With thanks to our funders

- U.S. Department of Health & Human Services, Administration on Community Living, National Institute on Disability, Independent Living, & Rehabilitation Research
- Substance Abuse & Mental Health Services Administration, Center for Mental Health Services
- Grant # 90RT5012-01-00
- The views expressed in this presentation do not reflect the policy or position of any Federal agency.
Community Health Screening
Provides Knowledge & Promotes Health
What is Health Screening?

✓ Evaluation of health status & potential
✓ Looking for current disease or greater-than-normal risk
✓ Can include
  • personal & family health history, physical exam, lab tests, radiological exam
  • can be followed by counseling, education, referral, or further testing

http://medical-dictionary.thefreedictionary.com/
Common Health Screening Tests

- History of Known Illnesses
- Body Mass Index
  - Height, weight
- Diabetes
- Cholesterol & Triglycerides
- Heart Health
- Smoking & Use of Nicotine
- Use of Alcohol & Illicit Drugs

You can choose the # & which ones to do
Value of Large Group Health Screening

- Provides important epidemiologic data
- Can positively affect health beliefs & perceptions, including feelings of control over one’s health (self-efficacy)
- Serves as a “cue to action” by engaging people in health promotion efforts
- Can lead to better linkage to collateral treatment and services
Health Passport

- given to all participants upon entry to Fair
- place to record screening results with brief explanations of their meaning
- can be shared later with medical & MH service providers & supporters

Free download: http://www.cmhsrp.uic.edu/health/index.asp
Possible Health Fair Locations:
School, Gym, Church Auditorium, Elk’s Club
At this station, staff first measure the person’s height using a wall chart. Next, they are asked to step on the scale to measure their weight. These are used in a formula to calculate their BMI.
Station 2: A1C Diabetes Test

At this station, a trained worker takes a small drop of blood from a person’s finger & places it into a machine that analyzes it to produce the person’s blood glucose level over the past 2-3 months called A1C.
At this station, a trained worker takes a small drop of blood from a person’s finger & places it into a machine that analyzes it to determine the person’s non-fasting cholesterol (HDL & LDL) & triglycerides levels.
Station 4: Blood Pressure Reading

At this station, blood pressure is measured using a blood pressure cuff that is operated electronically.
At this station for smokers only, the person’s level of dependence on nicotine is assessed using the Fagerstrom Test for Nicotine Dependence.
At this station risk for alcohol abuse or dependence is assessed using the Alcohol Use Disorders Identification Test - Consumption (AUDIT-C) screening instrument.
At this station risk for substance abuse and dependence is assessed using the Drug Abuse Screening Test (DAST)
The person’s estimated 10-year risk of coronary heart disease is determined using the Framingham risk model based on their age, sex, systolic blood pressure, total and HDL cholesterol, diabetes mellitus, and current smoking status.
Station 9: Review Results with Peer Health Specialist
Essential Ingredient #1
Peer Volunteers from the Local Agency
Essential Ingredient #2
Freebies, Demos, Services
Preliminary Findings

- Based on 4 events
- Participants from sites in NJ, IL, MD & GA
- Demographics (N=457)
  - 49% female
  - 80% high school education or greater
  - 31% working
- 49% White; 39% Black; 4% Multi-Racial; 2% Asian; <1% American Indian/Alaskan Native; 6% Other
- 7% Hispanic

Cook et al. (2012). UIC NRTC Health Screening Study
# Health Risks Detected

<table>
<thead>
<tr>
<th>Health Fair Participants</th>
<th>U.S. Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>82% obese/overweight</td>
<td>69%</td>
</tr>
<tr>
<td>7% high cholesterol</td>
<td>13%</td>
</tr>
<tr>
<td>14% A1C diabetes</td>
<td>2%</td>
</tr>
<tr>
<td>32% high blood pressure</td>
<td>29%</td>
</tr>
<tr>
<td>62% dependent on nicotine</td>
<td>57%</td>
</tr>
<tr>
<td>17% at risk - alcohol dependence</td>
<td>7%</td>
</tr>
<tr>
<td>11% at risk - drug dependence</td>
<td>3%</td>
</tr>
<tr>
<td>10% high risk - heart attack</td>
<td>3%</td>
</tr>
</tbody>
</table>

*Cook, Razzano et al. (2015). Health Risks and Changes in Self-Efficacy Following Community Health Screening of Adults with Serious Mental Illnesses. PLoSOne.*
Group Activity: Design Your Own Health Fair
Health Fair Action Plan

1. Where will you hold your health fair?
2. What is your target audience & how many people will you plan to serve?
3. What health risks will you assess & what tests will you administer?
4. List each station & its title. Remember, there will be more stations than tests.
5. Which collaborators will you involve? (nurses, med students, residents, MDs, social workers)
6. What recruitment strategies will you use & how will people travel to the Health Fair site?
7. Calculate a simple budget for your health fair including the items below.
   $______ test kits     $______ transportation costs
   $______ supplies      $______ equipment (scale, BP cuff)
   $______ water/snacks  $______ space rental

8. What displays & "freebie" activities will you try to arrange?
9. How will you use the results?
After the Fair: Create A Health Community

Potential health information activities

• Expose people to assets with which they may have limited experience
  • Wii Fit, on-line fitness communities, simple meal plans
• Invite local nurses, doctors, blood banks, pharmacists, etc. to present at luncheons
• Collaborate with wellness & health providers for on-site demonstrations
  • Massage, Reiki, Yoga, Pilates, etc.
• Celebrate national Health Months (see website: http://healthfinder.gov/nho/)
Keep it Personalized

- Target health education to personal needs
- Provide screening & testing based on individual health risks & vulnerabilities
- Include peer health education & peer support
  
  Peers who have shared experiences “walk the walk”

- Co-locate/integrate physical health initiatives at mental health centers whenever possible
- Include family members in health education, especially around healthy eating & exercise at home
Do it at the Individual’s Pace

- Assess existing knowledge & strengths
- Go slowly, work at the individual’s pace
- Don’t educate during a crisis or when the person is distressed
- Simplify information & present it in small pieces
- Repeat the information
- Keep a persistent focus on physical health
More Resources to Explore

Manual on How to Organize a Health Fair

Nutrition & Exercise for Wellness & Recovery
www.cmhsrp.uic.edu/download/WeightWellnessLeaderManual.pdf

Whole Health Action Management
http://www.integration.samhsa.gov/health-wellness/wham

Interactive Diabetes Education Toolkit
http://www.cmhsrp.uic.edu/health/diabetes-library-home.asp