, interacting with patients, and giving back to their communities. If you're interested in this type of event, you can call your local university to ask whether they have any upcoming health fairs, and whether they would be interested in partnering with your group. You can showcase the mutual benefits of their partnering with your program in identifying and supporting health fair attendees.

Typically, you have a lot more control over planning when the venue is your own. However, you might find it easier to partner with another organization, or to tag a day onto an existing fair, where they already have secured the rooms, tables, chairs, and so forth. At the same time, you'll want to be sure that the external partners share your vision and values around wellness for people in mental health recovery, and that you share theirs. It is easier to collaborate on planning a fair if the partners involved share key perspectives and views about wellness.



How Many People?

One of the toughest things to estimate when planning your first health fair is how many participants to plan for. We've hosted fairs where half of the people registered actually showed up, and others where three times as many people as expected arrived. If you're working with your own program, you'll have a sense of how popular these types of events tend to be. A guideline is that one-half to two-thirds of the people who preregister will actually show up. However, you'll still need to plan for having more testing and other materials than the number of people expected, just in case you have underestimated attendance. Remember, expect fewer but plan for more. We strongly recommend "amping up" your marketing to generate interest, as discussed in the previous chapter. If you're partnering with another program, tap their expertise regarding how many people generally attend their events, and see whether you find that to be a reasonable number or whether you'd like to bolster your marketing plans to increase attendance.

Additionally, consider days of the week or hours of the day when people are most likely to be coming to the health fair location anyway, such as days when meals are served or checks are distributed. You may find it easier to attract participants if they already were planning to be at the location that day.

In general, we recommend planning for somewhat more space than you think you'll need, so that you are not overwhelmed if more people attend than you originally anticipated. It's usually easier to deal with having more space than needed rather than the other way around. Bear in mind that some things that affect attendance will be entirely outside of your control, such as a snowstorm the day of the fair or the breakdown of a van you were counting on for transportation.



How Many People Do You Expect?

Can People Get There?

In selecting a location, consider whether it is conveniently located for the attendees, volunteers, and exhibitors. If participants will drive to your event, there needs to be adequate and affordable parking available. If people are brought by van or other larger vehicle, the location must be workable for the transportation being provided (drop off, pick up, turnaround, etc.). Parking must be sufficient not only for attendees and staff, but also for any special vehicles that may be brought with equipment or other resources.



Once they park, people need to be able to follow a clear route to and from the fair. Well-placed signage will guide people to where they need to be, along with volunteers placed at key locations in the parking lot and throughout the event.

Ensuring Inclusivity

It's important to use bilingual signage if you're outreaching people who speak languages other than English. If you are serving people with physical disabilities, you'll need to ensure that there are wheelchair-accessible entrances, testing rooms, and bathrooms. Those who are deaf or blind will need interpreters or guides, and possibly extra support getting through the fair.

When and for How Long?

Part of choosing your venue involves knowing which days you wish to offer your fair, the hours for the fair, and for how many days you will host it. Among other things, this will help a host organization determine availability of space. For example, a partnering program might be holding a summer conference, and thus, cannot offer you adequate space for the months of June or July. Or, a program may not be authorized to open the building on evenings and weekends without a special waiver or supervisor present.

Estimating Space Needs Based on Square Footage

Health fairs require a surprisingly large amount of space. By the time you consider the number of testing stations, information booths, waiting areas, and private spaces for those staffing the fair to take breaks or eat lunch, as well as laying out stations to ensure flow and privacy, you will likely find a need for no less than **70 square feet per person**! Keep in mind that the maximum total at any given time includes both those being screened and all of your workers/volunteers. For example, under this scenario, if you expect 30 people (5 staff, 25 attendees) at one time each hour, you will need at least 2,100 square feet for your fair (70 square feet x 30 people = 2,100 square feet). Typically, this number is higher for a venue that is challenging to use, such as one that is oddly-shaped or one with several smaller rooms within it.

We have found it useful to create a layout using Microsoft Powerpoint or another software application to assess how many square feet are needed prior to looking for available space within a program or community. This layout isn't "set in stone," and changes can and will be made, but it is important to have a handle on maximum square footage before you start scouting around for a suitable space. We've included **sample screening room layouts** in the Appendix, which you can adapt to fit your needs.

Important Planning Tip!

As you think about needed square footage, it's important to remember the need to ensure privacy at your fair, which includes both **visual privacy** (what people see) and **auditory privacy** (what people hear). For example, screening for drug abuse involves asking participants to report illegal activities, while measuring BMI requires discussing people's weight out loud. This is why we generally recommend 2-3 yards between stations to ensure privacy and comfort for participants and staff.

Other Key Space Requirements

Also considered in maximum square footage is whether you are offering tests that must be done in a separate space, either in a private room or walled off by screens. For example, mammograms or cancer screenings (breast or prostate) must be done in a private room, while dental exams and weigh-ins are best done in a screened-off space.

As you're configuring space needs, allow plenty of space between stations to accommodate wheelchairs, walkers, and people using canes. People who have trouble walking or standing will need a space to rest (in chairs) either between stations or near the testing areas.

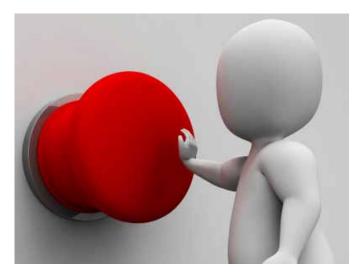
Some fairs offer no food or may provide a few simple, healthy snacks (such as water bottles and fruit). Supplies are discussed in greater detail in the next chapter. However, if you plan to offer food or beverages that require refrigeration or heating, you will want to make sure that the necessary equipment (refrigerator or coffee/tea urns) is available, and that you are authorized to use it for your event. If you need to bring in a refrigerator or coffee urns, remember to include them in your space estimate.

Also, consider how much square footage will be needed by any demonstration stations such as a cooking or nutrition demonstration. Mini exercise classes will require enough space for at least 3-5 people to try out the exercise or dance routines.

When choosing your venue, remember to ensure that you have adequate access to electricity in all testing and ancillary rooms. Electricity may be needed to refrigerate testing supplies, heat the coffee pots, and run the computers or TV/DVD players for health education videos. See the next chapter for more tips about needed supplies and resources.

Take home message

To be successful, health fairs should be offered in a space that meets the full range of participants' needs. Otherwise, it will be necessary to request or rent space elsewhere.



Access to Emergency Care

It is important to choose a location that is conveniently located near a hospital emergency department or other urgent care facility. At least one person at most of our fairs was found by the onsite medical professionals to be in need of immediate care for either dangerously high blood pressure or blood glucose. You will need to work with your organization and/or the host organization to develop an emergency protocol, including who will transport people to urgent care and how. You also need to train a few carefully selected volunteers in how to speak with the attendee in a calming and reassuring manner while he or she waits to be transported. We recommend asking the attendee if you can call him/her the next day (and get a phone number) to ensure that everything is okay, that needed treatment was delivered, and that follow-up plans were made.

Risk Management: Insurance Riders

If you are hosting your fair at an outside organization, you may be asked to secure an insurance rider. A rider is used so that the facility's management team can document that the organization borrowing its space has insurance and will take responsibility for any accidents or injuries resulting from an event. If your organization has an insurance policy, then riders are typically easy to obtain at no additional cost. It is important to plan for this in advance, since some facilities expect a properly worded rider before the event can go forward.

Clean Up Needs!

Don't forget that it takes time to break down the health fair at its conclusion. This needs to be factored into the total time the space is needed. You may find it helpful to create a "clean-up checklist" to streamline this process and organize management of breaking down and packing up.

Chapter Summary

Good planning means that health fair participants will move through your fair at a reasonable pace, enjoy the experience, and have time to talk at the end about any health changes they want to make. Key venue decisions include: whether to hold the fair in-house or in the community; how large your fair will be (how many people you wish to reach); and how pre- and onsite registration will be managed. Additional venue decisions include convenience of the location, accessibility for people with disabilities, whether private rooms will be needed for certain tests, access to required electricity and equipment, and obtaining an insurance rider, if needed. One of the "hidden" factors in choosing a space is figuring out how long you will need it, which includes time for various activities like: setting up the fair; onsite training for staff/volunteers; testing and discussion at each station or booth; staff lunch and breaks; and breaking down the fair at the end. Also factored into your venue decision is whether you need a space on evenings or weekends to accommodate attendees who work, are in school, or are otherwise unavailable on weekdays. Finally, access to emergency department or urgent care facilities is important.



Make a List of Your Main Space Requirements

Chapter 6 – Health Fair Supplies and Resources

Depending on the size of your health fair, you may require a surprising amount of supplies and other resources. The good news is that some organizations will donate or provide discounts on labor and supplies for your fair, especially with enough advance notice. This chapter reviews some of the standard supplies and resources you will need for your fair. We have included a <u>Health Fair Supplies & Budget spreadsheet</u> in the Appendix that we used to plan for our health fairs. The spreadsheet includes fields for making note of when supplies or services were requested, received, and/or confirmed, and by whom and on what date. You can use this spreadsheet to guide your planning efforts. Additionally, as discussed in Chapter 9, you can use this spreadsheet to track and monitor health fair expenses.

Health Testing and Miscellaneous Supplies

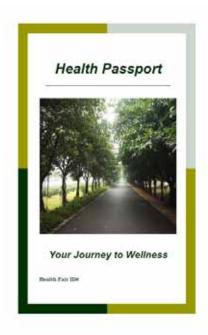
Planning for testing and other material supplies is a primary task for your Health Fair Committee. It can take 10-12 weeks to identify and obtain the correct supplies, particularly if you are seeking free donations from local pharmacies, grocery stores, or national trade organizations. This is because you need time to identify and purchase any supplies that you eventually learn will not be donated.

The Health Fair Supplies & Budget spreadsheet in the Appendix includes a comprehensive list of health testing supplies, including lancets, latex-free gloves and bandages, sterile cotton balls, alcohol preparation pads, hand sanitizer (for each station/booth), and biohazard containers (for blood byproducts and other body fluids). Also included on the spreadsheet are the large number of office supplies needed at most health fairs, including writing utensils, staplers and staples, paper clips, binder clips, scissors, extension cords, and duct tape.

Typically, the nurses involved in your event will have relationships with local health care facilities that will safely dispose of the biohazardous waste (sharps and blood byproducts) for free.

Recording Participants Results

You will want participants to leave your fair with the results of all tests and screenings. One way to do this is with a **Health Passport**. These are commonly used at health fairs because they provide an easy and accessible way to record results of participants' screening tests. Generally, Health Passports contain information about the medical conditions being assessed, interpretation of scores for each condition, and space to record an individual's personal results. Health Passports also can provide information about free resources, and space for health fair staff and participants to record questions, answers, and next steps.



People receive their Passport upon arrival at the fair and carry it with them from station to station so that test results can be recorded. For this reason, it can be easy for participants to mislay their Passport, so you will want to devise an anonymous way of associating the Passport with its owner. Avoid recording participants' full names on Passports if you can. We suggest a system of identification (ID) numbers to preserve confidentiality, such as people's initials followed by the numbers of their birthdates.

Alternatively, you can have a list of numbers available at the fair sign-in station, and record participants' name next to a number followed by writing that number on their Passports. If a lost Passport is found, you can use the list to reunite it with its owner. You will want to destroy this list once the fair concludes. The Health Passport that we designed can be found in the Appendix of this manual, or can be downloaded for free from our web site at the link below.

If you prefer a simpler approach, you can create a one-page sheet called, **My Test Results**, and record the name and test value for each station the participant completes. In case this is mislaid at the fair, you may want to use ID numbers as described above.

Medical Fact Sheets

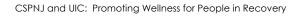
At each station of your fair you'll want to give to participants a **Medical Fact Sheet** with basic information about the condition for which they are being tested or screened. We have included our fact sheets in the Appendix of this manual, and you are welcome to distribute them at your fair as long as you include the Center's information and funding statement on each one. You can choose how many fact sheets to distribute. The U.S. Department of Health and Human Services, the Centers for Disease Control and Prevention, the American Diabetes Association, the American Lung Association, and other national organizations also provide free fact sheets and brochures that you can distribute. Remember to allow 10-12 weeks of lead-time to request and receive these resources in the mail. Or, you can download them from the Internet. We also gave each participant **a list of free or low-cost local health clinics** so that they could easily find an affordable doctor or nurse practitioner with whom to discuss their health fair results, if desired.

The Station Results Recording Sheet

If you want to anonymously track participants' test results to inform program development, policy, or evaluation, then you will need a **Station Results Recording Sheet** to document each person's results by his/her identification number. To do this, at the same time you record participants' results in their Passports, you will write their ID numbers and results on the Recording Sheets. Another reason to do this is to provide back-up information, in case someone forgets to record a value in a Passport, or the entire Passport is lost and you need to reconstruct the person's test results. Because only ID numbers are recorded, these sheets can be retained after the fair.



At our fairs, we used inexpensive **paper wristbands** (shown at the left) like those worn at fundraising and school events with the person's ID number on it. If you prepare numbered wristbands and Passports in advance, you can give those to people at check-in and avoid having to use made-up numbers. At the end of the fair, you'll simply remove the wristband at the check-out station.



A **schedule of shifts** for all staff and volunteers, along with their name badges should be prepared in advance (staffing is discussed more fully in Chapter 8). If you have enough people, it is best for staff/volunteers to work half-day shifts (including set-up on the front-end or clean-up on the back-end) rather than for an entire day.

We also prepared a **brief training manual** when prepping our staff/volunteers that reviewed participants' rights, needs, and strengths; purposes of the health fair; roles and responsibilities of each staff person; and how to handle emergencies or crises at the fair.

You will find it helpful to prepare **signs** that clearly label each testing station or information booth. Signs are needed to guide people from the parking lot, welcome them at the entrance, and direct them how to move through your fair, in order to maintain flow and reduce confusion. You'll also need signs for the bathrooms, waiting areas, and any locations that need to be clearly labeled for participants.

If you are paying your staff or providing them with a stipend, remember to prepare in advance for any **contracts and/or receipts** they might need to sign. If you are paying to use your fair venue or renting equipment, you will want to have the checks prepared.

As discussed in the previous chapter, if you need an **insurance waiver** for your health fair site, remember to prepare it in advance. You also are likely to need copies of **certification and insurance carried by the registered nurses or physicians** who are administering any blood, urine, or similar tests at your fair.

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What forms, resources, and signage do you need?

Plan for Services and Refreshments

Offering free or low-cost demonstrations or services is a major attraction of health fairs. Because your Health Fair Committee will be contacting local businesses, service providers, and organizations to request donations of time or materials, it is important to allow approximately 3-6 months to obtain free goods and services for your fair.

One of the most popular services we've offered is chair massage, provided by local massage therapy students who needed hours toward certification, and thus, worked for free. Others may want to contribute their services to your fair. Popular options include facials and demos by personal trainers and fitness experts. We have provided yoga, dance, and exercise demos donated by local schools and studios. We've approached universities and local departments of health for nutrition and healthy cooking demonstrations as well.

The possible services that can be offered on-site are broad in scope, and you can be creative, based on the needs and age range of your participants. Note, however, that it is not uncommon for demonstrations to fall through on the day of the health fair, due to unforeseen circumstances. If you've arranged for enough demonstrations and information booths, the loss of one or two should not adversely affect your fair.







Free Gifts and Prizes

We recommend giving **free gifts or prizes** to health fair participants. As with free services and demonstrations, this is a big attraction for many people. Here, too, there is a broad range of freebies you can provide, based on the needs and interests of the people you are targeting. Because you will be asking for these to be donated, allow approximately 3 months in advance to contact businesses to secure them. Give-aways include gift cards to local stores, water bottles, pedometers, sunscreen, toothbrushes and toothpaste, t-shirts, tote bags, and coffee mugs.





Tap People who Know People

You will find it helpful to make use of the personal contacts of members of your Health Fair Committee or larger organization to obtain free goods and services. Local businesses and organizations that we've approached successfully include:

- \Rightarrow Grocery store chains such as Jewel and Kroger
- \Rightarrow Pharmacies such as Walgreen and CVS
- \Rightarrow Super stores or "big box" stores such as Costco and Sam's Club
- \Rightarrow Local schools of massage, dentistry, and pharmacy
- \Rightarrow City or county departments of public health
- \Rightarrow Dance or yoga studios

Note that we're not endorsing individual businesses or companies, just providing examples to stimulate your thinking.

Get it in Writing

When arranging for services and demonstrations, you will start with phone calls or emails, and follow-up on offers to participate with a letter of agreement. The letter should clearly outline the dates and times of the fair, location of parking, any meals provided, and stipend if any. The letter also should include a clear statement of what will be provided to participants and other information specific to the service being offered.

Ask each organization or person providing a service to return a letter of confirmation and copies of their certification, license, or insurance waiver.

Which local organizations might provide donations or services?



Plan for Respite

Having a respite room for participants is beneficial, if your space can accommodate it. This room is designated as a place for people to take a break, relax, or meditate. It's best to suggest that there be silence in the room, unless everyone using it at the time agrees that talking or music is okay. We typically try to stock the room with water, pillows, facial tissue, hand sanitizer, and reading materials such as magazines for both women and men.

Plan for Meals

You also will need to arrange for **food and beverages for the people** working at your event. This is especially the case if they are working full-day shifts. We feel that it is important to provide healthy beverages, snacks, and meals to health fair staff and any volunteers, in keeping with the fair's emphasis on health and wellness. Many people turn to comfort or junk food when they are working long days under conditions of stress. However, we recommend avoiding this temptation by providing choices such as:

- Water, coffee, hot tea, unsweetened cold tea, naturally sweetened waters
- Applesauce, low-sodium pretzels, dried fruit for snacks
- Vegetable and fruit salads and low-fat sandwiches for lunches

Off-Site Storage

As supplies are purchases, furniture borrowed, copies made, and freebies picked up, don't forget to allocate a safe and secure place where these items can be kept until it's time to set up the fair. If you can arrange to store things at the fair's venue ahead of time, this will simplify the process of getting everything ready for the first participant.

Prepare for On-Site Needs

If you need to refrigerate any of the testing supplies (or food/beverages), this needs to be discussed with your organization's engineering/janitorial staff or those of the organization where you'll be holding your fair. If adequate refrigerator space is not available, you will need to explore whether you can bring a portable unit or other options.

Along with space, fairs require furniture. You'll need, at a minimum, chairs for the waiting areas, as well as tables and chairs for the screening and information stations. Make sure you have adequate, comfortable seating to accommodate those who cannot stand for long periods of time between stations or booths. There may be a need for privacy screens for certain tests (as described in a previous chapter). Allow several weeks of lead time, if furniture needs to be located, borrowed/rented, and transported to and from the fair location.

You also will need sufficient wastebaskets, biohazard containers for blood and other byproducts, and a shredder if you wish to shred any confidential health information immediately. For example, at our fairs, after asking participants questions about their use of alcohol and illicit substances to assess risks for abuse (all had the right to refuse these questions), we shredded the questionnaires after scoring them. This allowed us to show participants that the information could not be shared with anyone else.

Adequate sources of electricity will be needed to power all of the testing equipment, refrigeration, computers/printers, task lights, TVs and sound systems, paper shredder, coffee urns, and so forth. You will need to discuss with the host organization whether there is adequate access to electricity to power all of your equipment continually and safely. Using outlet extenders and extension cords can pose safety hazards, so make sure that all cords are in working order and are duct taped to the floor to avoid tripping and falling. Use of surge protectors will keep equipment safe from power surges.

Tech Needs

If you wish to use wireless computers or other devices (like iPads), be sure to discuss this in advance with the host organization to see if they have wireless capability. You will see later that one of our stations required access to the Internet to assess heart health. You may wish to see what the venue has on-hand to borrow (e.g., laptops, aircard) and what you will need to bring with you. If you want to project educational videos from a laptop, you will need to arrange for a LCD projector and screen.

Chapter Summary

Even a modestly-sized health fair can require a large number of supplies and equipment to run smoothly. Plan ahead to ensure that you have an adequate number of test kits, medical supplies, office supplies, and back-up equipment. Create appropriate signage so that people know where to go and how to get there. Allow adequate time to secure donations of goods and services, especially freebies that can motivate participants to attend. Plan healthy meals and snacks for health fair workers, and ensure that their schedules include adequate time for breaks and meals. Finally, make sure your refrigeration and electrical needs will be met by your host organization, or plan to supplement them if not. **Use our spreadsheet to help you identify all of the many supplies and resources you might need**, **adding to it or deleting from it accordingly.** The more time you allow to identify and obtain the needed supplies in advance, the less strain your team will feel when preparing for your event.



Make a List of Your Main Onsite and Off-Site Preparation Needs

Chapter 7 - Planning and Operating Your Health Fair Stations

This chapter reviews steps for planning and operating your health fair's testing and screening stations. The stations you choose to provide will depend partly on the needs of your participants, partly on the expertise your staff, and partly on the location and time you offer the fair. Understanding exactly how to run each station will help you decide whether you have the money to purchase the needed testing supplies and whether you can find and train the necessary staff. Training includes sensitivity to the special needs and strengths of people in recovery, as well as cultural competency. We'll walk you through each of the stations we offered and how we trained our staff and the volunteers we recruited from each local agency we worked with.

Choosing Your Stations

Below are the stations that we found best help people learn about health promotion and prevention. Arranging the stations this way created an orderly "flow" for the fair, providing useful information about health status and lifestyle modifications in a logical progression.

Station/Activity #	Activity
(1	Parking)
(2	Reception Station (Welcome, Orientation))
3	Body Mass Index Station (calculated based on weight, height, and waist circumference)
4	Glucose/Diabetes Testing Station (finger prick blood draw to assess glucose levels over the past 2-3 months)
5	Lipid & Triglycerides Testing Station (blood from same draw used to measure current, non-fasting cholesterol and triglycerides)
6	Blood Pressure Station (manual or electric cuff to take blood pressure)
7	Lifestyle Risks Station (assessment of lifestyle-related risks such as drug and alcohol use, sexual health, partner violence, etc.
8	Nicotine Use Station (assessment of cigarette use and nicotine dependence)
9	Framingham Heart Health (computer program to assess personal risk for heart attack)
10	Peer Support and Resources (emotional support and lifestyle modification discussion with peers)
(11	Check-Out Station (sign out and receive gift bag))

Organizing Your Stations

We recommend designing your fair so that participants go through stations in a prespecified order. This allows people to easily move from the first to the last station, and achieve the most value for their time. To achieve the most efficient flow, we recommend assigning a number to each station (including parking, welcome, and checkout) and including the station numbers on signs at each location. This way, everybody involved with your fair, from the staff to the attendees, will have a simple "short hand" for finding everything they need.

Providing Health Information

At each station, you should offer information about the medical condition being assessed that is geared toward participants' age and reading levels. While not everyone will be interested in receiving health education, we suggest that it be offered in keeping with the belief that health empowerment begins with improved health literacy. For example, at the Glucose Station, we provided an information sheet explaining diabetes and pre-diabetes, and steps people can take to control their blood sugar and/or prevent Type 2 diabetes. At the Blood Pressure Station, we provided information on what hypertension is and ways to reduce sodium intake in one's daily diet to either prevent or manage hypertension.

Operating Each Station

In what follows, we detail how we organized testing and information stations at health fairs we ran for people in mental health recovery (<u>http://www.cmhsrp.uic.edu/health/health_screening.asp</u>). There are many ways to order and run health fair stations, so we offer our process to stimulate your thinking about how to organize your own fair.

When describing each station, we provide the following for your use:

- 1. A handout to post at each station with step-by-step instructions for how to operate the station.
- 2. The Station Results Recording Form we used to anonymously record individual participant results for data collection purposes. You can use this form to record results if you want your health fair to include data collection that informs policy, program, or other initiatives.
- 3. An emergency protocol to use at the Blood Glucose and Blood Pressure stations should a participant's test results indicate an imminent medical emergency.

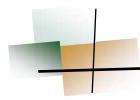


Station/Activity #1: Parking

Although not a testing station, we recommend that you include Parking on your schedule and number it like a station. This will help to organize your staff and volunteers, participants, and exhibitors.

If people arrive by car or van, signage will be needed to them where to park and how to enter the health fair. If people are coming by public transportation, clear signage at street level and around the front entrance also is important. It is beneficial for 1-2 staff or volunteers to serve as parking lot monitors to guide exhibitors and participants as they arrive. If your fair includes mobile screening stations (such as a dental van or eye exam suite), you will need to plan carefully for its location, pedestrian access, an electrical power hook-up, and so forth.







Station #2: Reception and Orientation

Reception Station Overview

To set the stage for a great experience, it's important that people be received and welcomed at the Reception Station by someone with a warm smile and easy-going personality. This person will provide:

- \Rightarrow a brief orientation about what to expect at the health fair
- \Rightarrow participant rights to refuse any test or screening
- \Rightarrow how long the fair will take
- \Rightarrow how to get started

If you are using wristbands to preserve anonymity, this is the station where you will distribute them, as described in a previous chapter. You'll also distribute Health Passports or some sort of worksheet in which participants' results can be recorded (also described previously). Health Passports will be stamped at every station to show which ones people visited or declined. This helps Health Fair staff direct people to the correct stations, while helping participants track which stations they already have visited.

Reception and Orientation, Step-by-Step



Introduce yourself.

Let the person know about the purpose of the health fair, the stations they will visit to be screened, and the types of information booths and demonstrations that are available.



The health fair is completely voluntary, so be sure to emphasize that people are free to decline any screening or activity.

Also mention the availability of peer and other supporters to offer encouragement, discuss health results, and next steps.

Ask if there are any questions, and determine whether the person understands the purpose of the health fair and his/her rights. If not, address any misperceptions in a sensitive manner.



Give the person a Health Passport (and wristband if you decide to use them), and direct him/her to the next station.



Station #3: Body Mass Index

BMI Station Overview

Body Mass Index or BMI is an indicator used to determine whether a person's weight falls into a category associated with higher health risks. Many preventable health conditions are complicated or even accelerated by being overweight, including diabetes, hypertension, heart disease, arthritis, asthma, sleep apnea, and others. Unfortunately, certain types of psychiatric medications lead to weight gain, making it even important for people in recovery to strive for healthier eating and regular exercise. Although weight is a sensitive topic for many of us, the connection between being overweight and many serious illnesses make this an important station to include in a health fair.

At this station, you will first ask people to stand against a wall where the height chart is posted for you to note how tall they are. Then, you'll ask people to remove their shoes and step on the scale to measure their weight. Next, you'll ask if you can measure their waist circumference with a measuring tape. To ease any discomfort or embarrassment, it can be helpful for the participant to assist with this part of the process by holding the end of the measuring tape against his/her belly button and turning clockwise in a circle.

We had some cases where even the largest size tape measure was not long enough to measure people's waists or the scale sufficient to record the heaviest weights. Be sure to purchase tape measures and scales that can handle people who weigh up to 500 pounds. You also will need to order a BMI chart or download one for free at: <u>http://www.nhlbi.nih.gov/guidelines/obesity/bmi_tbl.pdf</u>.

Because this is a sensitive station for many people, it can help to use privacy screens, if possible.

Body Mass Index, Step-by-Step



Introduce yourself.

Remember that people can be sensitive about their weight and body image. Remind participants that it is common to not want to be weighed or measured, that you will not lecture or judge anyone, and that all results are kept private. If you have struggled with weight or successfully lost weight, you can briefly offer this information to let them know they're not alone.



To the To the

Request that the person remove his/her shoes to begin.

To measure height, ask people to stand up straight against the height chart on a wall. Their heels should lightly touch the wall. Place a ruler gently at the top of the head and record the height the ruler points to.

To measure weight, ask people to step on the scale and record the weight that appears on the scale screen.

To measure waist circumference, start at the top of the hip bone, then bring the tape all the way around the waist, level with the belly button (navel). Make sure the tape is not too tight and that it is parallel with the floor. Remind the participant not to hold his/ her breath while you are measuring.



Record the participant's height, weight, and waist circumference in the **Health Passport BMI section**. Put their ID number and results on the **BMI Station Recording Sheet**, if you are using one. Use the BMI chart to find the person's BMI, and also record that in both places. Remember to check your numbers twice (in both places) to ensure complete accuracy. Stamp the Health Passport and return it to the person. Ask for and answer any questions.

(If people decline to be weighed or measured, that's okay. Try to address any concerns, but if they remain adamant, simply thank and direct them to the next station, after offering them the healthy eating Fact Sheet.)



Give the participant the Fact Sheets on healthy eating and strategies for maintaining healthy weight.

Direct him/her to the next station.



Body Mass Index Station Recording Form Site:

Date:

Attendee ID #	Height	Weight	Waist	ВМІ	Recorder/Staff Initials

Documentation Convention:

If a value is in between whole numbers, such as 60.5 inches tall, round up or down to the nearest value (e.g., 60.5 = documentation of 61 inches tall). If you have an in-between value for weight, also round up or down to the nearest pound (e.g., 155.3 pounds = documentation of 155 pounds). If a value is 0.5 or higher, round up. If the value is 0.4 or lower, round down.



Station #4: Glucose/Diabetes Testing

Glucose Station Overview

Diabetes and pre-diabetes are prevalent among people with mental illnesses, and are complicated by the concurrent high prevalence of overweight and obesity. Additionally, second generation antipsychotics are strongly associated with higher incidence of metabolic syndrome, diabetes, and insulin resistance. Indeed, growing concern about the association of obesity and diabetes, along with inadequate preventive health care, led to a consensus report issued by a number of professional organizations advocating baseline and follow-up metabolic screening for people in recovery.* Thus, including glucose screening in a health fair for this group of individuals is very important.

At this station, a medically-trained worker (e.g., registered nurse or physician in training) takes a small drop of blood from a person's finger. This droplet will be used to test both blood glucose and lipids (cholesterol and triglycerides). Therefore, it is best to place these 2 stations side-by-side, so the blood sample can be easily shared by the medical personnel running the 2 stations. The A1C is a measure of whether a person has diabetes or "pre-diabetes," with elevated glucose indicating diabetes or pre-diabetes. The test is now commonly used because it indicates blood glucose level over the past 2-3 months rather than just at the time of testing. For our fairs, we used the A1C Now meters/kits. We chose this system because: 1) it yields useful information without requiring the person to fast; 2) testing only requires a minor "finger stick" blood draw, rather than a larger amount of blood drawn from a syringe; and 3) the results are issued "on the spot," rather than requiring samples to be sent to a medical lab.

Based on the device instructions, the following materials are needed at the station to support the A1C Now tests: clean lancets, lancet devices, antiseptic wipes, bandages, blood collection units, application discs, A1C Now meters, and latex-free gloves.

Processing the Blood Sample

The blood tests take 10 minutes or more to develop, which is important to keep in mind when considering the flow of people through your health fair. We recommend that station staff process both the A1C and the lipids samples at the same time, to reduce wait time and increase efficiency.

You might wish to establish a waiting area near these stations for people to sit comfortably while they wait for their results. Or, if possible, you can encourage them to visit 1-2 nearby testing stations or information booths while they wait for their blood samples to process.

Remember, some people are very squeamish about blood draws. The medically trained personnel at this station will need to be patient and empathic. Keeping protein snacks and cookies at this station can help people who feel faint after the finger prick due to fearfulness or blood sugar imbalance.

Remember to Plan for Crisis Results

Screening may reveal that someone has dangerously high blood sugar. This has happened several times at our health fairs. We recommend developing a crisis protocol before your health fair, outlining who will assess the presence of a medical emergency on the basis of elevated blood sugar, and how the person will be transported to an emergency department.

Any emergencies and responses should be documented in writing.

With permission, the participant should be contacted the next day to ensure that s/he is okay and received the necessary treatment.

Blood Glucose Testing, Step-by-Step





A1C Results

4 to 5.6% = Balanced A1C

5.7 to 6.4% = Pre-diabetes A1C

6.5% or higher = Diabetes A1C



Introduce yourself.

Glucose testing will be performed using a test called "A1C Now." The kits come with detailed instruction sheets.

Be prepared for people who are squeamish about getting blood drawn. They may become anxious or upset. Support them through it and remind them that the finger stick feels only like a paper cut, since so little blood is needed for the tests. If a friend or peer who's with them wants to go first to show that discomfort is minimal, this is a good way to address fears. You also can offer to do the finger stick in a private space.

If participants refuse to have their blood drawn, however. accept this with understanding. Note that they declined this test on their Health Passport and direct them to the next station.

Open the kit and follow the instructions for securing a blood sample. Remember to put on a new pair of latex-free gloves.

Once you have the blood sample, you will load the test strip into the A1C meter. Touch the droplet of blood on the participant's finger with the test strip and begin the calculation using device instructions. (Use the same sample to prepare a test strip for the cholesterol test as well.)

Once you have the A1C result from the meter, record the value in the **Health Passport Diabetes section**. Record the person's ID number and value on the **Blood Glucose Station Recording Sheet**. Remember to check your numbers twice (in both places) to ensure complete accuracy.

Ask for and answer any questions.



Provide the participant with the Fact Sheets regarding diabetes and lifestyle modifications to prevent or manage diabetes. Stamp the Health Passport, and direct the person to the next station.

Discard all materials that have come into contact with blood using universal safety precautions. Change your gloves to avoid any potential cross contamination.

Blood Glucose Emergency Protocol

Check for high risk A1C values:

If A1C is 10.5 to 12,

⇒ Repeat the test. If the result is the same, a nurse or medically-trained practitioner should assess the individual to decide whether immediate medical attention is warranted.

If A1C is greater than 12,

⇒ Repeat the test. If the result is the same, a medical emergency exists and nurse/medically-trained practitioner should make arrangements with the participant for immediate transport to urgent care.

Activate the Protocol

If an individual's A1C reading denotes risk, assess the level using the standards above Then, talk with the event leaders about activating the emergency protocol. All decisions and actions should be documented in writing.

Ask the person for permission to be contacted the next day to check on his or her condition. Be sure to get a phone number for this purpose.

Provide Support

The participant may become scared or upset, so provide calming support and information. Peers who can empathize and reassure the person while waiting can be beneficial as well.

Your Blood Glucose Station Emergency Protocol

Use the space below to outline the steps of your glucose emergency protocol. A comprehensive plan should specify the blood glucose reading that will activate the plan, who will assess the individual, what assessments will be used, within how many minutes a decision must be made to transport the individual to urgent care, who will transport and how, who will wait with the person at urgent care, who will get the person's contact information, and who will follow-up and document the incident in writing. Make sure that your plan has been reviewed by medical personnel and approved by your host organization.

Keep this sheet visible at the Blood Glucose Testing Station.

Blood Glucose Station Recording Form Site:

Date:

Attendee ID #	A1C Result	Write whether tested as normal, pre-diabetes, or diabetes	Recorder/ Staff Initials



Station #5: Lipids & Triglycerides Testing

Cholesterol & Triglycerides Station Overview

Cholesterol and triglycerides are fat-like substances that the body needs to function well. But, if a person has too much of these in their blood, this can lead to heart disease, diabetes, stroke, and other health problems.

LDL is known as "bad" cholesterol because it builds up in and blocks the arteries. HDL is "good" cholesterol because it helps flush cholesterol out of the body. An easy way to remember this is that the L in LDL stands for "lousy" and the H in HDL means "healthy." Because people in recovery are at elevated risk for heart disease and diabetes, it is important to include cholesterol testing, if possible.

At this station, medically-trained personnel use a blood sample to determine a person's non-fasting cholesterol, in particular the LDL or bad cholesterol level. We recommend locating this station with the glucose testing station, so that one blood sample can be used to process both tests, reducing the number of blood draws needed.

At our fairs, we used the Cholestech LDX system, which is a simple and effective way to determine non-fasting cholesterol and triglycerides levels. Because it is a non-fasting test, if negative results are found (high total cholesterol and/or high LDL), the station staff will want to encourage the person to have a follow-up fasting cholesterol test at a doctor's office.

Cholesterol & Triglyceride Testing, Step-by-Step





Introduce yourself.

Remember that some people are squeamish about getting their blood drawn. They may become anxious or upset. If you are taking a second blood sample for this test (rather than using the one taken for the A1C test), support participants who become upset. Remind them that the finger stick feels like a paper cut because very little blood is needed. If a friend or peer can go first to show that it is manageable, this is a good way to address fears. You also can offer to do the blood draw in a private space, while they are seated.

If they refuse to have their blood taken, however, accept this with understanding, note that they declined the station on their Health Passport, and direct them to the next station.

Lipids Results

<200 mg/dL = Healthy total cholesterol

200-239 mg/dL = Borderline high

240 mg/dL and above = High total cholesterol Cholesterol testing will be accomplished using the Cholestech LDX system. The system comes with detailed instructions that should be followed exactly. Remember to put on a new pair of latex-free gloves.



Once you have the cholesterol results from the meter, document the values in the **Health Passport Cholesterol & Triglycerides Section** and on **the Lipids/Triglycerides Results Recording Sheet**. Remember to check your numbers twice (in both places) to ensure complete accuracy.

Ask for and answer any questions.



Provide the participant with the Fact Sheets regarding cholesterol and lifestyle modifications to prevent or manage high levels. Stamp the Health Passport, and direct him/her to the next station.

Discard all materials that have come into contact with blood using universal safety precautions. Change your gloves to avoid any cross contamination.



Lipids & Triglycerides Station Recording Form Site: Date:

Attendee ID #	Total Cholesterol	LDL	HDL	Triglycerides	Recorder/ Staff Initials



Station #6: Blood Pressure Testing

Blood Pressure Station Overview

Blood pressure is needed to move the blood through the body. When it goes up and stays high, it's called high blood pressure or hypertension, meaning the heart has to pump harder than it should to move blood around the body. High blood pressure increases risk for heart attack, stroke, kidney problems, and blindness. Because people with mental illnesses are at elevated risk for high blood pressure, it is important to include this test in a health fair for them, if possible.

We have found that it can be challenging for lay people (non-medical staff/volunteers) to obtain an accurate blood pressure reading, even after being trained. Therefore, we recommend either using medically-trained personnel to obtain blood pressures or using an electronic blood pressure system, if possible.

Also, plan to have two sizes of blood pressure cuffs available, in order to accommodate those with larger arms.

Additionally, as described in the step-by-step instructions below, if a person is found to have high blood pressure at first reading, ask him/her to **rest for 5 minutes** before taking a second reading. Sometimes, people have a higher reading at first because they are nervous or their heart rate is up. Asking them to rest while breathing normally can help to obtain a more accurate second reading.

Some health fairs offer people the use of "self-service" blood pressure testing, as offered at local pharmacies. This is one way in which a health fair can teach people a useful new skill, but it requires a staffer/volunteer who is good at teaching these types of medical skills.

Remember to Plan for Crisis Results

It is not unusual for one or more health fair participants to have dangerously high blood pressure. We recommend developing a crisis protocol prior to your health fair specifying who will assess the presence of a medical emergency on the basis of elevated blood pressure, and how and by whom the person will be transported to an emergency department.

Any emergencies should be documented in writing for liability protection.

As discussed in a previous chapter, with permission the person should be contacted the next day to ensure that s/he is okay and received the necessary treatment.

Blood Pressure Testing, Step-by-Step

Introduce yourself.

Blood pressure will be measured using a blood pressure cuff (also called a sphygmomanometer) that is operated electronically. We have found that many people already know whether or not they have high blood pressure, and are not uncomfortable at this station. Yet, many people aren't aware of lifestyle changes they can make to manage their pressure, so providing their numbers in addition to information on a lowsodium diet and other strategies will be helpful.

If people decide they would rather not have their blood pressure taken, accept this with understanding, note that they declined the station on their Health Passport, and direct them to the next station.



Blood Pressure Results

120/80 = Normal

121-139/81-89 = Pre-Hypertensive

140+/90+ = Hypertensive Ask the participant to sit up with one arm stretched out. The arm should be level with the heart.

- Put the cuff about 1 inch above the elbow. Wrap the cuff snugly around the arm. The blood pressure reading may not be correct if the cuff is too loose.
- 2. Follow the instructions that come with the electronic cuff.
- 3. Record the blood pressure value in the first Blood Pressure box found in the Health Passport.
- 4. If either the systolic (top) or diastolic (bottom) value is in the hypertensive range (140+/90+), ask the person to remain seated with the cuff on, to relax, and to breathe normally for 4 to 5 minutes.
- 5. Repeat the blood pressure test.
- 6. Record the second blood pressure value in the second Blood Pressure box found in the Health Passport.
- Circle the qualitative category (normal, pre-hypertensive, or hypertensive) related to the blood pressure value. If two readings were taken, use the second reading for this step. If one number is normal but the other is not, circle the category for the <u>abnormal</u> reading.
- 8. Record the reading (using the second one if you took two) on your Blood Pressure Results Recording Sheet.



Ask for and answer any questions. Provide the participant with the Fact Sheets regarding blood pressure management. Stamp the Health Passport, and direct him/ her to the next station.

Blood Pressure Emergency Protocol

Check for high risk blood pressure values:

- \Rightarrow Systolic (top number) reading is more than 180
- \Rightarrow Diastolic (bottom number) is more than 120

The person could be in or entering a hypertensive crisis.

Activate the Protocol

If an individual's blood pressure is dangerously high, assess whether immediate medical attention is warranted. Then, talk with the event leaders about activating the emergency protocol. All decisions and actions should be documented in writing.

Ask the person for permission to be contacted the next day to check on his or her condition, and ask for a phone number to use.

Provide Support

The participant may become scared or upset, so provide calming support and information. Peers who can empathize and reassure the person while waiting can be beneficial as well.

Your Blood Pressure Station Emergency Protocol

Use the space below to outline the steps of your blood pressure emergency protocol. A comprehensive plan should specify the blood pressure reading that will activate the plan, who will assess the individual, what assessments will be used, within how many minutes a decision must be made to transport the individual to urgent care, who will transport and how, who will wait with the person at urgent care, who will get the person's contact information, and who will follow-up and document the incident in writing. Make sure that your plan has been reviewed by medical personnel and approved by your host organization.

Keep this sheet visible at the Blood Pressure Testing Station.

Blood Pressure Recording Form Site:

Attendee ID #	Blood Pressure reading	2nd reading, taken <u>only</u> if first reading is high	Blood Pressure Category (Normal, Pre-hypertensive, or High) Calculate from the 2nd reading, if taken	Recorder/Staff Initials

Date:

Documentation convention:

If one number is normal but the other is not, circle the category for the abnormal reading. As one example, if the top number is 118 and the bottom number is 85, the result should be recorded as pre-hypertensive, even though the top number is normal.



Station #7: Lifestyle Risks

Lifestyle Risks Station Overview

You may wish to consider including a station that combines risk assessment and education regarding alcohol and drug use with assessments of sexual health, physical and emotional safety, or other lifestyle issues. Although these can be touchy subjects, they can negatively impact our health and well-being, and many people benefit from talking about them in safe, non-judgmental settings. It's important to fully consider the implications of offering risk assessments related to sensitive lifestyle issues before deciding to include them. For example, people may be reluctant to attend a health fair if they believe that they'll be assessed for risks related to sexual health, partner violence, or substance use.

If your group decides to assess risks arising from alcohol and drug use, we've successfully used two standardized questionnaires at our events. These can be found in the Appendix. One is called the Alcohol Use Disorders Identification Test (AUDIT-C); and the other is the Drug Abuse Screening Test (DAST-10). It's important to keep in mind that these assessments are not used to diagnose substance abuse or dependence, but to identify whether a person is at risk for these conditions.

It's best for these assessments to be done by someone who can put others at ease. The person conducting the assessment and providing education should be skilled at obtaining honest answers while avoiding making judgmental statements that could lead participants to feel embarrassed or ashamed. Most people will under-report their alcohol and drug use for fear of being stigmatized or losing services. Staffing this station with someone in recovery from alcohol or drug abuse can help attendees to discuss things more openly. Another way to put people at ease is by shredding their assessments on the spot after recording the results in their Passports.

Dealing with Sensitive Data

Your team should consider whether recording sensitive information such as someone's substance abuse or HIV risk level in a Health Passport is a good idea. If in doubt, you can always ask participants whether they would like their results recorded in the Health Passport or provided verbally. Either way, we advise immediately shredding all paper questionnaires while participants are still at the station, so they feel assured of privacy. If you do shred the questionnaire, make sure to record the results in the Passport prior to shredding.

Also, if possible, placing this station in a private area, separate room, or behind privacy screens can ease people's comfort levels when discussing sensitive information. It also reduces any "noise pollution" created by the shredder.

Develop a Safety Procedure

It is advisable for your Health Fair Committee to develop a safety procedure in advance of your fair for what volunteers at this station – and all others – should do if someone reports immediate intention to harm self or others, or if abuse/neglect of a minor or elder is identified. You also want to talk in advance about how to handle an attendee who divulges that she or he is being physically or sexually abused.

AUDIT-C and DAST-10, Step-by-Step

Introduce yourself.

Let the participant know that information related to alcohol and recreational drug use will be collected using paper-andpencil questionnaires. State in a neutral tone that some health habits – like drinking too much alcohol or abusing illegal or prescription drugs – can be harmful to the body and mind over time. Additionally, alcohol and drugs can reduce or eliminate the effectiveness of prescription medications taken for medical or psychiatric needs. So, while we are not here to judge or lecture anyone, we are asking these personal questions to help people see whether they are at risk because of these substances. Remind them that there are self-help and professional supports available for these problems that you can tell them about.

Like any other station, people are free to decline this screening . If they do so, note this on their Health Passport and direct them to the next station.

The scales and scoring procedures are provided at this station for you.

DAST-10 Results

0 = No Risk for drug abuse 1–2 = Low Risk 3–5 = Moderate Risk 6+ = Very High Risk

AUDIT-C Results

0-2 for women and 0-3 for men = No Risk for alcohol abuse

3+ for women and 4+ for men = At Risk For the Drug Abuse Screening Test (DAST-10; 10 item version): Tell participants that they should respond with "yes" or "no" answers to each of the questions. Then ask the DAST items. Score "1" for every yes answer and "0" for every no answer. Based on their total, participants will fall into one of 4 categories, listed at the left.

For the Alcohol Use Disorders Identification Test (AUDIT-C): Individuals answer three items for the AUDIT-C related to the frequency of their drinking. Score these items by adding the value of each response together for a total score. Based on their total, participants will fall into one of two categories, listed at the left.



Document both scores in the **Health Passport** and on the **Lifestyle Risks Recording Sheet**. Check the values twice for accuracy. Ask for and answer any questions. Provide the fact sheets regarding the effects of alcohol and drugs on physical health and well-being. Make the point that help is available if they decide to reduce or quit using these substances. Stamp the Health Passport, and direct the person to the next station.



AUDIT-C and DAST-10 Recording Form

Site:

Date:

Attendee ID #	AUDIT-C	AUDIT-C		DAST	Recorder/Staff
	Score	Risk Tested As (Circ	isk Tested As (Circle Only 1 Option)		Initials
		No Risk	At Risk		
		No Risk	At Risk		
		No Risk	At Risk		
		No Risk	At Risk		
		No Risk	At Risk		
		No Risk	At Risk		
		No Risk	At Risk		
		No Risk	At Risk		
		No Risk	At Risk		
		No Risk	At Risk		
		No Risk	At Risk		
		No Risk	At Risk		
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		No Risk	At Risk		
		No Risk	At Risk		
		No Risk	At Risk		
		No Risk	At Risk		



Station #8: Nicotine Use

Nicotine Use Station Overview

Cigarette smoking is the number one cause of preventable disease and death worldwide. Smoking harms nearly every organ in the body. It's a main cause of lung cancer and chronic obstructive pulmonary disease (COPD). It also can lead to heart disease, stroke, and other cancers. Second-hand cigarette smoke also causes preventable illnesses and deaths among non-smokers.

Dependence on Nicotine

Smokers usually become physically addicted to the nicotine in tobacco. They also associate smoking with social activities and with feeling less stressed. This can make it very hard to quit.

People are most successful in quitting smoking when they use special medication and get support or counseling. One of the first steps to quitting is assessing a person's level of dependence on nicotine. We used the Fagerstrom Test for Nicotine Dependence (Mayo Foundation for Medical Education & Research, 2003) to assess nicotine dependence at many of our health fairs. This scale and its scoring instructions are found in the Appendix.

The person staffing this station should be skilled at helping attendees be honest and avoid feelings of shame when discussing their smoking and nicotine dependence. Many people will under-report their use of tobacco when asked about it directly because they already know that smoking is bad for their health. Staffing this station with someone who has quit or is working on quitting can help attendees discuss tobacco use and dependence more openly.

Fagerstrom Test for Nicotine Dependence, Step-by-Step



Introduce yourself.

At this station, you will collect information about nicotine and tobacco use from attendees using a brief paper and pencil questionnaire called the Fagerstrom Nicotine Dependence Test. The scale and its scoring procedures are provided at the station for you.

Start by asking the individual if s/he is a smoker. Circle the response at the top right of the Health Passport page for nicotine dependence.

For nonsmokers, ask if they have any questions. Give them a fact sheet on the risks of smoking and send them to the next station.

Fagerstrom Results

0-2 = Very low nicotine dependence

3-4 = Low dependence

5 = Medium dependence

6-7 = High dependence

8-10 = Very high dependence For smokers, next ask the approximate **NUMBER** of cigarettes they smoke each **DAY**. Record this number in the space provided in the Health Passport.

To complete the Fagerstrom Test, ask each of the questions related to the frequency of smoking, number of cigarettes per day, and the times of day that people smoke the most. Read each of the response categories to the respondents.

For the item regarding number of cigarettes per day, simply check the box that corresponds to the number the person reported at the beginning of the nicotine screening.

Score the scale by totaling the values for each of the responses. Based on their total, participants will fall into one of 5 categories, listed at the left.

Record the test score in the space provided in the **Passport**, and write the person's identification number and the Fagerstrom score on the **station recording sheet**. Ask for and answer any questions.



Provide the participant with the Fact Sheet regarding nicotine and risks of smoking. Make the point that even if they scored low on dependence, smoking cigarettes can be very harmful to the body over time. The second-hand smoke they generate can also harm the health of others around them. If they are ready to reduce or quit smoking, help is available. Stamp the Health Passport and direct the person to the next station.

Nicotine Dependence Recording Form

Site:

Date:

Attendee ID #	Smoker Yes or No (Circle Only 1 option)		Cigarettes per day. Put a dash if non- smoker.	Dependence Score. Put a dash if non-smoker	Recorder/Staff Initials
	No	Yes			
	No	Yes			
	No	Yes			
	No	Yes			
	No	Yes			
	No	Yes			
	No	Yes			
	No	Yes			
	No	Yes			
	No	Yes			
	No	Yes			
	No	Yes			
	No	Yes			
	No	Yes			
	No	Yes			
	No	Yes			
	No	Yes			
	No	Yes			
	No	Yes			
	No	Yes			
	No	Yes			
	No	Yes			



Station #9: Heart Health

Heart Health Station Overview

Many Americans, including people in recovery, are at risk for heart disease and heart attack. There are many reasons for this risk including persistent stress, high blood pressure, high cholesterol, diabetes, unhealthy eating, lack of exercise, poverty, inability to access medical care, and high rates of smoking and other harmful health habits.

Helping people to see how their lifestyles could be contributing to heart disease can motivate them to improve health habits. Therefore, we recommend offering a station on heart disease at your fair, using a well-known computer application that we used successfully to assess people's 10-year risk for heart attack.

This web-based application uses information from the well-regarded **Framingham Heart Study** to calculate a score indicating personal risk for having a heart attack within the next 10 years (Wilson et al., 1998). The user enters a person's sex, age, cholesterol levels, blood pressure, status as diabetic or non-diabetic, and as smoker or non-smoker. Based on the answers, the application calculates the level of risk for a heart attack within a decade, along with how that risk compares to the risk of other people the same age and sex as the user.

Wilson, PW, et. al. (1998). Prediction of coronary heart disease using risk factor categories. Circulation. 97(18), 1837-1847.

Information Needed for the Framingham Assessment

If you use this web-based application, it is necessary to have the Cholesterol, Diabetes, and Blood Pressure Stations come before this one, so that you have the information to enter into the program from people's Health Passports. If attendees declined one or more of these stations, then you can enter information based on participants' estimates.

"What-If Activity" to Assess the Impact of Risk Factors

If attendees simply cannot remember or guess one or more of their health indicators, then start by entering what they do know. Then, input hypothetical cholesterol, blood pressure, and diabetes answers to show them what happens to their risk for heart attack as these indicators improve or worsen. For example, if a person doesn't smoke, show them what would happen if they were a smoker, to reinforce their healthy decision to avoid nicotine. This is called the "What If Activity."

Do the "What If Activity" even if they know all of their health indicators, to show them how much their risk is reduced if they control their blood pressure, quit smoking, have healthy blood sugar, and achieve good cholesterol.

Free Download

The program is available online for free, making it easy to use at a health fair station, as long as you have Internet access and a laptop. If not, you can include the web link in the Health Passport or on a Fact Sheet, so people can determine their risk later.

http://www.medcalc.com/heartrisk.html

Framingham Test for Heart Health, Step-by-Step

Page 1

Introduce yourself.

At this station, you will determine participants' coronary health and their risk for heart attack within 10 years, using a risk score. The Framingham risk score is calculated based on data from the well-known Framingham Heart Study. It incorporates information about a person's sex, age, cholesterol, blood pressure, diabetic or non-diabetic status, and whether or not they smoke cigarettes.

Load the application before working with each participant at:

http://www.medcalc.com/heartrisk.html

Framingham Results

Low risk = less than 10% chance of heart attack

Intermediate risk = 11% to 20% chance of heart attack

High risk = more than 20% chance of heart attack Complete the assessment with the participant by entering the requested information. Obtain the information about cholesterol, blood pressure, and diabetes from participants' Health Passport, if they were screened at those stations. If they declined these stations, then see if they can estimate their cholesterol, blood pressure, and whether they have diabetes.

This information will result in a personalized "risk score." The assessment will also provide a "cohort risk score," which is the person's relative risk compared to other people of the same age and gender. Risk values are grouped into three categories, listed at the left.

Now do the "What If Activity," showing each person how his/ her risk changes based on changes in the indicators you entered. If they smoke, show them what their risk would be if they quit. If they have high blood pressure, show them what their score would be if their blood pressure was controlled.



Document the Framingham Risk Score value in the space provided on the **Health Passport Heart Health Section**, and record the person's ID and score on your **Heart Health Results Recording Sheet**. Check the values twice for accuracy.

Ask for and answer any questions. Provide the fact sheets regarding heart health. Stamp the Health Passport and direct the person to the next station.

Heart Health Recording Form

Site:

Date:

Attendee ID #	% Risk	Cohort Risk	Recorder/Staff Initials



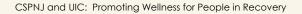
Station #10: Peer Support and Resources

Peer Support and Resources Station Overview

We had a very positive experience with this station at our health fairs. Participants were inspired by mental health peers who supported them and showed that healthy lifestyle changes were possible. It is helpful if the peers who staff this station are trained in whole health and peer wellness coaching.

At this station, participants are given the opportunity to review their results with a peer and, together they can talk about what the results mean and how their lives might be affected. Participants can ask and get their questions answered, and discuss how to follow-up with a doctor or other medical provider if needed. Peers can also suggest other resources that might be helpful and how to find them in the community.

This chance to debrief with supportive peers gives participants hope that they can manage their health conditions and prevent new ones from developing. Peers also can serve as role models for the career option of peer supporter or certified peer specialist, which can be a valuable part of recovery. We have had numerous participants become peer specialists following their involvement in our health fairs.



Peer Support and Resources, Step-by-Step



Introduce yourself.

The purpose of this station is to provide an opportunity for participants to ask questions, discuss what they have learned, and receive support and encouragement to pursue wellness activities in their daily routines.

The key components of this station include:

Review what participants have learned.

Identify and review any elevated/high risk values in the Health Passport. Ask questions and provide support, while sharing relevant personal wellness activities.

For example "When I did the screening last year, I had a high BMI, and then, I started walking 5 days a week and eliminated soft drinks from my diet. These things helped me to lose weight, leading to a lower BMI."

If the person's results are within normal range, acknowledge this. Ask what s/he is doing for personal wellness (walking, healthy eating, trying to stay active, quitting or cutting down on smoking, etc.) Validate what is being done, and encourage him/her to continue these activities. Ask if there are any new wellness activities or topics they'd like to discuss.

Offer supplementary materials about health topics.

The person may want more information on different health topics. For instance, if s/he has high blood pressure or just wants more information, provide a handout that explains hypertension, treatment options, and prevention measures. Select from the relevant information you have at the table.

Help set a plan.

If there's an area in which people could improve, help them to consider questions such as: will I see a doctor to follow up, will I begin to exercise more, can I cut back or eliminate sweetened beverages, and so forth.

Encourage a wellness lifestyle.

Review the 6 steps to wellness on page 10 in the Health Passport.



After answering any final questions, stamp the Health Passport and direct the person to the Check-Out Station or Waiting Area.





Station #11: Check-Out

Check-Out Station Overview

Most fairs have a station or process to inform people that they have reached the end of the fair. You can do this more formally by having a check-out station or more informally by providing a waiting area with chairs and additional information booths or resources.

Depending upon the lay-out of your space, the same waiting area can serve both those waiting to start their health fair journey and those who have completed it.

If you use a check-out station, this is a good time to remove the health fair wristband, if one was used. Give participants any free give-aways, gift cards, or snacks and beverages.

You also may wish to ask people to complete a brief satisfaction survey. We have included a survey in the Appendix that you can adapt to meet your needs.

Chapter Summary

Identifying the tests and screens you would like to include at your fair will help you decide which stations to offer. We recommend placing the stations in a specific order, and locating stations that require blood draws or other medically-trained personnel together. Your team should be trained on how to run each station smoothly and respectfully. They also should be trained on how to anonymously document participants' results, if you are keeping this information for later analysis. You also will want to develop a protocol in advance for medical emergencies and emotional crises. Finally, consider where you would like to locate the information booths and demonstrations, as well as whether you can afford to offer the exhibitors free food and beverages.

Chapter 8 – Staffing Your Fair

We have found staffing to be one of the most important aspects of a successful health fair. Considerations include staffing for:

- 1. planning activities,
- 2. health fair set-up,
- 3. testing, education, and peer support stations,
- 4. clean-up activities.

In creating a staffing plan, you will consider the qualifications and training needed to administer tests and screens. Developing a brief training manual ensures a standardized process. However, even if you do not have the resources to do this, it is critical to provide individual and group training to ensure that each person involved in the health fair knows his or her role, the expectations of this role, the protocol for handling sensitive health information, who is handling any onsite emergencies, and the importance of treating participants and others with respect. Let's take a look at some of these staffing considerations.

Forming a Health Fair Committee

One of the first steps in staffing a health fair is designating your Health Fair Committee for planning purposes. While this can be as formal or as informal as your needs dictate, there must be a group of people who are responsible for the key planning tasks. This way, the host organization, fair workers and volunteers, attendees, and exhibitors all know whom to contact with questions and to confirm their participation.

Ideally, the committee takes the lead on creating an efficient work plan, distributing the workload, and ensuring participation and support from across the organization or community.

Some committees have a single chairperson; others have co-chairs. If members of the committee are not experienced at collaborative efforts (by having served on boards or other committees), it is helpful to provide them with a basic orientation and support so they can function effectively.

Direct and Indirect Membership

It's important to remember to plan for both active and less involved committee members. Some committee members will not perform a lot of hands-on work, but are included because they control important resources needed for your health fair. For instance, an Executive Director or other senior staff member would probably make decisions about assigning paid staff, vehicles, funding, or space, but wouldn't attend frequent meetings. A staff nurse or medical director would probably either staff the stations at which medical tests are administered or help identify the medical personnel for this. Additionally, he or she would review licensure, and have input into or approve the medical emergency protocol developed by the Health Fair Committee.

Use of Subcommittees

While a simple health fair typically is handled by a single planning committee, larger events will require a "division of labor" into subcommittees. These include:

Pre- and post-event

This subcommittee would be involved in the logistics of setting up, operating, and breaking down the event. Set-up tasks would include configuring the lay-out of the space. This subcommittee also would identify personnel needed beyond the subcommittee for these operational functions. It also would work closely with the Scheduling and Advertising subcommittees.

• Scheduling

This subcommittee would take the lead on scheduling the staff, volunteers, and exhibitors. It would set and monitor the schedule for participants attending the health fair, and keep track of when they arrive. This subcommittee also would work with contributors to schedule drop-off of supplies, and liaison with exhibitors regarding when to arrive at the event for set-up. It would work closely with the Donations and Vendors/Exhibitors subcommittees.

• Advertising and marketing

This subcommittee would handle all of the marketing materials and informationsharing to encourage people to attend.

• Donations and finances

This subcommittee would request donations from local businesses or organizations, write grant proposals, track incoming donations, monitor receipts and expenses, distribute the funds across the event, and write thank-you notes for donations.

• Supplies

This subcommittee would be responsible for making sure that all of the supplies for the event (testing kits and related supplies, health literature, health passports, food, tables, chairs, containers for medical waste, signs for stations, etc.) are acquired, stored, brought to the screening location, dispensed, and collected after the event. They also would monitor things to keep on-hand at the event itself, such as a toolbox or emergency supplies (see the spreadsheet in the Appendix for recommendations).

Vendors or exhibitors

The vendor/exhibitor subcommittee is a critical and busy subcommittee, being responsible not only for seeking vendors, but also for determining their requirements (ranging from bus parking to specific electrical needs), getting letters of confirmation, and ensuring the accuracy of event details for the program, signage, and so forth. On the day of the event, this subcommittee would assist vendors in setting up before the doors open, as well as problem-solving throughout the event.



Staffing the Day of the Event

People working each station need to learn exactly what to do, and have a chance to practice their skills for that station. For our fairs, we practiced all of the tests, screenings, and questionnaires on each other several times before "going live." We also developed a brief training manual to ensure that everyone received foundational training in participant rights, the handling of protected health information, medical emergencies, and treating all stakeholders involved in the fair with respect and consideration.

Connecting People's Roles to their Strengths

It is best to select and assign roles based on people's individual credentials and strengths. For example, you would assign your registered nurses to take blood at the glucose and cholesterol testing stations, your practical nurses to take blood pressures, your trained and well-practiced individuals to the BMI, nicotine, and lifestyle risks stations, and your peer wellness coaches to run the peer support station. People who have struggled with their weight and/or have successfully lost weight also would be assets at the Body Mass Index Station, while an ex-smoker would be beneficial at the Nicotine Use Station.

It's also important to consider people's personalities, skills, and preferences when assigning tasks. You wouldn't want someone who's uncomfortable with the sight of blood to staff the blood drawing stations. You also wouldn't want someone who is easily overwhelmed at the reception station, or someone who isn't good with computers at the Heart Health Station.

Some individuals have skills that will be in short supply, so you'll want to plan to use their time efficiently. For example, with only 1-2 registered nurses to draw blood at many of our events, we located those two stations side-by-side, so that the RNs could share the workload. Additionally, we found lay people were not able to accurately take blood pressures manually, so we either found practical nurses to do this task or provided electrical blood pressure equipment that was easier to use.

The Value of Peer Supporters and Wellness Coaches

We strongly believe that certified peer specialists, peer supporters, and peer wellness coaches are invaluable at health fairs in all roles from planning to implementation to follow-up. It is best to pay the peers for their time, of course, and to make sure they have access to free healthy food and beverages throughout their shifts just like all staff and volunteers. That said, like other staff, some peers specialists will already be paid staff of the host organization and cannot accept additional payments, while others may want to donate their time as a community service. This is something to be arranged on a case-by-case basis, but the general guideline is to pay peers at least a stipend for their contribution. Additionally, you might consider offering the peer volunteers the chance to go through the health fair and receive the free tests and screenings themselves. Many of our peer volunteers welcomed the chance to learn more about their current health status and to discuss it with the other peers at our events.

Chapter Summary

Organizing a committed group of people who will take responsibility for planning and implementing your health fair is essential. This includes pre- and post-event operations, scheduling, advertising and marketing, supplies, donations and finances, and vendors and exhibitors.

While it is not necessary to have multiple subcommittees if you are conducting a small fair, it is a good idea to put 1-2 staff in charge of each operation for efficiency. Your host organization's executive staff may contribute to decisions about health fair staffing, funding, transportation, and location.

It is best to assign people to staff stations based on their personal strengths and skills. Peer supporters and wellness coaches are an invaluable asset to any health fair, especially those targeting people in mental health recovery.

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8	

Make a List of the Subcommittees You Will Need

Chapter 9 – Financial Considerations in Running a Health Fair

Running a successful health fair can be rather expensive, although you may be able to offset some costs through donations and sponsors. Many expenses are self-evident (such as costs of testing kits, food, or disposable supplies), while others are less obvious (such as costs of transporting participants or furniture or labor to run the stations). Thus, it is important to plan ahead regarding the costs that will be incurred and how to offset them as much as possible.

The following are some of the operational expenses you can expect when running a health fair. The Health Supplies & Budget spreadsheet provided in the Appendix can be used to track and monitor all of your expenses.

\Rightarrow Facility expenses:

Space rental (or making a donation to a facility in place of rent) Insurance or permits Furniture and equipment rental Electrical and wireless network

\Rightarrow Marketing expenses:

Graphic designer Printing brochures and flyers Signage

\Rightarrow Staffing expenses:

Staff time to attend meetings to advertise the event Labor costs for set-up, transportation, parking, etc. Time of internal and external staff to plan and implement the event Stipends for peers if you are unable to offer an hourly salary

\Rightarrow Transportation expenses:

- Transporting furniture
- Transporting attendees
- Travel expenses to bring in staff/volunteers/exhibitors

\Rightarrow Services and supplies expenses:

Giveaways or incentives

While you can save money by not providing incentives to fair participants, you never know when getting free dental floss into someone's hands will create the motivation to start daily dental hygiene, or a water bottle will help someone decide to reduce soda in favor of water. These items should be fairly easy to secure through donations with enough advance planning, and by drawing on the contacts of your planning committee.

Decorations, banners, table skirts

Breakfast, lunch, snacks, and healthy beverages

Disposable health testing and other supplies

Some testing kits, such as those used for cholesterol and HIV, can cost \$20 or more each. Even a few boxes of latex-free examining gloves can quickly run up costs. This is a good area for which to seek donations.

Copying materials, such as forms and literature

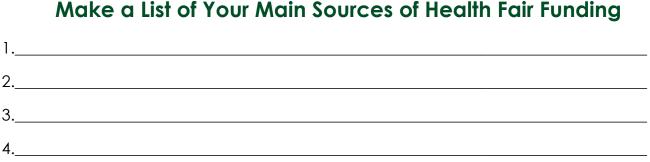
Budget Management

Depending on the size of your health fair, it may be helpful to designate a finance subcommittee or 1-2 staff who are authorized to distribute the funds for your event. Having too many people involved in tracking expenses, distributing the funds, and collecting the receipts/invoices can become unwieldy and mistakes are more likely to happen. If you have a petty cash fund, it is best to have only 1-2 people in charge of distributing and monitoring the cash.

Note: Some commercial exhibitors are willing to pay a fee to exhibit, which can help defray costs of your fair.

Chapter Summary

We have outlined important expenses to consider for operating an effective health fair. It is easy to see how health fair costs add up quickly! The planning committee and finance subcommittee will need to be sure that the various expenses can be covered by the host's internal funds, grant funds, donations, vendors/exhibitors, or sponsors. The Health Supplies & Budget spreadsheet lists a wide range of potential costs that you can estimate as you are planning your fair. Once you record the actual costs, you will have a record of exactly what you spent for future planning.

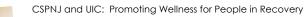


Make a List of Your Main Sources of Health Fair Funding

Make a List of Any Special Expenses You Will Incur

1		
2	 	
3		
4		
5		





Health Fair Resources

Health Fair Resources

http://www.cmhsrp.uic.edu/health/

The UIC Center on Psychiatric Disability and Co-Occurring Medical Conditions makes numerous free materials available to the public about health and mental health for people in recovery. Handouts and workbooks can be downloaded for free and distributed at your health fair.

http://welltacc.org/

Collaborative Support Programs of New Jersey, Institute for Wellness and Recovery Initiatives makes multiple resources available to the public about wellness for people in mental health recovery. Handouts, newsletters, manuals, and booklets can be downloaded for free and distributed at your health fair.

http://www.promoteacceptance.samhsa.gov/10by10/default.aspx

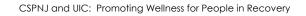
The US Substance Abuse and Mental Health Services Administration (SAMHSA) has played a major role in dealing with lifespan and health disparity for people in mental health recovery. Visit this web site for everything from a discussion of the reasons for health problems, to related recommendations for peers and providers, to posters and other materials. Planning a health/wellness fair can help further SAMHSA's Wellness Campaign efforts.

http://millionhearts.hhs.gov/index.html

Another resource you can use or reference at a health fair is Million Hearts[™]. This is a national initiative to prevent 1 million heart attacks and strokes over five years. Million Hearts brings together communities, health systems, nonprofit organizations, federal agencies, and private sector partners from across the country to fight heart disease and stroke, which are big problems in the United States today. Many of the major risk factors for these conditions can be prevented and controlled. Million Hearts provides resources that you can offer at a health fair to help people learn more about preventing or managing heart-related conditions.

www.healthypeople.gov/2020/default.aspx

The Healthy People 2020 initiative provides science-based, 10-year national goals for improving the health of all Americans. Some goals are to attain higher-quality, longer lives free of preventable disease, disability, injury, and premature death. Other goals are to achieve health equity, eliminate disparities, improve the health of all groups, and create social and physical environments that promote good health for all. Visit the "Learn" and the "Implement" tabs on the web site to obtain free information and resources.



To be completed by:

Deadline:

Six to twelve months before the health fair	Due By	Notes
Secure agreement from senior management/host organization.		
Identify target audience(s).		
Establish goals, objectives, and timelines for the health fair.		
Select planning committee members; appoint chair/co-chairs.		
Form and meet with subcommittees.		
Select subcommittee chairs to report activities to the planning committee.		
Identify partner organizations that might co-host the fair (if relevant).		
Provide stipend to host organization (if relevant).		
Select a theme.		
Select dates and times.		
Select and reserve the fair location/venue.		
Make sure there are enough electrical cords and outlets for testing and		
audiovisual equipment at location.		
Preliminarily identify tests, services, information, exhibits, activities.		
Prepare a budget:		
Calculate & monitor food budget		
 Calculate & monitor educational materials budget 		
Calculate & monitor supplies/kits budget		
Other:		

Four to six months before the health fair	Due By	Notes
Identify & secure commitments from nurses/medical personnel		
administering health tests/screeings.		
Verify current licensure of nurses/medical personnel.		
Select health screenings and services to be offered.		
Develop and obtain approval for Emergency Protocol.		
Identify and secure commitments from vendors and exhibitors.		
Identify and secure commitments from donors.		
Secure volunteers, including someone who can take pictures the day of		
the fair.		
Ask all staff, volunteers, and exhibitors to reserve the selected date.		
Begin planning to accommodate for any child care or other special		
needs of attendees.		
Reserve rental equipment, including privacy screens if using.		
Determine refrigeration needs prior to & during the fair.		
Reserve tables and chairs.		
Design and order staff/volunteer t-shirts based on theme.		
Other:		

Three months before the health fair	Due By	Notes
Meet with subcommittee chairs to review progress towards		
implementation of plans.		
Order Medical Fact Sheets and education materials from professional		
organizations.		
Develop and proofread materials to publicize the event (posters, flyers,		
PSAs)		
Duplicate printed materials, such as registration forms, Results		
Recording Forms, Health Passports, and Satisfaction Surveys.		
Plan for and begin securing freebies, giveaways, decorations.		
Create and send written confirmation to exhibitors and donors.		
Monitor exhibitor and donor responses; follow up with non-responders.		
Secure cash box; plan for change needs at the fair.		
Reserve handtrucks and carts.		
Reserve trash receptacles and containers for biohazardous materials.		
Review Planning/Supplies Spreadsheet and order the supplies (test kits,		
wristbands, the scale, tape measure, tablecloths, etc.)		
Make arrangements to safely store test kits that need to be refrigerated.		
Make arrangements to secure a laptop and TV/DVD player, if needed.		
Begin planning for attendees' transportation needs.		
Create lists with contact information of volunteers and exhibitors.		
Secure items for Break Room and Respite Room (if using).		
Other:		

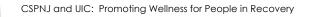
One month before the health fair	Due By	Notes
Meet with subcommittee chairs to review progress towards		
implementation of plans.		
Publicize the event with flyers, posters, etc.		
Contact television, radio, and newspapers to publicize, if relevant.		
Plan lay-out for stations, booths, and exhibits.		
Make station and booth signs.		
Create map for exhibitors and attendees.		
Make the program, acknowledging exhibitors, volunteers, donors, etc.		
Make a list of items that still need to be purchased (see		
Planning/Supplies Spreadsheet)		
Secure supplies for the "be prepared for anything kit" (see		
Planning/Supplies Spreadsheet)		
If using pre-registration, begin registering attendees to determine		
schedule, staffing, needed outreach		
Train fair volunteers and staff; arrange for practice sessions		
Develop and print signs for stations.		
Obtain certificate/waiver of insurance for fair venue, if needed.		
Other:		

One week before the health fair	Due By	Notes
Issue reminders to attendees and host organization staff.		
Create and finalize staff and volunteer schedules.		
Confirm with all attendees.		
Confirm with all volunteers and staff.		
Finalize plan for staffing, including command center table.		
Finalize map for exhibitors, volunteers, staff, and attendees; print.		
Finalize and print health fair program.		
Ensure educational materials for each station are finalized and printed.		
Confirm with all exhibitors (acquire exhibitor resources as needed).		
Determine total number in attendance expected.		
Make nametags for staff/volunteers.		
Purchase and safely store non-perishable snacks and beverages for		
volunteers and attendees.		
Develop schedule to assign staff/volunteers to each station/booth.		
Finalize plan for the registration table and registration process.		
Finalize plan for event evaluation, including distribution and collection.		
Prepare the goody bags, if using.		
Other:		

Day before the health fair	Due By	Notes
Set up tables, booths, exhibits, waiting area, etc.		
Bring the "be prepared for anything kit."		
Label the command center table and equip it with the "be prepared for		
anything kit."		
Set up the registration table (include registration sheets, pens, maps,		
etc.)		
Set up the evaluation area, including satisfaction surveys for exhibitors		
and participants.		
Purchase and safely store perishable food (lunch, apples for snacks,		
etc.) for staff, volunteers, and attendees.		
Set up the food area.		
Set up the Break Room and Respite Room.		
Other:		

Day of the health fair	Due By	Notes
Finish setting up.		
Be ready one hour before opening.		
Direct and instruct volunteers.		
Greet vendors and escort them to their exhibit spaces.		
Collect registrations, station results recording forms, etc.		
Collect satisfaction evaluations.		
Clean up.		
Record final number of attendees.		
Other:		
Day of the fair checklist	Due By	Notes
Did you set up early?		
Are there signs to direct people where to go?		
Are the food & beverages for staff, volunteers, exhibitors, and attendees		
set?		
Has the audiovisual equipment been tested on-site by those individuals		
who will be using it?		
Is there enough seating?		
Does the set-up promote an adequate flow of participants to each		
event?		
Are there enough educational materials and handouts for participants?		
Do you have pens available for participants to complete satisfaction		
surveys, forms, etc.?		
Do you have the gift bags, freebies, give-aways, etc.?		
Other:		

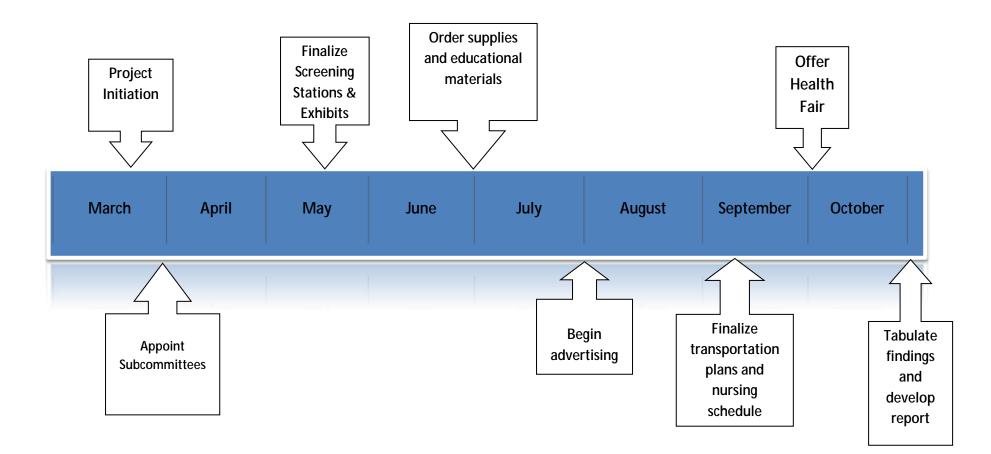
Follow-up after the fair	Due By	Notes
Send thank you letters to exhibitors, volunteers, etc.		
If feasible, check with agencies providing attendees to ensure follow-up		
is done for test results.		
Tabulate satisfaction survey results.		
Determine and document possible improvements for next time.		
Report results to the senior management, exhibitors, media, etc., as		
appropriate.		
Submit all receipts to appropriate parties		
Other:		

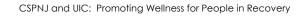


Health Fair Milestone Timeline

Health Fair Event

Sample Milestone Timeline





Sample Health Fair Flyers



COME TO A FREE HEALTH FAIR ON: [date & times]

WHERE:

PARKING:

Add map here

BY TRAIN:

BY BUS:

- FREE CHAIR MASSAGE
- MINI EXERCISE CLASSES
- NUTRITION PRESENTATIONS
- COOKING DEMOS
- DENTAL SPECIALISTS
- ALLERGY SPECIALISTS
- FREEBIES & GIVEAWAYS!

- \$250 WORTH OF FREE HEALTH TESTS!
- SCHEDULE A MAMMOGRAM
- WALGREEN'S WELLNESS COACHES

Free peer and professional counseling available about your test results!

We hope to see you there!

FREE HEALTH FAIR

DAY OF WEEK & DATE TIME Fair Location Fair Address

Please join us to learn about health programs and resources in your community that can help improve your health and quality of life.

Free Screenings

- **ü** Vision
- ü Glucose
- ü Cholesterol
- **ü Blood Pressure**
- **ü** Fitness Tests

Freebies & Give-aways! To attend RSVP to NAME at (phone number) or (email)

Your logo

Name of your program Address Phone Web Site

Logos for sponsors

Check it out! A HEALTH FAIR!

- Free blood pressure & cholesterol checks
- Free Type II diabetes screening
- Free weight & height checks
- Free health & wellness materials
- Giveaways & a raffle

Call Our Toll-Free Number for More Information!

Check it out! A HEALTH FAIR!

- Free blood pressure & cholesterol checks
- CHECKS
- Free Type II diabetes screening
- Free weight & height checks
- Free health & wellness materials
- Giveaways & a raffle

HEALTH FAIR DATES:

HOURS: HOURS: HOURS:

LOCATION:

Call Our Toll-Free Number for More Information!

Check it out! A HEALTH FAIR!

- Free blood pressure & cholesterol checks
- Free Type II diabetes screening
- Free weight & height checks
- Free health & wellness materials
- Giveaways & a raffle

HEALTH FAIR DATES:

HEALTH FAIR DATES:

LOCATION:

HOURS:

HOURS:

HOURS:

HOURS: HOURS: HOURS:

LOCATION:

Free blood pressure & cholesterol checks

- Free Type II diabetes screening
- Free weight & height checks
- Free health & wellness materials
- Giveaways & a raffle

HEALTH FAIR DATES:

HOURS: HOURS: HOURS:

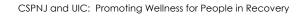
LOCATION:

Call Our Toll-Free Number for More Information!

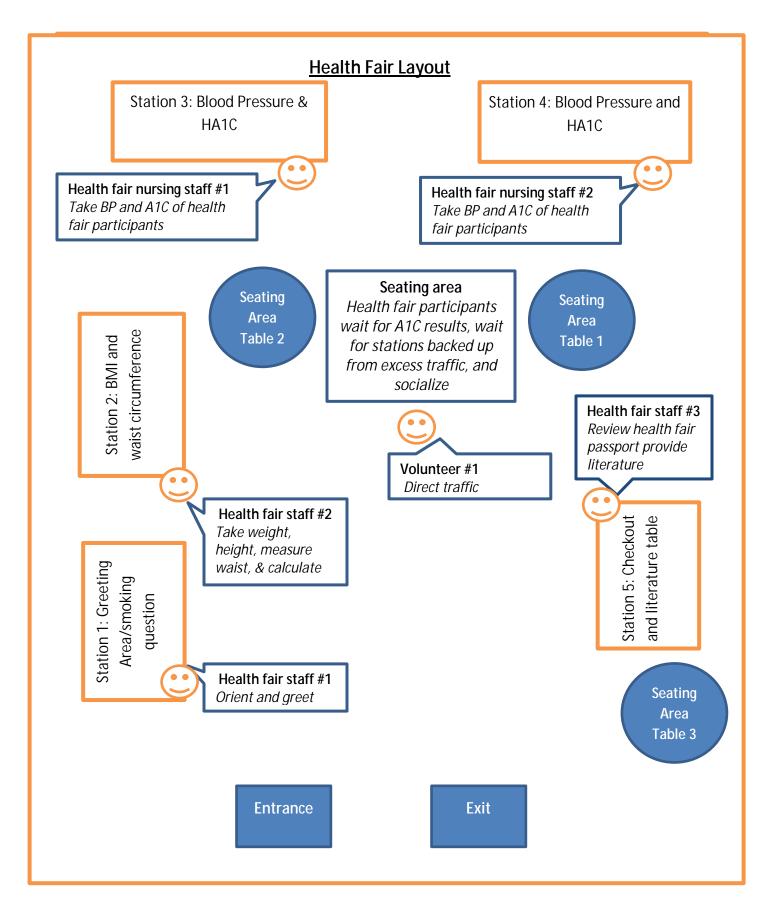
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Check it out!

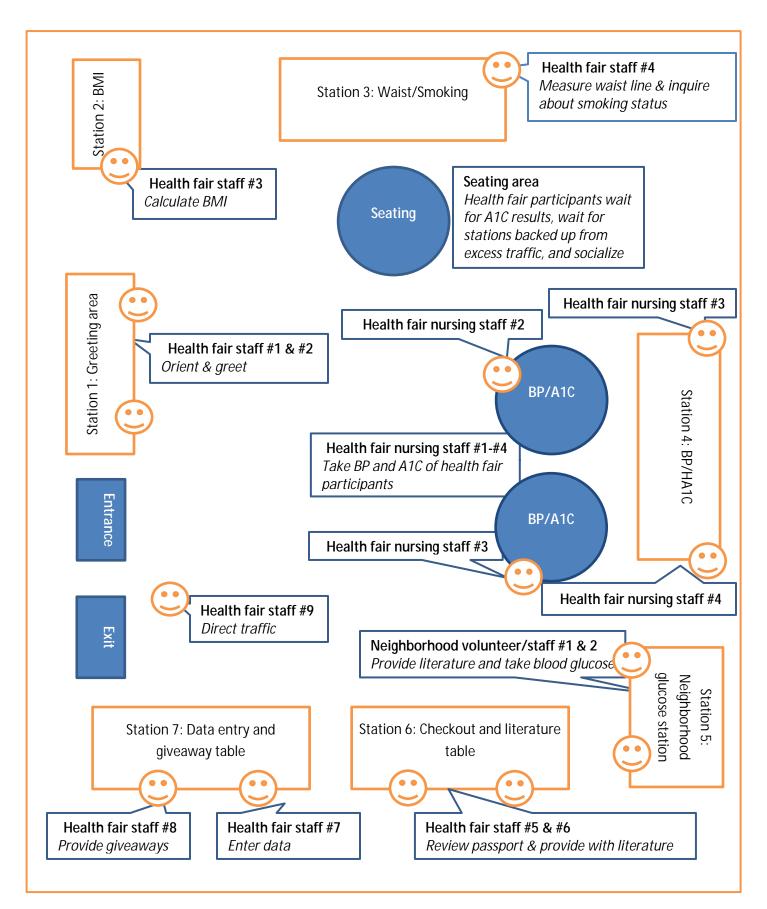


Sample Layouts for Health Fair



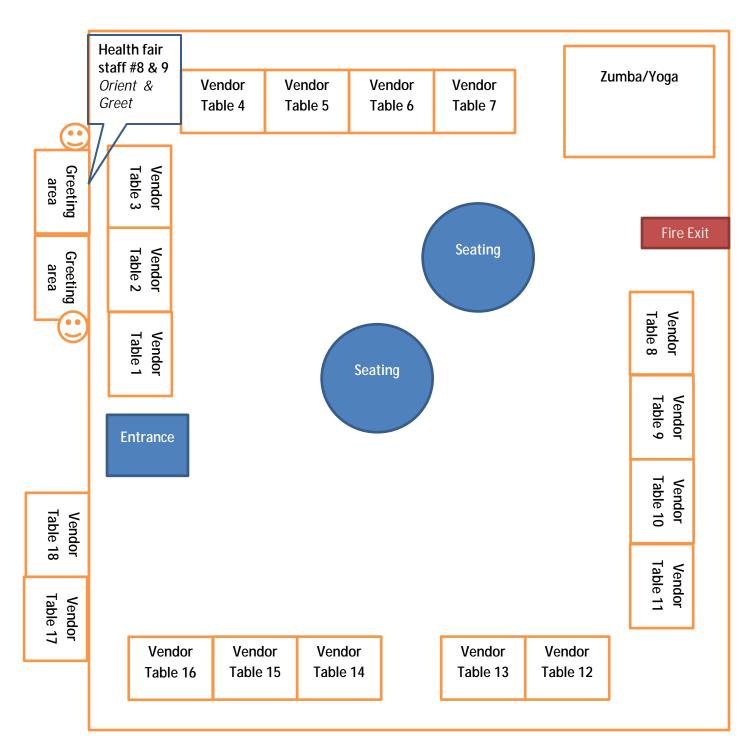
This layout was used when offering one of our health fairs at a hotel. It is a good example of how to arrange stations and booths in a smaller space.

Health and Wellness Fair: Room 1



This layout was used when offering one of our health fairs at a university, making use of an auditorium and classrooms. It is a good example of how to arrange stations and booths in a larger space, such as at a local college, community center, or place of worship.

Health and Wellness Fair: Room 2



Health and Wellness Fair: Overview Room 1

Station 1: Greeting area

Orient & greet health fair participants

- 1. Health fair staff #1
- 2. Health fair staff #2

Station 2: BMI

Take weight, height, and calculate BMI of health fair participants

3. Health fair staff #3

Station 3: Waist/Smoking

Measure waist line of health fair participants, inquire about smoking status

4. Health fair staff #4

Seating Area

Health fair participants wait for A1C results, wait for stations backed up from excess traffic, and socialize

Station 4: BP/A1C

Nursing staff takes BP and A1C of health fair participants

- 1. Health fair nursing staff #1
- 2. Health fair nursing staff #2
- 3. Health fair nursing staff #3
- 4. Health fair nursing staff #4

Station 5: Neighborhood glucose station

Volunteers &/or staff from local community agency provide health fair participants with literature on their associated community organization and take blood glucose level of health fair participants

- 1. Neighborhood volunteer/staff #1
- 2. Neighborhood volunteer/staff #2

Station 6: Checkout and literature table

Review passport with participant and provide with health literature

- 1. Health fair staff #5
- 2. Health fair staff #6

Station 7: Data entry and giveaway table

- 1. Health fair staff #7
 - Enter health fair participant data
- 2. Health fair staff #8 *Give health fair partipants giveaways*

Traffic

1. Health fair staff #9

Direct health fair participant traffic

Health and Wellness Fair: Overview Room 2

Greeting area

Orient & greet health fair participants

- 1. Health fair staff #8
- 2. Health fair staff #9

Vendor Tables

- 1. Pharmacy
- 2. Neighborhood Health Center
- 3. Health Insurance Carrier
- 4. Career Services
- 5. Dental Clinic
- 6. Diabetics
- 7. Cooperative Food Extension Program
- 8. Bank-Financial Institution
- 9. Local Hospital
- 10. YM/WCA
- 11. HIV Education
- 12. State or County department of Health
- 13. Smoking Cessation Program
- 14. Cosmetology
- 15. Cosmetology
- 16. Peer Run Organization or Family Support Organization
- 17. Massage Therapist/Reflexology
- 18. Grocery Store



Health Fair Supplies & Budget Spreadsheet

Health Supplies & Budget -- Supplies

				DATE DATE		INITIAL WHEN	
Health Testing Supplies	# NEEDED	COST/EACH	TOTAL \$	ORDERED	RECEIVED	DONE	NOTES
Cholesterol System Printer Labels (extra rolls)			\$0				
Test Cassettes for LDX (boxes)			\$0				requires refridgeration
Lancets for A1c (boxes)			\$0				
Solution for A1c Meter (bottles)			\$0				
Alcohol Prep Pads (boxes / 100)			\$0				
Latex-free Gloves (boxes / 100)			\$0				
Biohazard Containers (each)			\$0				
Biohazard Bags (boxes)			\$0				
Sterile Bandages (boxes 100)			\$0				
Sterile Cotton Balls (boxes 130)			\$0				
Restocked supplies for first aid kit			\$0				
Garbage Bags			\$0				
Velcro			\$0				
Facial tissue			\$0				
Wet Wipes			\$0				
Hand Sanitizer			\$0				
Sundry Supplies							
Pens/Pencils			\$0				
Extension Cords			\$0				
Surge Protectors			\$0				
Stapler			\$0				
Staples			\$0				
Scissors			\$0				
String			\$0				
Rubber Bands			\$0				
Posterboard			\$0				
Binder Clips			\$0				
Paper			\$0				
Duct Tape			\$0				
Scotch Tape			\$0				
Masking Tape			\$0				
Batteries			\$0				
Markers			\$0				
Note Pads (pks of of 12)			\$0				
Miscellaneous Tools (screw driver, etc.)			0				

Health Supplies & Budget						
Supplies continued						
RESPITE ROOM	COST/EACH	TOTAL \$	DATE ORDERED	DATE RECEIVED	INITIAL WHEN DONE	NOTES
Candles		0				
Calming Music		0				
Music Player		0				
Kleenex		0				
Bottled Water		0				
STAFF/VOLUNTEER ROOM						
Bottled Water		0				
Soda		0				
Hand Sanitizer		0				
Snacks		0				
TOTAL COST		\$0				

Health Supplies & Budget --Equipment

EQUIPMENT	# NEEDED	COST/EACH	TOTAL \$	DATE ORDERED	DATE RECEIVED	INITIAL WHEN DONE	NOTES
Laptops			0				
Batteries for Laptops			0				
Cholesterol LDX System			0				
Carrying Case for LDX			0				
A1c Now+ Blood Glucose Monitor			0				
Lancet Device for A1c (each)			0				
Height Chart			0				
Tape Measure			0				
BMI Paper Chart			0				
Scales (weight)			0				
Back-Up Scale (weight)			0				
BMI Calculator			0				
Paper Calculator			0				
Blood Pressure Kit			0				
Stethoscope			0				
Lock Box for Receipts			0				
Lock Box for Gift Cards			0				
Camera			0				
First-Aid Kit			0				
Hand Cart			0				
Clip Boards			0				
			¢				
TOTAL COST			\$-				

Health Supplies & Budget --Forms & Paperwork

PAPERWORK	# NEEDED	COST/EACH	TOTAL \$	DATE COMPLETED	INITIAL WHEN DONE	NOTES
Volunteer Training Manual			0			
Blank Receipts			0			
Health Passports			0			
Wristbands			0			
Small Adhesive Labels for ID #			0			
Floor Plan for Stations/Demos			0			
Schedule of Staff Assignments						
Form to Record Test Results by ID #						
Name Tags			0			
FACT SHEETS/HANDOUTS						
Diabetes			0			
Cholesterol			0			
Smoking			0			
BMI			0			
Blood Pressure			0			
Substance/Alcohol			0			
List of Local Health Clinics						
PROMOTIONAL MATERIALS						
Flyer for info meetings			0			
Event flyers			0			
Google Maps for Directions						
Posters			0			
Gift Bags			0			

	r					
Health Supplies & Budget Forms & Paperwork cont.						
DISPLAYS	# NEEDED	COST/EACH	TOTAL \$	DATE COMPLETED	INITIAL WHEN DONE	NOTES
Tables			0			
Tablecloths			0			
Chairs			0			
Banners			0			
Posters during event			0			
Signage			0			
Balloons			0			
Display Boards			0			
TOTAL COST			0			

Health Supplies & Budget --

Services & Refreshments

				DATE		DATE		
DEMONSTRATIONS	# NEEDED	COST/EACH	TOTAL \$	REQUESTED	STAFF	CONFIRMED	STAFF	NOTES
Massage			0					
Confirmation Letter (Massage)								
Cooking			0					
Confirmation Letter (Cooking)								
Dental			0					
Confirmation Letter (Dental)								
Yoga			0					
Confirmation Letter (Yoga)								
STAFF/VOLUNTEERS			-					
Meals			0					
Refreshments			0					
Daily stipends			0					
			0					
INSURANCE								
Site insurance verified or secured								
Current licensure for nurses verified								
Current insurance for nurses verified	-							
GIFT BAGS & GIVE-AWAYS								
Water Bottles								
Mini Sunscreens								
Toothbrush & floss								
Pedometer								
Local coupons								
Gift card								
SITE STIPEND								
Stipend to fair location/site			0					
TOTAL COST			0					

Health Supplies & Budget --On-Site Needs

ON SITE	# NEEDED	COST	TOTAL \$	DATE COMPLETED	INITIAL WHEN DONE	NOTES
Cold storage (on site)			0			
Tables & chairs for stations			0			
Comfortable chairs for waiting area			0			
Privacy screens			0			
Urns for coffee & hot water			0			
Electricity and surge protectors			0			
TV & DVD player			0			
Disposal for sharps and blood material			0			
Garbage cans and bags			0			
Paper shredder			0			
TOTAL COST			0			

Online Health Screening Supplies

(Web sites active as of October 2013)

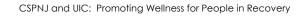
- 1. Myotape for measuring waist circumference
 - a. http://www.amazon.com/AccuFitness-MT05-MyoTape-Body-Measure/dp/B000G7YW7Y
- 2. Safetouch Powder Free Vinyl Exam Gloves, Non-Sterile
 - a. <u>http://www.amazon.com/Safetouch-Powder-Gloves-Non-Sterile-</u> Medium/dp/B0019R329O/ref=sr 1_1?s=hpc&ie=UTF8&qid=1314284758&sr=1-1

3. Band-Aid Flexible Fabric Bandages

a. <u>http://www.amazon.com/Band-Aid-Johnson-Flexible-Fabric-100-</u> Count/dp/B000GCKDGI/ref=sr 1 1?s=hpc&ie=UTF8&qid=1314284826&sr=1-1

4. Alcohol Prep Pads

- a. <u>http://www.amazon.com/Alcohol-Prep-Pads-Medium-</u> Size/dp/B000KDH3YI/ref=sr 1_1?ie=UTF8&qid=1314284961&sr=8-1
- 5. Sharps Container Large Volume 2.2 Quarts
 - a. <u>http://www.amazon.com/Sharps-Container-Large-2-2-</u> Quarts/dp/B002ZUQODA/ref=sr_1_4?ie=UTF8&qid=1314285005&sr=8-4



Medical Fact Sheets

Body Mass Index

What is BMI?

Your body mass index, or BMI, approximates the amount of fat in your body. BMI is calculated using your weight in relationship to your height. It is one way to know whether you are at a healthy weight based on how tall you are.

BMI varies by gender, age, race, and other factors. For example, women tend to have more body fat than men, while older people have more than younger people. Also, extremely fit people, like athletes, can have high BMI due to being very muscular. This is why BMI is only one way to predict whether a person will develop health problems.

Still, knowing your BMI is important because having a higher amount of body fat in combination with other health problems can be serious.

What is a healthy BMI?

Doctors use the following values to determine healthy BMI in adults (aged 18 or older):



18.5 or less =underweight18.5 to 24.9 =normal25.0 to 29.9 =overweight30.0 or more =obese

What are the benefits of a healthy BMI?

Having less body fat is connected to better health overall. People with lower BMI usually have:

- Fewer joint and muscle pains
- Reduced risk for heart disease and certain cancers
- Better sleep
- Better regulation of bodily fluids and blood pressure
- More effective metabolism of sugars and carbohydrates

Also, research shows that people with higher BMI are more likely to be depressed, or to become depressed over time. Having less or more body fat than is recommended for your height can make you feel badly both physically and emotionally. If your BMI is under or over the recommended value, please talk to your doctor promptly to make a diet and exercise plan that will work for you.

After today's health event, you can track your BMI on-line by visiting: <u>http://www.cdc.gov/healthyweight/assessing/bmi/</u> For more information about the effects of a healthy BMI, visit: <u>http://www.heart.org/HEARTORG/</u>



Types of Exercise

Brisk walking is a great exercise to safely build strength, flexibility, heart health, and balance!

Try walking with a pedometer to increase the number of steps you take each day. There are four main types of exercise to improve health.

Strength or resistance exercises -

- · Good for your heart and best for losing weight
- Build muscle and bone strength for fewer aches and pains
- Try walking with 3-5 pound weights in each hand (or using wrist weights) as resistance to build strength

Flexibility or stretching exercises -

- Improve posture, ability to move naturally, and ability to breathe deeply
- Increase circulation and reduce muscle tension caused by stress
- Ask your doctor to recommend safe stretches for you

Cardiovascular or aerobic exercises -

- Improve the ability of the lungs and heart to deliver oxygen throughout the body
- Increase endurance and stamina
- Try brisk walking, swimming, cycling, jogging, jumping rope, and climbing stairs as is safe for you

Balance and coordination exercises

- Can prevent falls and broken bones as you age
- Walking for exercise also can improve your balance
- Or, try exercise video games to improve your balance, or jump on a mini-trampoline as is safe for you

Motivation to Exercise

Start out with five-minute exercise sessions, and slowly increase.

If you need a break, even after a few minutes of exercise, that's okay!

The more you exercise, the more energy you'll have. Many people don't like exercising. Others believe that they're too out of shape or unhealthy to get started.

If this sounds familiar, consider these tips:

\Rightarrow I don't have time to exercise!

Even short periods of exercise can improve your health. You can take 15-minute walks with your dog or to a neighbor's each day. Also, alternating 1 minute of heavy exercise (jogging or cycling at higher speeds) with 2-3 minutes of low-impact exercise (walking) may be best for your health.

⇒ Exercise is difficult and hurts!

"No pain, no gain" is no longer considered effective or sensible. It shouldn't hurt to get in shape. You can build your strength and fitness by walking, swimming, or cleaning the house or yard.

⇒ I'm too old, or overweight, or unhealthy to exercise! It's never too late to start building up your strength. Few health or weight problems make exercise completely impossible, so talk to your doctor about a safe routine for you.

⇒ Exercise is boring!

Most people can find a physical activity they enjoy or can at least tolerate. Try playing exercise video games with your kids or grandkids, which can burn calories and build your stamina. Walking in place during the commercials of your favorite TV shows also can get you started.

What is Diabetes?

Having diabetes can be difficult. But, once you learn how to manage it, you will feel better and protect your body from harm.

Taking care of your diabetes will help you get what you want out of life.

- Diabetes means that your blood sugar is too high.
 - When you eat, your food is broken down into a sugar called glucose. Glucose gives your body energy.
 - But to use the glucose, your body needs insulin. When you have diabetes, your body either doesn't make enough insulin or can't use its own insulin well. This causes sugar to build up in the blood. This harms your body and organs over time.

• There is no cure for diabetes.

It's not your fault, but it is your job to take care of yourself. The good news is that you can live a long and healthy life by taking your medicines, eating right, and exercising.

Your diabetes care team may include:

- your case manager
- a pharmacist
- a diabetes educator
- an endocrinologist
- any other provider helping you with diabetes

You and your family/friends are the most important members of your care team.

Understanding Diabetes

Testing Blood Sugar

Results from an A1C test show your average blood sugar level over the past 2 to 4 months. This lets you know how well your blood sugar is being controlled over time.



A1C results are interpreted like this:

4 to 5.6% = Balanced A1C 5.7 to 6.4% = Pre-diabetes A1C 6.5% or higher = Diabetes A1C

If your A1C result indicates pre-diabetes or diabetes, you should see a doctor for a more comprehensive test as soon as possible.

What Puts People at Risk for Diabetes?

Some things that put people at risk for diabetes are:

- Being overweight or obese
- Ethnic background (diabetes occurs more often in Hispanic/Latino Americans, African Americans, Native Americans, Asian Americans, Pacific Islanders, and Alaska Natives)
- High blood pressure
- Being inactive or exercising fewer than 3 times a week
- Having a family history of diabetes (having a parent or sibling with diabetes)
- Being 45+ years old



What Can I Do if I have Pre-Diabetes or Diabetes?

People with diabetes have different needs. After seeing your doctor to develop a diabetes management plan tailored for you, here are some other steps you can take:

- 1. Take your diabetes medicine exactly as prescribed
- 2. Check and record your blood sugar every day
- 3. Eat a nutritious diet that is low in fats and refined sugar
- 4. Maintain a healthy weight, exercise, and control your blood pressure
- 5. Check your feet every day for cuts, blisters, sores, swelling, redness, or sore toenails
- 6. Brush and floss your teeth and gums every day

Learn more about preventing or managing diabetes by visiting: http://www.diabetes.org/

Steps to Stay Healthy

Bring your glucometer or blood sugar log when you visit your health care provider.

It's important to keep your appointments when your provider makes a referral for you.

Step 1: Learn About Diabetes

Diabetes means your blood sugar is too high. It can damage your heart, blood vessels, eyes, kidneys, and nerves. But you can learn to manage it for a long life!

Step 2: Know Your Numbers

In general,

- Your A1C should be 7 or less
- Your LDL (bad cholesterol) should be at least below 100
- Your blood pressure should be less than 130/80

Step 3: Manage Your Diabetes

- Learn how to track your blood sugar
- Eat mostly healthy foods, like lots of vegetables, fruits, whole grains, beans, and fish or chicken (not fried)
- Work up to being active at least 30 minutes, 5 days/week
- Quit smoking

Step 4: Visit Your Health Provider Regularly

They'll let you know how often they need to see you. It's important that you keep all of your appointments with your regular doctor, and with any referred doctors.

Signs of High Blood Sugar

Test your sugar right away if you have these signs!

Then, call your doctor.

Signs of high blood sugar are:

- \Rightarrow A dry mouth
- $\Rightarrow~$ Being extremely thirsty, even after drinking water
- \Rightarrow Urinating often
- \Rightarrow Diarrhea or nausea/vomiting
- $\Rightarrow~$ Feeling tired all of the time
- \Rightarrow Having blurred vision
- \Rightarrow Losing weight without trying to



If your glucose is very high, you may have stomach pain, feel sick to your stomach, or throw up.

Cholesterol Facts

• Cholesterol is found in foods like meat, dairy, and eggs.

High cholesterol causes heart and blood vessel problems.
 This can lead to complications and heart attacks.

Types of cholesterol

- ⇒ LDL is known as "bad" cholesterol because it's the one that builds up in your arteries. Goal <100</p>
 - $\Rightarrow~$ If you have heart disease already, then your goal may be 70 or less
- ⇒ HDL is "good" cholesterol because it helps flush cholesterol out of the body. Goal >40
- ⇒ Triglycerides are a kind of fat that helps our bodies to function properly. Goal <150</p>

If you have high cholesterol

- \Rightarrow Eat foods low in fat and high in fiber
- \Rightarrow Be physically active every day
- \Rightarrow Take your cholesterol medicine, if prescribed

Some foods to choose

- \Rightarrow Lean meats (baked chicken, baked fish, and lean beef)
- ⇒ Egg whites
- \Rightarrow Beans (rinse them, if they're canned)
- $\Rightarrow~$ Non- or low-fat milk, cheese, and yogurt

Cholesterol is a kind of fat in your blood. Among other things, it helps produce hormones and acids to digest fat in your body.

You only need a small amount of cholesterol in your blood.

Healthy vs. Unhealthy Fats

Ever wonder about what is a good vs. bad fat?

Try adding these to your diet:

Good fats: Omega-3s (Do not fry the fish!)

- Salmon
- Trout , Catfish, Mackerel
- Flaxseed
- Walnuts
- Fish oil pills (Take with food, and make sure they contain both DHA and EPA.)

Good fats: Mono-saturated (A couple of handfuls of nuts will do)

- Avocados
 - Hazelnuts, Almonds, Brazil nuts, Cashews
- Sesame seeds
- Pumpkin seeds
- Tofu
- Olive, vegetable, and peanut oils

Try to limit or cut these from your diet:

Bad fats: Saturated fats

- High-fat cuts of meat (beef, lamb, and pork)
- Chicken with the skin
- High-fat dairy products (such as whole milk and soft cheeses)
- Coconut oil, Palm oil

Very bad fats: Trans fatty acids

- Fried foods
- Store-bought baked goods and cookies
- Store-bought icings and frostings
- Packaged snack foods and crackers
- Microwave popcorn
- Stick margarines and shortening
- Store-bought salad dressing

Your body needs good fats!

Fat-free does not always mean healthy for you. Many "low or fat-free" foods are high in sugar, bad carbs, calories, and chemicals.

Tips for Cutting Fats

You need healthy fats in your diet.

Essential (good) fats keep your skin soft and give you energy. You need 10% of your daily calories from good fats like Omega-3s.

Omega-3s are a super food!

They can:

- ⇒ boost your mood
- ⇒ protect against memory loss
- ⇒ reduce the risk of heart disease, stroke, & cancer

⇒ ease arthritis, joint pain, & inflammatory skin conditions

Saturated fats raise your blood cholesterol.

Trans fats are even worse!

They raise your bad LDL cholesterol <u>and</u> also lower your good HDL cholesterol!

Choose healthy, low-fat options.

Try whole grains, fruits, vegetables, and beans.

Choose skim or low-fat dairy products.

Cook with small amounts of olive oil or vegetable oil.

Check your flavorings.

Try to replace high-fat sauces with vinegars, mustards, and lemon juice. Make your own salad dressing or use olive oil on salads.

Read food labels.

Watch out for "partially hydrogenated oil" in the ingredients. Even if the food says it is "trans fat free," if it contains partially hydrogenated oil, it is unhealthy.

Be wise when eating out.

Try to **skip** all fried foods, high fat meats, dishes with cheese, dishes with butter or cream sauces, sour cream, biscuits, and baked goods.

Blood Pressure

What is Blood Pressure?

Each time the heart beats, it pumps blood into our arteries or blood vessels. Blood pressure is the force of our blood as it pushes against the walls of our arteries.

Your blood pressure is read as two numbers, such as "116 over 80". The top, or first number, is your systolic pressure, which

measures the pressure of your blood in your arteries when your heart is pumping. The bottom, or last number, is your diastolic pressure, which measures the pressure of your blood in your arteries while your heart is resting. Your blood pressure is at its highest when your heart beats.

With normal blood pressure, your blood flows normally through your arteries and does not causing undue stress on your heart.

What is High Blood Pressure?

Blood pressure goes up and down naturally throughout the day. It is lowest when you sleep and it rises when you get up. It also can go up when you get nervous, stressed, active, or excited. It also may rise when you have caffeine or nicotine.

Blood pressure readings are interpreted like this:

Normal = less than 120/80

Pre-hypertensive = 120-139/80-89High blood pressure = 140/90+



When it goes up and stays high, it's called high blood pressure. When this happens, your heart has to pump harder than it should to move blood around your body. The medical term for high blood pressure is hypertension. Hypertension does not mean being overly nervous or excitable. You can have hypertension and not even know it.

High blood pressure increases the risk for heart attack, stroke, kidney problems, blindness, and other serious medical conditions. Take heart! There are ways to manage your blood pressure by eating low salt foods, being physically active, and taking blood pressure medicine if your doctor prescribes it for you.

<u>UIC Center on Psychiatric Disability and Co-Occurring Medical Conditions</u>, 2013. http://www.cmhsrp.uic.edu/health/. The Center is funded by <u>NIDRR & CMHS</u>. Material adapted from: <u>http://www.webmd.com/hypertension-high-blood-pressure/default.htm</u>

Blood pressure is the measurement of force applied to artery walls



ADAM

Managing High Blood Pressure

Most of the salt people eat comes from processed & restaurant foods. Try to avoid these. Salt (called sodium) raises your blood pressure. Take heart! You can still eat tasty foods.

Green Light Foods

- \Rightarrow Fresh fish, fresh lean meat, and fresh poultry
- \Rightarrow Fresh or frozen vegetables
- ⇒ Low-sodium canned veggies (but try not to eat these often)
- $\Rightarrow\,$ Herbs, spices, lemon, lime, or vinegar instead of salt
- ⇒ Flavorful, no-salt spices at the grocery store (like lemon pepper)
- ⇒ Low-sodium barbeque sauce, mustard, and ketchup (but only in small portions)
- ⇒ Low-sodium breakfast cereals, nonmicrowavable popcorn, and pretzels (in small portions)

Red Light Foods

- \Rightarrow Soda, including diet soda
- \Rightarrow Frozen dinners and packaged dinners
- ⇒ Instant or flavored rice or pasta kits
- \Rightarrow Canned soup or canned broth
- \Rightarrow "Cured" foods like bacon or ham
- ⇒ Canned, smoked, or processed meats (like hot dogs or lunch meat)
- ⇒ Foods packed in brine like pickles, pickled vegetables, and olives
- ⇒ Soy sauce and teriyaki sauce (even low-sodium brands)

Limit your salt to 1500 mg a day.

<u>UIC Center on Psychiatric Disability and Co-Occurring Medical Conditions</u>, 2013. http://www.cmhsrp.uic.edu/health/. The Center is funded by <u>NIDRR</u> & <u>CMHS</u>. Material adapted from: http://www.ndep.nih.gov/publications/PublicationDetail.aspx?Publd=4; Images: iowaavenue.com.

Start by cutting the amount of salt you put on your meals in half. Work up to no salt.

Do not add any salt when cooking.





Tips for Cutting Salt

Salt can raise your blood pressure.

You should eat only 1/4 teaspoon of salt each day.

That's the same as 1,500 mg each day.

Fresh foods usually have less salt

Cook at home if you can

Restaurants add a lot of salt to their food. But, you can skip the salt when cooking for yourself.

Fill up on vegetables

Skip the salt

Try not to add salt when cooking or eating. Use spices, herbs, vinegar, or lemon instead.

Read food labels

You'll be surprised at how much salt is in prepared foods, including cereal and crackers.

Pay attention to flavorings

Try to avoid soy sauce, ketchup, salad dressing, and seasoning packets. If you need to use salted flavorings, try only a sprinkling instead of the whole thing.

Choose low-sodium dairy and protein foods

Deli and lunch meats, sausages, and canned meat are very high in salt.

Cut back over time

Cut back little by little. You'll get used to less salt.

Boost your potassium

Potassium may help lower your blood pressure. Try a small banana, tomatoes, sweet potatoes, beans, or low-fat milk.

Understanding Alcohol Risks

Alcohol – what's the big deal?

Many adults drink alcohol in social or other situations. Moderate drinking is not necessarily harmful (BUT see the important exceptions on the next page). However, alcohol abuse and dependence are leading causes of disease, disability, and even death in our country. Persistently drinking too much alcohol is dangerous to you and to your family and friends.

Excessive alcohol use over a long period of time can lead to diseases and social problems like:

- Liver diseases, including alcoholic hepatitis and cirrhosis;
- Gastrointestinal problems, including pancreatitis and gastritis;
- Cardiovascular problems, including heart attack and hypertension;
- Cancer of the mouth, throat, esophagus, liver, colon, and breast (in general, the risk of cancer increases with increasing amounts of alcohol);
- Neurological problems, including dementia, stroke, and neuropathy;
- Psychiatric problems, including depression, anxiety, and suicide; and
- Social problems, including unemployment, increased violence, lost productivity, and family problems.

How do I know if I have a problem with alcohol?

According to the *Dietary Guidelines for Americans*, moderation means no more than 1 drink each day for women, and no more than 2 drinks each day for men. People have alcohol problems when they continue to drink even when it interferes with their work, parenting, emotional well-being, physical health, or social life. Alcohol abuse is an inability to control the use of alcohol. Alcohol dependence includes abuse, but also a need for more and more alcohol to get the same effects/feeling.



Heavy drinking is defined as:

- More than 1 drink per day, on average, for women, and
- More than 2 drinks per day, on average, for men.

Binge drinking is defined as:

- 4 or more drinks during a single occasion for women, and
- 5 or more drinks during a single occasion for men.

Both long-term heavy and binge drinking can lead to serious health and social problems.

Signs of Alcohol Dependence

Signs of physical dependence on alcohol:

- A need for increasing amounts of alcohol to achieve the desired effects (called "increased tolerance");
- Memory lapses (also called "blackouts") after heavy drinking;
- Withdrawal symptoms (such as nausea, shaking, high anxiety, bad headaches, delusions, and others) when alcohol use is stopped;
- Alcohol-related illnesses.



Some symptoms and behaviors of alcoholism are:

- Continuing to drink, even when health, emotions, work, or family are being harmed;
- Lack of control over drinking (being unable to stop or reduce alcohol intake);
- Hostility when confronted about drinking problems;
- Persistently drinking alone;
- Episodes of violence when drinking;
- No longer taking part in activities because of alcohol;
- Need for daily or regular alcohol use to function;
- Neglecting to eat because of alcohol use;
- Neglecting physical appearance and hygiene due to alcohol use;
- Making excuses to drink;
- Secretive behavior to hide alcohol use; and
- Otherwise unexplained shaking in the morning.

People who should never drink any alcohol are:

- Pregnant or trying to become pregnant;
- Younger than age 21;
- Driving, planning to drive, or participating in other activities requiring skill, coordination, and alertness;
- Taking prescription or over-the-counter medications that may cause harmful reactions when mixed with alcohol;
- Suffering from a medical condition that may be worsened by alcohol; and
- Recovering from alcoholism or unable to control the amount consumed.

What can I do if I have a drinking problem?

Talk to your doctor or other provider if you feel you may have a drinking problem.

Call the *National Drug and Alcohol Treatment Referral Routing Service* at **1-800-662-HELP**. This service can provide you with information about treatment programs in your local community. It also can help you to safely speak with someone about alcohol problems.

For more information on alcohol risks, visit: <u>http://www.cdc.gov/</u> <u>alcohol/index.htm</u> and <u>http://www.nlm.nih.gov/medlineplus/ency/</u> <u>article/001944.htm</u>.



Understanding Substance Abuse

What is drug addiction?

A person is considered addicted to illegal drugs (or the misuse of prescription drugs) if he or she cannot stop using even when it hurts family, relationships, work, school, and emotional or physical health.

Many people do not understand addiction. Some mistakenly believe that all people who use drugs lack morals or willpower. Others mistakenly believe that people can stop using drugs simply by choosing to stop. In reality, quitting takes more than good intentions. Because prolonged recreational drug use can change the brain, quitting is difficult even for those who are ready to try. **But, take heart! Help is out there.**

What are common signs?

- **Neglecting responsibilities** at school, work, or home. Starting to flunk classes, skip work, or neglect children because of drug use.
- Using drugs under dangerous conditions or taking risks while high. Driving while under the influence of drugs, using dirty needles to inject drugs, or having unprotected sex while high.
- **Getting into legal trouble due to substance abuse**. Getting arrested for disorderly conduct, for driving under the influence, or for stealing to support a drug habit.
- **Destroyed relationships due to drug abuse**. Chronic fighting with partners or family members, seen as untrustworthy by bosses and coworkers, or losing trusted friends and supporters.

What are some serious consequences?

• Loss of control over drug use

When this happens, people do drugs (or use more than planned), even when they promised themselves they wouldn't. They may want to stop using, but feel powerless to stop.

• Life revolving around getting and using drugs

When this happens, a person spends a lot of time thinking about drugs, figuring out how to get more drugs, using, and recovering from the effects of drugs.

• Abandoning activities once enjoyed

At this stage, drug abuse causes people to stop engaging in activities that they once loved, such as hobbies, sports, and socializing.

• Having withdrawal symptoms

This happens when a person has symptoms like nausea, restlessness, insomnia, depression, sweating, shaking, and anxiety when stopping drug use.

• Using substances in spite of harmful effects

Drugs are causing major problems in life like blackouts, infections, mood swings, depression, and paranoia, but people continue using anyway.

Heart disease, stroke, cancer, HIV/AIDS, hepatitis and other liver diseases, and lung disease can all occur because of drug abuse. Some of these effects occur when drugs are used at high doses or for a long time. But, some of these health risks can occur after just **one use**.

What Can I Do?

Treatment for recovery

Research shows that medication used with behavioral therapy is the best way to manage drug addiction. Treatment will be personalized to your unique needs, while addressing any other medical, psychiatric, or social issues you may have.



Symptoms of substance abuse can come and go over time. It is not uncommon for people to begin abusing drugs again. Relapse is not a sign of failure. Instead, it shows that treatment should be started again or adjusted to better meet a person's needs.

Harm reduction

Harm reduction is a type of treatment that does not focus only on quitting drugs. Harm reduction supports people in reducing their drug use while working towards being clean over time. It does not accept or reject any approach or behavior. Instead, it helps people see the consequences of risky behaviors, and reduce the harm those behaviors are causing to the people who are using and those around them.

What can I do if I need help?

Talk to your doctor or provider if you feel you have a drug problem. You also can call the *National Drug and Alcohol Treatment Referral Routing Service* at **1-800-662-HELP**. This service provides information about treatment programs in your local community.

To locate additional drug abuse treatment programs, visit: http://findtreatment.samhsa.gov/

For more information on drug abuse and addiction, visit: <u>http://www.nida.nih.gov/Infofacts/understand.html</u>

http://www.mayoclinic.com/health/drug-addiction/DS00183

http://helpguide.org/mental/

drug substance abuse addiction signs effects treatment.htm



Understanding Smoking Risks

The effects of smoking on health

Cigarette smoking is the number one cause of preventable disease and death worldwide. Smoking harms nearly every organ in the body. It's a main cause of lung cancer and chronic obstructive pulmonary disease (COPD). It also can lead to heart disease, stroke, and many other cancers and diseases.

Smoking also can lead to other health problems including:

- ulcers of the stomach and duodenum (the beginning of your small intestine)
- wrinkling of the skin of the face (on average, smokers look 5 years older than non-smokers)
- earlier menopause in women (an average of 5 years earlier)
- impaired erections in middle-aged and older men
- increased rate of osteoporosis (a disease that makes bones weaker)
- increased risks of miscarriage, premature birth, and death of a baby in its first year
- worsened asthma and other breathing problems in the smoker
- worsened asthma and other breathing problems in the smoker's family (from second hand smoke)

Second-hand cigarette smoke, or indirectly breathing in the smoke from a smoker can cause preventable illnesses, and even death, among non-smokers.

Smoking is also a leading cause of house fires. Hundreds of people die each year in smoking-related fires, putting the families of smokers at greater risk than families of non-smokers.

What are the benefits of quitting smoking?

There are immediate and long-term benefits of quitting smoking. Several benefits you will notice right away include:

- your sense of taste improving
- your sense of smell returning to normal
- your teeth and fingernails stop yellowing
- your breath, hair, and clothes smelling better
- saving a lot of money
- having more energy and time for ordinary activities



When I'm Ready, How Can I Quit?

Within minutes of smoking the last cigarette and beyond, the body begins to restore itself.

Time after quitting

20 minutes 12 hours Two weeks to three months One to nine months

One year Five years Ten years Fifteen years



Benefits to your health

Your heart rate and blood pressure drop The carbon monoxide in your blood drops to normal Your circulation and lung function improve Your coughing and shortness of breath decrease Your lung function normalizes Your excess risk of heart disease is cut in half Your stroke risk equals that of a non-smoker The rate of lung cancer death is half that of a smoker The risk of heart disease equals that of a non-smoker

How Can I Quit Smoking?

It's hard, but you **can** quit smoking. Not everyone can quit the first time they try. It may take you several tries before you can successfully quit smoking for good.

• Use Medications

People who use medications to quit smoking are twice as likely to quit than people who don't. Smokers who use quit medicine also gain less weight and have fewer nicotine withdrawal symptoms when they stop smoking.

Get Support

People who receive counseling or join a smoking cessation support group are more likely to quit than those who try to "go it alone."

• Set a Quit Date

Although most smokers think about quitting someday, it's helpful to set an exact day. Your quit date can be any day of the month, but it can help to choose a special day like your birthday or an anniversary.

• Make Preparations

To prepare for your quit day, try throwing away your ashtrays, old ashes, and lighters; buying cigarettes in single packs (to run out by your quit date); telling someone you see regularly about your quit date; and asking a doctor or other provider for help.

For more information about smoking and tips for quitting smoking, visit: <u>http://www.cdc.gov/tobacco/</u> <u>http://njchoices.org/</u>



Talking it Over with a Peer: Steps To A Healthier You

<u>BMI</u>

- Plan 30 minutes of physical activity (walking, gardening, chores, swimming, gym, etc.) 5 or more days of the week.
- Add fiber to your diet by eating more fruits, fresh and raw vegetables, and beans.
- Drink water instead of energy drinks, iced teas, soda, coffee.
- Plan a regular sleep schedule, 7-9 hours is best.

Cholesterol

- Eat more whole grains, fruits, vegetables, fish, and nuts. Drink green tea.
- Limit eating fatty meats, egg yolks, and whole milk products.

Triglycerides

- Eat foods rich in omega 3 fatty acids such as fish, ground flax seed, flaxseed oil, soy products, legumes, walnuts, and dark leafy green vegetables.
- Limit sweets and alcohol.

Blood Glucose

- Add fiber to your diet by eating more fruits, fresh and raw vegetables, and beans.
- Decrease or eliminate sweets & alcohol.
- Eat small portions frequently instead of 3 big meals.
- Record what you eat in a chart or food diary.

Blood Pressure

- Watch your weight, sleep habits, and stress level. This can be very useful for controlling your blood pressure.
- Watch your sodium intake (read labels) and limit sodium intake to 1,500 milligrams (mg) a day or less.

Nicotine Use

- Think about cutting back or quitting smoking.
- Ask nonsmokers or a doctor to provide useful advice, support, and resources (such as free smoking cessation programs in your area).

Alcohol and Substance Use

- Cutting down or eliminating alcohol or substances can be an important step in your overall wellness (physical, social, emotional, and more).
- If you want to learn about quitting and want help, there are free local groups that could help: Alcoholics Anonymous and Narcotics Anonymous.
- People say that talking to someone who's "been there" is very helpful for recovery. 12-step and support groups have saved lives.

Heart Health

• Scheduling a regular check-up with your doctor, healthy eating, regular physical activity, limiting intake of alcohol, and choosing to stop smoking if you are a smoker can help your heart health!

Remember that these strategies overlap. For instance eating healthy, regular physical activity, and quitting smoking are all good for your heart, but also can help lower your BMI, cholesterol, and keep your blood glucose within a normal range. Taking one small step (like cutting back on smoking) can affect many areas of your overall health.

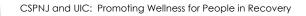
Talking it Over with a Peer: Steps To A Healthier You

	BMI	Cholesterol	Triglycer- ides	Blood Glucose	Blood Pressure
Increase exercise	x	x	x	x	x
Decrease/quit smoking		x			x
Eat more whole grains & veggies	x	x	x	x	
Get enough sleep	x				
Drink less/no alcohol	x	x	x	x	x
Drink less/no soda	x	x	x	x	x





<u>UIC Center on Psychiatric Disability and Co-Occurring Medical Conditions</u>, 2013. http://www.cmhsrp.uic.edu/health/. The Center is funded by <u>NIDRR & CMHS</u>.





Your Journey to Wellness

Health Fair ID#

Body Mass Index

What is BMI?

Your body mass index, or BMI, shows the amount of fat in your body. BMI is calculated using height, weight, and waist measurements. BMI identifies weight levels that could lead to serious health problems.

What is a healthy BMI?

18.5 or lower =	underweight
18.5 to 24.9 =	normal
25.0 to 29.9 =	overweight
30.0 or more =	obese

Remember, BMI is only one way to understand your risk for health problems. Also, BMI varies by gender, age, and race.



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What is my BMI?

Your height:

Your weight:

Your waist:

Your BMI:

Your BMI is considered:

If your BMI is over- or under-weight, please speak with a doctor or other provider. That person will help you learn more about healthy eating and exercise that works for you. A provider also will assess your other health risks.

Cholesterol & Triglycerides

Cholesterol and triglycerides are fat-like substances that your body needs. But, if you have too much of them in your blood, this can lead to heart disease, diabetes, stroke, and other health problems.

There are two kinds of compounds (called lipoproteins) that carry cholesterol in your blood: LDL and HDL. LDL is known as "bad" cholesterol because it can build up in your arteries and block them. HDL is "good" cholesterol because it helps flush it out of your body.

What is healthy total cholesterol?

<200 mg/dL = Healthy
200-239 mg/dL = Borderline high
240 mg/dL and above = High</pre>

What are healthy triglycerides?

<150 mg/dL =	Healthy
150-199 mg/dL =	Borderline high
200 mg/dL and ab	ove = High

What are my results?

Your total cholesterol:

Your LDL:	

Your	
HDL:	

Your total cholesterol tested as:

Healthy	Borderline High	High
	-	

Your triglycerides:

	Healthy Borderline high High
--	------------------------------------

If your cholesterol and/or triglycerides are elevated, we suggest you get them retested at a doctor's office. High cholesterol or triglycerides can be a sign of health problems that can be treated with diet, exercise, and/or medicine. Page 3

Blood Glucose (Blood Sugar)

Understanding Blood Sugar & Diabetes

Most of the food we eat is turned into glucose, or sugar, that fuels our body. The pancreas makes a hormone called insulin to help glucose get into our cells. When you have diabetes, your body either doesn't make enough insulin or can't use its own insulin well. This causes sugar to build up in the blood. Diabetes can cause serious health problems like heart disease, blindness, and kidney failure.

Testing for Blood

average blood sugar level over the past 2 to 3 months. This lets you know how well your blood

sugar is being controlled over

An A1C test shows your



What are my results?

Your A1C:

Your A1C level tested as:

NORMAL	PRE- DIABETES	DIABETES
--------	------------------	----------

If your A1C is in the range for pre-diabetes or diabetes, we urge you to get re-tested by a doctor right away.

Don't delay. Diabetes is a serious illness that can respond well to changes in diet and daily treatment.

A1C results are interpreted as follows:

4 to 5.6% = Balanced A1C 5.7 to 6.4% = Pre-diabetes A1C 6.5% or higher = Diabetes A1C

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Sugar

time.

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Blood Pressure Why Does Blood Pressure Matter?

Blood pressure is needed to move the blood through the body. Blood pressure goes up and down throughout the day. When it goes up and stays high, it's called high blood pressure. When this happens, your heart has to pump harder than it should to move blood around your body. The medical term for high blood pressure is hypertension.

High blood pressure increases risk for heart attack, stroke, kidney problems, and blindness. You can have high blood pressure and not know it. This is why it's important to track your blood pressure.

What is healthy blood pressure?

Blood pressure (BP) is often measured with an inflatable cuff around the arm. It is given in two numbers showing different measurements of blood pumping in the vessels. BP results are interpreted like this:

Normal = 120/80

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Pre-hypertensive =
120-139/80-89
High blood pressure =
139/89+
```

What is my BP?

Your BP:

Second BP reading (taken only if your first one was high):

Today, your BP tested as:

Normal	Elevated	High

If your BP is elevated or high, please get re-tested by a doctor soon. High blood pressure can be controlled with diet, exercise, and/or medicine. Page 5



Alcohol and Substance Use

The effects of alcohol and substance use

People have alcohol or substance use problems when they drink or use drugs, even when it interferes with their work, parenting, physical health, social life, or emotional wellbeing. Substance abuse means a person can't control his or her use of a drug or alcohol. Substance dependence includes abuse, along with needing more of the drug or alcohol to get the same effect.

Alcohol and substance abuse and dependence are leading causes of preventable disease, disability, and death in our country.

The good news is that people can recover from substance abuse. There are treatments and self-help groups that help people conquer alcohol and drug addiction.

What is my risk?

There are two surveys that identify level of risk for substance and alcohol abuse. The first survey, called DAST, assesses substance abuse risk like this:

0 =	no risk
1-2 =	low risk
3-5 =	moderate risk
6+ =	higher risk

Your substance risk tested as:

0	1	2	3	4	5	6	7	8	9	10
No	Lo	SW	Мо	Moderate		Hi	gh	Ver	y⊦	ligh

The second survey, called the AUDIT-C, assesses alcohol abuse risk. Your score was:

Your alcohol risk tested as:

No risk =	1	
At risk =	2	

One of the first steps in recovery is identifying whether you are at risk or actively abusing substances. This can be very hard to admit, but help is available.

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Nicotine Use The effects of smoking on health

Cigarette smoking is the number one cause of preventable disease and death worldwide. Smoking harms nearly every organ in the body. It's a main cause of lung cancer and chronic obstructive pulmonary disease. It also can lead to heart disease, stroke, and other cancers. Second-hand cigarette smoke also causes preventable illnesses and deaths among non-smokers.

Dependence on Nicotine

Smokers usually become physically addicted to the nicotine in tobacco. They also associate smoking with social activities and with feeling less stressed. This can make it very hard to quit.

Number of cigarettes smoked each day:

Do you smoke?

YES NO

People are most successful in quitting smoking when they use special medication and get support/treatment. One of the first steps to quitting is knowing your level of dependence on nicotine.

One survey, called the Fagerstrom Test, assesses level of nicotine dependence as follows:

0-2 =	very low dependence
3-4 =	low dependence
5 =	medium dependence
6-7 =	high dependence
8-10 =	very high dependence

What is my result?

Your dependence tested as:



If you tested with medium to very high dependence, please discuss this result with your doctor and other providers. You may need more than one attempt to quit, but you can do it with a realistic treatment plan.

Heart Health The importance of heart health

The heart is one of the most important organs in our bodies. Unfortunately, many diseases affect the condition and functioning of the heart, including high cholesterol, high blood pressure, and diabetes. It's important to know that heart disease is the #1 killer of American men and women. Also known as cardiovascular disease, conditions of the heart can include abnormal heart rhythms, narrowing of the arteries, heart valve disease. and heart attack/failure.

The good news is that people can manage heart disease by learning more about it, finding the best treatments for them, and becoming an active partner in their own care. They can also maintain a healthier lifestyle to reduce strain on their hearts. The first step to better health is understanding your own risks and needs.

How healthy is my heart?

There are many tests to identify risks to your heart. One survey, called the Framingham Cardiac Risk Score, shows your risk as a percentage, **based on your gender, age, and health indicators** like cholesterol and smoking.

Your heart risk tested as:

Risk among others like you:

Compared to this, your risk is:

LOWER SAME HIGHER

If your results show you have heart risk, please talk with a doctor immediately. Heart disease can be managed with proper treatment, diet, exercise, and quitting smoking.

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UIC Center on Psychiatric Disability and Co-Occurring Medical Conditions

Health Resources

<u>http://www.cmhsrp.uic.edu/health/</u> Center on Psychiatric Disability & Co-Occurring Medical Conditions

http://www.cdc.gov/ Centers for Disease Control and Prevention

http://www.webmd.com/ WebMD

http://www.heart.org/HEARTORG/ American Heart Association

http://www.diabetes.org/ American Diabetes Association

http://www.lungusa.org/ American Lung Association

http://www.mayoclinic.com/health/HealthyLivingIndex/ HealthyLivingIndex Healthy Living, Mayo Clinic

http://www.brighamandwomens.org/default.aspx/ Brigham and Women's Hospital

5 Steps to a Healthier You

Congratulations! Regardless of your test results, today you took a step on the road to a healthier you.

Here are some other steps you can take on your wellness journey:

1. Eat a diet rich in fruits, vegetables, whole grains, and low-fat dairy products. Limit saturated fat and trans fat in what you eat. Add beans, other low-fat sources of protein, and fish that is high in omega-3 to your weekly meals.

2. Exercise for 30 minutes at least 3 days each week. Many people find it easier to exercise regularly with their friends/peers. Try starting a walking club today!

3. Do at least one thing each day that makes you happy or brings you peace.



4. Drink 6-8 glasses of still water every day.

5. Get regular health screenings, especially for glucose, cholesterol, and blood pressure. If any of these are out of balance, it could be a sign of health problems.

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Record of Health Tests

If you wish, bring your Health Passport when you visit your doctor. You can put your health test results here.

DATE	TEST	<u>RESULTS</u>

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University of Illinois at Chicago Center on Psychiatric Disability and Co-Occurring Medical Conditions 1601 West Taylor Street, M/C 912, Chicago, IL 60612 (V) 312-355-1696 (F) 312-355-4189 http://www.cmhsrp.uic.edu/health/ Judith A. Cook, PhD, Director

This health screening event does not replace standard medical care. The event's sponsors, staff, volunteers, and institutions are not responsible for any of your test results nor for the consequences of any health conditions you may have or develop.

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Scales for @Z/gmiY F]g_gand Nicotine Use Statiobg

The following 3 scales are in the public domain, and thus, may be administered for free at a not-for-profit health fair. However, if any of the 3 scales is to be used as part of a for-profit endeavor, you must first contact the scale creators and/or publishers to obtain permission.

The Alcohol Use Disorders Identification Test (AUDIT-C)

The Alcohol Use Disorders Identification Test (AUDIT-C) is an alcohol screen that can help identify people who have active alcohol use disorders (including alcohol abuse or dependence), or are at risk due to drinking.

Health Screener, state the following to the participant:

I'm going to ask you some questions about any alcohol use you may have had in the past 12 months. That would be since last (name the month and year, 12 months ago). Some of the questions may seem intrusive, but they're just part of the health screening process today. You do not have to answer any questions you don't wish to. You also can point to your answers on this sheet, if you don't want to say them out loud. Please know that I simply want to help you figure out any health risks you may have. I won't judge or lecture you. All of your answers will be kept strictly confidential. I will shred anything I write on before you leave this station. So, let's get started.

AUDIT-C

The Alcohol Use Disorders Identification Test is a publication of the World Health Organization, 1990

Q1: How often did you have a drink containing alcohol in the past year?					
Answer	Points				
Never	0				
Monthly or less	1				
Two to four times a month	2				
Two to three times a week	3				
Four or more times a week	4				
Q2: How many drinks did you have on a typical day when you were drinking in the past year?					
Answer	Points				
Answer None, I do not drink	Points 0				
None, I do not drink	0				
None, I do not drink 1 or 2	0 0				
None, I do not drink 1 or 2 3 or 4	0 0 1				

Q3: How often did you have six or more drinks on one occasion in the past year?			
Answer	Points		
Never	0		
Less than monthly	1		
Monthly	2		
Weekly	3		
Daily or almost daily	4		
Total score of 3 items:			

The AUDIT-C is scored on a scale of 0-12 (scores of 0 reflect no alcohol use). Generally, the higher the AUDIT-C score, the more likely it is that the person's drinking is affecting his/her health and safety.

> In men, a score of 4 or more is considered at risk.

> In women, a score of 3 or more is considered at risk.

Scoring the Alcohol Use Disorders Identification Test (AUDIT-C)

Scoring:

After asking the 3 items, add up the points you circled for each item. A score of 0 reflects no alcohol use at all. A score of 12 reflects what is considered to be heavy daily use of alcohol.

The higher the AUDIT-C score, the more likely it is that the person's drinking is affecting his/her health and safety.

Level of alcohol dependence is interpreted as follows:

<u>No risk</u>:

Total score of 0-2 for women Total score of 0-3 for men

<u>At risk</u>:

Total score of 3-12 for women Total score of 4-12 for men

Follow-up:

If the person scores at 4 or above, let them know that peers and professionals are available at the fair to talk about ways to reduce their dependence, if they are ready to do so. It also is important to remind individuals about the long-term risks of alcohol, such as damage to the liver. It also is important to remind participants that women and men are affected differently by heavy use of alcohol, so they may wish to talk with their supporters and/or providers about these gender-based risks. People do not have to quit all at once, and can work on reducing dependence over time for better health and safety.

Drug Abuse Screening Test (DAST-10)*

Health screener, please note that in the following questions drug use means:

- 1. The use of prescription drugs or over-the-counter medications in excess of or contrary to the directions for safe use;
- 2. Any non-medical use of drugs, which is also known as recreational drug use.

Health Screener, state the following to the participant:

I'm going to ask you some questions about any drug use you may have had in the past 12 months. That would be since last (name the month and year, 12 months ago). In talking about drug use, we do NOT include any alcohol or tobacco you may have used. But we DO include prescription or over-the-counter medicines that you may have used in excess, or used differently from what your doctor or the package said is safe for that medicine.

Some of the questions may seem intrusive, but they're just part of the health screening process today. You do not have to answer any questions you don't wish to. You also can point to "yes" or "no" on this sheet, if you don't want to answer out loud. Please know that I simply want to help you figure out any health risks you may have. I won't judge or lecture you. All of your answers will be kept strictly confidential. I will shred anything I write on before you leave this station. So, let's get started.

	DAST Question	Circle person's response		Score**	
1.	In the past 12 months, have you used drugs other than those required for medical reasons?		No		
2.	Do you abuse more than one drug at a time?	Yes	No		
3.	Are you unable to stop using drugs when you want to?	Yes	No		
4.	In the past 12 months, have you ever had blackouts or flashbacks as a result of drug use?	Yes	No		
5.	Do you ever feel bad or guilty about your drug use?	Yes	No		
6.	Does your spouse or partner (or parents) ever complain about your involvement with drugs?	Yes	No		
7.	In the past 12 months, have you neglected your family because of your use of drugs?	Yes	No		
8.	In the past 12 months, have you engaged in illegal activities in order to obtain drugs?	Yes	No		
9.	Have you ever experienced withdrawal symptoms (meaning you felt sick) when you stopped taking drugs?	Yes	No		
10.	In the past 12 months, have you had medical problems as a result of your drug use, such as memory loss, hepatitis, convulsions, or bleeding?	Yes	No		
		Tot	al Score:		

*Health screener: Score each "Yes" response as a 1 and each "No" response as a 0.

**Skinner, H.A. (1982). The Drug Abuse Screening Test. Addictive Behaviors, 7, 363-371.

Scoring the Drug Abuse Screening Test (DAST-10)

Scoring:

Each "yes" response = 1. Each "no" response = 0.

After asking all 10 items, add up the answers for a total score. One convention is to score any item a person refuses to answer as a "yes," scoring it with a 1.

The higher the DAST-10 score, the more likely it is that the person's drug use is affecting his/her health and safety.

Level of drug dependence is interpreted as follows:

0 = No problems reported
1-2 = Low level dependence
3-5 = Moderate level dependence
6 + = Substantial level dependence

Follow-up:

If the person scores at 5 or above, let them know that peers and professionals are available at the fair to talk about ways to reduce their dependence, if they are ready to do so. It also is important to remind individuals about the long-term risks of drug use or abuse, such as memory loss, hepatitis, or HIV infection. People do not have to quit all at once, and can work on reducing dependence over time for better health and safety.

Fagerstrom Test for Nicotine Dependence

Total Cigarettes Smoked Daily:

Health Screener, state the following to the participant, if she or he is a smoker:

I'm going to ask you some questions about your smoking. Some of the questions may seem intrusive, but they're just part of the health screening process today. You do not have to answer any questions you don't wish to. You also can point to your answers on this sheet, if you don't want to answer out loud. Please know that I simply want to help you figure out any health risks you may have. I won't judge or lecture you. All of your answers will be kept strictly confidential. I will shred anything I write on before you leave this station. So, let's get started.

		a. Within 5 minutes	3 pts
1.	How soon after you wake up do you smoke your first cigarette?	b. 6-30 minutes	2 pts
		c. 31-60 minutes	1 pts
		d. After 60 minutes	0 pts
2.	Do you find it difficult to refrain from smoking in places where it is	a. Yes	1 pts
	forbidden, e.g., church, at the library, in the movies, etc.?	b. No	0 pts
		a. The first one in	1 pts
3.	Which cigarette would you hate most to give up?	the morning	
		b. Any other one	0 pts
		a. 10 or less	0 pts
4.	How many cigarettes per day do you smoke?	b. 11 – 20	1 pts
		c. 21 – 30	2 pts
		d. 31 or more	3 pts
5.	Do you smoke more frequently during the first hours after awakening	a. Yes	1 pts
	than during the rest of the day?	b. No	0 pts
6.	Do you smoke if you are so ill that you are bed most of the day?	a. Yes	1 pts
		b. No	0 pts
		TOTAL	

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Scoring the Fagerstrom Test for Nicotine Dependence

Scoring:

Responses for each of the six items are scored using the following points:

- 1. How soon after you wake up do you smoke your first cigarette?
 - less than 5 minutes: **3 points**
 - 5 to 30 minutes: 2 points
 - 31 to 60 minutes: 1 point
- 2. Do you find it difficult to refrain from smoking in places where it is forbidden (e.g., in church, at the library, cinema, etc.)?
 - Yes = 1 point
 - No = 0 points
- 3. Which cigarette would you hate most to give up?
 - The first in the morning: **1 point**
 - Any other: **0 points**
- 4. How many cigarettes a day do you smoke?
 - more than 30 per day: **3 points**
 - 21 to 30 per day: 2 points
 - 11 to 20 per day: **1 point**
- 5. Do you smoke more frequently during the first hours after waking than during the rest of the day?
 - Yes = 1 point
 - No = 0 points
- 6. Do you smoke if you are so ill that you are in bed most of the day?
 - Yes = 1 point
 - No = 0 points

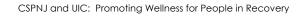
Add up the total points. A total of 0 is interpreted as the lowest level of dependence. A total of 10 is interpreted as the highest level of dependence.

Level of dependence interpreted as:

0-2 = Very low dependence
3-4 = Low dependence
5 = Medium dependence
6-7 = High dependence
8-10 = Very high dependence

Follow-up:

If the person scores at 5 or above, let them know that peers and professionals are available at the fair to talk about ways to reduce their dependence, if they are ready to do so. It also is an excellent opportunity to mention that starting by reducing the number of cigarettes smoked per day (versus quitting "cold turkey") may reduce the harmful effects of smoking in the short-term, while the person continues to work on quitting.



Sample Satisfaction Survey

Health Fair Satisfaction Survey

Please take a few moments to complete this survey. Your answers will help us offer the best health fairs to you and your peers. All of your answers are confidential. Thank you!

	Choose one answer:	Strongly Agree	Agree	No Comment	Disagree	Strongly Disagree
1.	The health fair was well-run.					
2.	The staff and volunteers were knowledgeable.					
3.	The staff and volunteers were helpful.					
4.	The information I received was useful.					
5.	This health fair was worth my time.					
6.	I would like to see more health fairs offered to me and my peers.					
7.	I would like to learn how to be a volunteer for a health fair like this.					

8. Were there any tests or information that you'd recommend be added to the health fair?

9. What do you plan to do with the health information you learned today?

10. Do you have any other suggestions or comments for us?