



Promoting Wellness for People in Mental Health Recovery

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

Prepared by: Collaborative Support Programs of New Jersey
UIC Center on Psychiatric Disability and Co-Occurring Medical Conditions



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University of Illinois at Chicago Center on Psychiatric Disability and Co-Occurring
Medical Conditions and Collaborative Support Programs of New Jersey

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Contributing authors:

Margaret Swarbrick, PhD
Jessica A. Jonikas, MA
Jennifer Cohn, BS, CPRP
Jay Yudof, MS, CPRP
Christina Serrano, BS, CPRP
Judith A. Cook, Ph.D.

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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 people in recovery are managing serious medical conditions that can be improved with key information, treatment options, and support.

- People in recovery may have less access to medical care and health resources as compared with the general population.
- Health fairs provide key information about personal health, including body mass index, blood pressure, cholesterol, and blood sugar levels.
- Health fairs are a great way to help people become aware of and make choices for a satisfying lifestyle centered on wellness.
- Health fairs teach about risk behaviors and factors under people's own control, such as how much they move their bodies, what they eat, and habits like sleeping, smoking, or alcohol use. By learning about their health status and risks, people can make more informed choices about next steps.
- Health fairs teach about prevention in order to avoid any new medical conditions.

What are the Benefits of a Health Fair?

Access to health screenings and tests are the key benefit of attending a health fair. Additionally, fairs include education, support, training, and tangible resources. Health fairs also can include information tables, displays by various health providers and selfhelp groups, blood collection drives, cooking demonstrations, and even exercise classes like Zumba 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 attendee might learn the impact of smoking on life expectancy, and then, receive information on QuitLines, nicotine replacement, 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, gym memberships, gift cards) and pamphlets listing local clinics, farmers' markets, health support groups, and so forth.

A Wellness Partnership

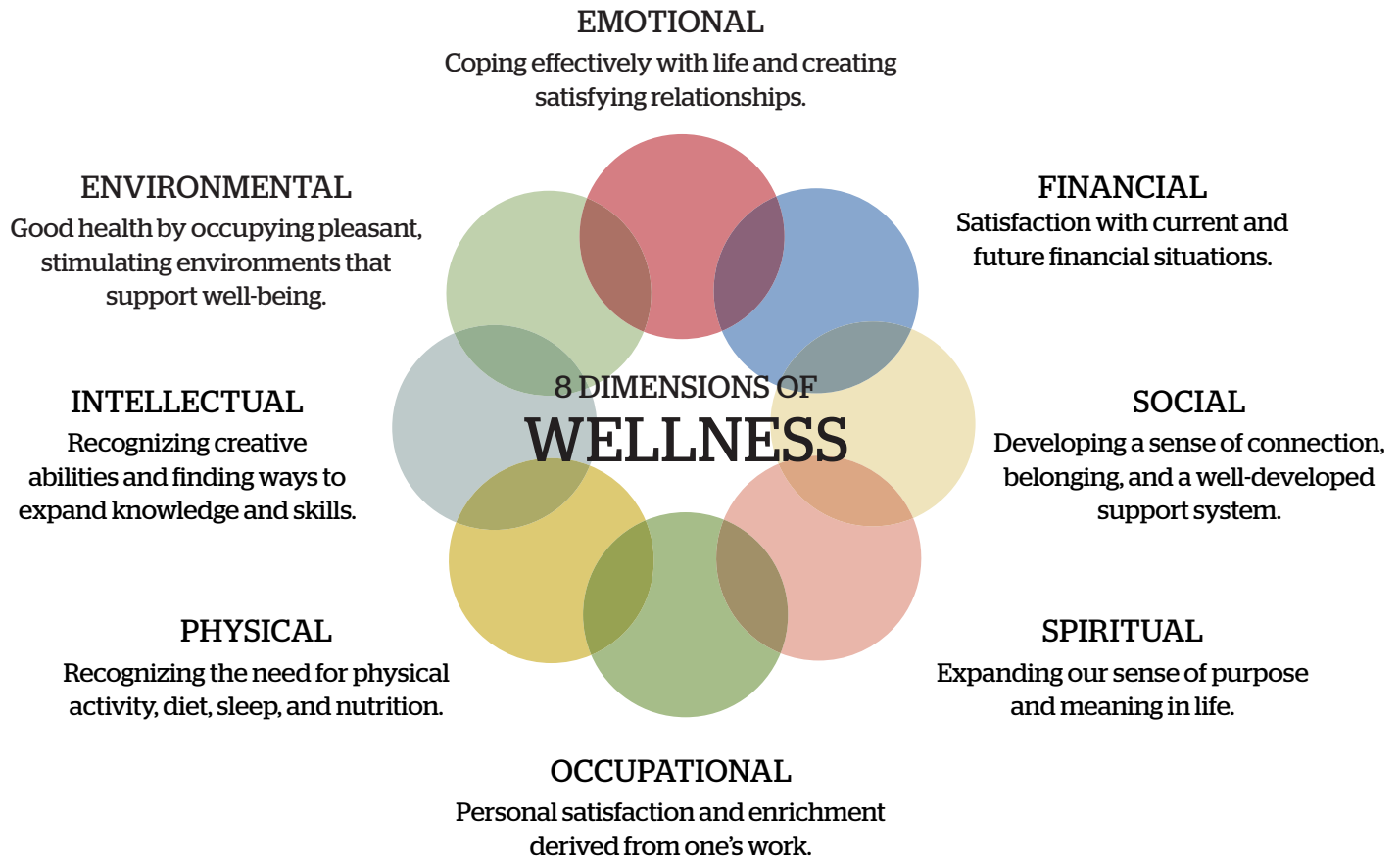
The authors of this guidebook represent a collaboration between the **University of Illinois at Chicago Center on Psychiatric Disability and Co-Occurring Medical Conditions** and the peer partnership program, Collaborative Support Programs of New Jersey (CSPNJ). Our shared vision and commitment to wellness and recovery for people served by the public mental health system led to a partnership in which we hosted a series of health fairs in 4 different states attracting over 480 people. Our goal was to take action to address the health issues that peers are facing as they manage their physical and emotional health. CSPNJ had initially started conducting health screenings and fairs in various settings throughout the state of New Jersey (including self-help centers, community mental health centers, community events, and peer conferences). CSPNJ also conducted these events at national consumer conferences in Nebraska, Oregon, California, and Florida. CSPNJ has helped local peer-operated groups and agencies, as well as community-based psychiatric rehabilitation programs across the country, to plan and conduct health fairs throughout the year as well as during SAMHSA's Wellness Week.

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, and offer insights so you can plan a smooth and beneficial 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 self-defined and satisfying lifestyle.*
- Many people make positive changes after receiving their screening results, peer counseling, and support at health fairs.
- Therefore, health fairs can help people become aware of and make choices for a self-defined and satisfying lifestyle.

*Swarbrick, M. (March 1997). A wellness model for clients. *Mental Health Special Interest Section Quarterly*, 20, 1-4.



Getting Started

As you go through this guidebook, you'll see that you need to organize quite a few people, in addition to obtaining the health testing kits, supplies, and 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 timelines outline the main tasks to accomplish for a successful fair, starting approximately 6-12 months out from 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 a light load."

Good luck!

As with any event where everything comes together for a short period of time, planning is critical. Throughout this guidebook, we've provided the nuts and bolts of running a fair, along with many 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 for how to lay-out the stations and booths, medical fact sheets, and two health passports 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 be 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 a health fair is the desire to improve wellness among people living with mental and substance use disorders, since they experience more medical problems than people in the general population. The most common medical problems are preventable conditions including cardiovascular, respiratory, metabolic, and infectious diseases. Other common health conditions 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.

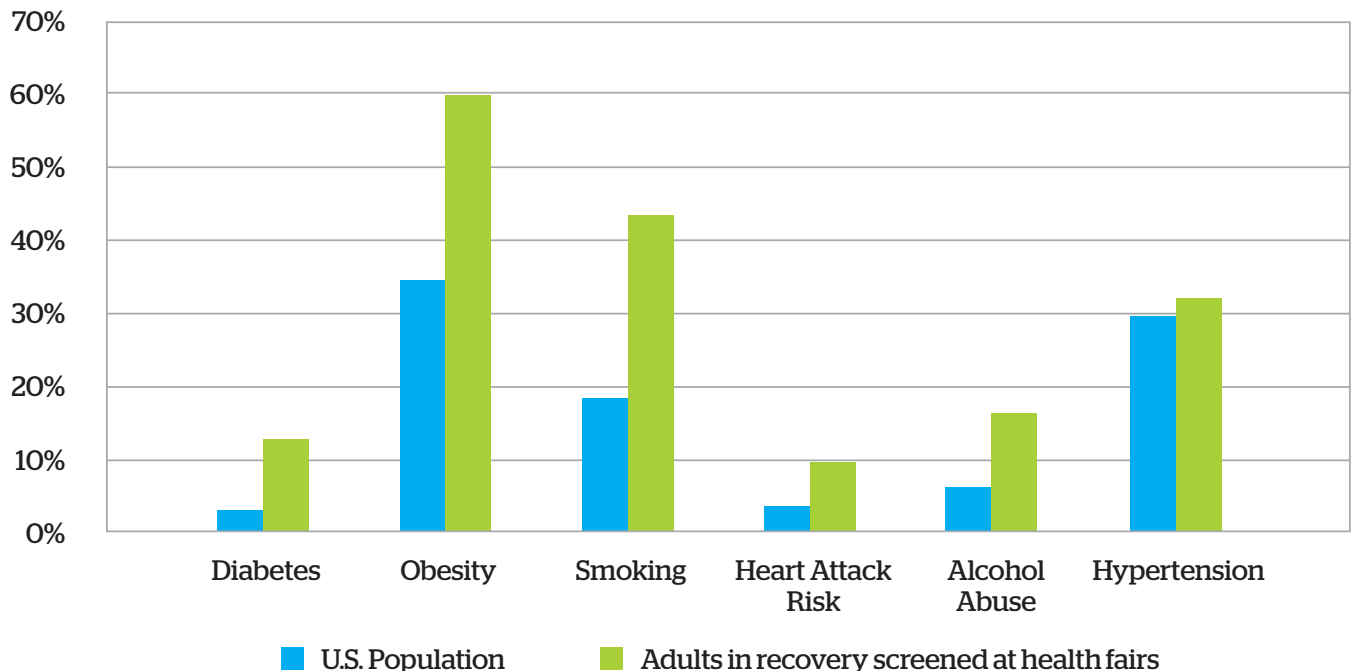
A Public Health Crisis

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 are reducing people's quality of life and are resulting 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 need nursing home care until their later 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



Indeed, our concerns were justified 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 (http://www.cmhsrp.uic.edu/download/research_extravaganza_2012.JACook.APHA_2012_Health_Comorbidities.pdf).

Our participants screened as having much greater rates of diabetes, obesity, smoking, heart attack risk, alcohol abuse, 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 ask how health fairs can really make a difference in the face of such odds. Research shows that health fairs are especially useful in helping people become aware of their medical conditions or health status and their health 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 (Cook et al., 2015; Swarbrick et al., 2013).

Getting the Conversation Started

When planning our health fairs, we hoped to promote wellness, prevent illness, and help those already living with medical issues learn how to better manage them. We hoped to get the conversation 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 scary 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.

A lot 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 of the health disparity our peers experience comes from things under their own control, such as changes in health habits and routines they can make to feel better physically, emotionally, and socially. We wanted to help people start "connecting the dots" between how they were feeling, their health habits, and their physical health status.

Health Fairs Help!

Benefits include:

- Awareness of risk factors for developing health problems
- Education on risk factors for developing health problems
- Screening to identify whether health problems are present (such as high blood pressure or diabetes)
- Coaching about newly identified health problems, including what can be done about them
- Strategies to prevent the development of new health problems

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

1. People were lining up, sometimes overwhelming the plans we had made to hold small fairs. People wanted to know their blood pressures, their blood sugars, their body mass indexes, and other health indicators.
2. Many 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 something that many people wanted and directly benefitted from.

Additionally, health fairs not only benefit the participants, but also can have an impact upon the agency or community as a whole. 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;
- define and perfect health fair procedures that can work within community settings; and
- 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. Tyrone was surprised to learn that, even though he felt physically fit, the combination of smoking and poor diet was placing him at risk for high cholesterol and poorer 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 take off 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 you may want to hold a health fair. You may want to use the information gathered to add services or to influence state policy. Your program or state may be implementing a health improvement initiative, and thus, needs information about the health of people served to learn whether or not the initiative is working. 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 also 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 (and their staff!) 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 has been avoiding 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 or sugared beverages
- An attendee cuts down on or quits smoking
- Someone reduces or quits drinking alcohol or energy drinks

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 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 uncovered from 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?

1

2

3

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 different tests and resources than would a health fair for teenagers. In this chapter, we discuss how to go about choosing 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 is your Target Group?

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 may face in planning a health fair is that you are unlikely to reach everyone

you would like to reach, unless you have a decent-sized budget, work with your city's public health department, or have a benefactor to underwrite the costs. If it's large, reaching an entire organization or whole community can be time intensive and costly. You are more likely to be able 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 then grow in the future.

Whom do You Most Want to Reach?

1

2

Choosing Advertising Strategies

Whom you want to reach will influence how best to reach them. If your target group 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 go around to 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 you are collaborating with other organizations and welcoming their members, then people from each organization will need to be involved in making sure that the right advertising materials and messages get out to 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?

1

2

3

4

Designing Your Advertising Materials

Advertising materials need to be clean and simple, but eye-catching. Many people do not want to read a lot of words. Pictures are helpful in marketing materials, but need to be chosen carefully. For example, photographs that suggest people are ill, vulnerable, or at high risk, may turn off individuals who don't view themselves that way, in spite of whatever medical conditions they are managing. Pictures that show needles or people getting blood drawn may scare away those who are squeamish about having blood taken.

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

Marketing Tip

Don't forget that word-of-mouth is an important marketing strategy, so try to ensure that your planning committee has people throughout the organization who can work with friends, colleagues, local businesses, and other community stakeholders to build interest and enthusiasm.

Sequence Your Approach

You will find it useful to sequence your marketing materials to build interest. With this strategy, you would 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.

What to Put in Your Flyer

- 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 do people need to prepare, if at all. For example, do any tests require fasting?
- Whom to call with questions or a need 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 Conference

If your health fair is to be located at a conference (such as a statewide peer conference), then your marketing approach best includes:

- Mention of the fair in the conference announcement and confirmation packet
- Posters in the registration area
- Features in opening remarks from the podium

- 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 whether or not to attend 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 up 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 go near a computer or smartphone in a typical month. If you use varied ways to reach people, you are more likely to get 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 based on who you feel could benefit. Advertising materials should be simple, easy to read, and eye-catching and contain important details. 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?

1

2

1

2

Chapter 4 - Preparing Attendees for Your Fair

Your health fair will be most effective, of course, if everyone you're hoping for shows up! But, equally important to running a smooth fair is helping attendees to be fully prepared for your event. Just as happens when one visits the doctor, people need to be prepared for what to expect as health fair attendees. 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 either of these will be needed at your fair, make sure that people know what is required before arriving. 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 they are being treated for them, 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 they can have certain beverages 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, then 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 at least 1-2 glasses of water before attending. Make sure the location you have chosen has adequate bathrooms. Purchase only latex-free gloves and bandages.



Transportation Needs

Practical preparation also includes helping people identify their transportation needs to and from your health fair. To avoid mishaps on the day of the fair, it's best to help people think in advance about where the fair will be located and how they plan to get there. 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 also may include helping parents (or grandparents) arrange for child care during the time of the health fair. Some fairs make a small corner 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?

Additionally, if many of the people in your target group are employed part- or full-time, you'll want to consider offering your fair in the late day and evening, or on a weekend, to accommodate as many people as possible.

What Practical Needs do You Anticipate for Your Group?

- 1 _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____
- 6 _____

Emotional Preparation

Information about our health can be emotional, especially if our health is not optimal, we're at risk for diseases or conditions, or if we have family histories of health issues. Some people fear being judged for their poor health or learning that their health is poor. Some may have fears of the discomfort of having blood drawn. Thus, for many people, preparation for a health fair takes place on an emotional level as well a practical one. Fears can be gently addressed by letting everyone know when first talking about the fair 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 share that nobody will be lectured, but everyone will be offered support to understand their results and any next steps they might choose to take. It will be a safe learning environment. You also can explain exactly how the blood will be drawn, which is typically via a small prick to the finger that feels much like a paper cut. It will sting a bit, but it won't be lasting because the amount of blood needed is very small to determine blood sugar and blood

cholesterol. If you are planning to take a larger amount of blood for any tests, however, then explain how that will feel and the supports that will be available to help people manage their discomfort.

Some people may be very private and will not want others aware of their health issues. Tests involving AIDS or other sexually transmitted diseases, if you include them, can increase these fears. 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 numbers and not their names, and that confidential means that their results cannot be linked to their names and 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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5

6

7

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, especially if there will be free give-aways, free 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, as sign-up times become “fleshed out” during the pre-registration process, the 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 from overcrowding.

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.

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 to the event, or prepare their skin/bodies in any manner for testing. Without pre-registration, 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
- On-site peers and professionals will answer your questions and give support
- Your privacy is guaranteed
- All tests are strictly voluntary and confidential
- Freebies and give-aways are available

Remember to Remind

Remind your participants both about the event and anything else they need to do before the fair. Reminders may include the following.

- Calls to participants already registered or to agency leaders to encourage attendance.
- Various written or oral advertisements before and after people sign up. This includes flyers, emails, public service announcements, word-of-mouth, etc.
- Information about how to prepare for the fair. This can include prepping for fasting, paperwork, or securing transportation.

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! Your health fair will be most effective if all of your expected attendees show up, know what to expect, and know what they need to do to prepare (if anything).

Chapter 5 - Choosing the Venue for Your Fair

Deciding when and where to have your fair involves a lot of “interacting 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 and schedule for 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, time, staff, and supplies.

One key step is finding a location that people can get to easily, and that has appropriately sized, accessible, and friendly 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, whether you need extra room for people waiting to enter the fair, if there’s a quiet place for staff and volunteers to take a break, and whether the venue will lend you needed tables, chairs, and a refrigerator (or if they will let you bring them in). Let’s look at some of the primary decisions involved in estimating your space needs.

In-House or in the Community?

One of your first venue decisions is whether you would like to hold your event within your peer or professional program, or elsewhere in the community. Of course, a primary factor in this decision is whether you have enough space in-house to host a fair with several testing stations and information booths, at the least. That is, unless you plan to start very small, such as by simply offering access to a nurse in your lobby to take blood pressures and provide fact sheets, which would require very little space (or planning). Another part of this decision is how many fair days you can manage and how broadly you want to outreach people. Certainly, a health fair can be a large multi-day event, with screening vans in the parking lot and buses bringing people from a wide range of locales. This type of fair typically requires a large amount of resources that may be out of reach for you. Thus, as a first-time event, we recommend starting larger than one nurse in your lobby, but smaller than a multiple day event busing 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 the people you wish to reach would be more comfortable getting health-tested within 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 HIV/AIDS). If your planning 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 it is best to look outside of your program, we recommend thinking beyond the mental health or substance abuse communities alone for partners. In fact, employers,

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 an affiliate of the American Diabetes Association hosting a community fair to offer blood sugar testing, information, and resources to people living with or at risk for diabetes. Other times, fairs are offered to a specific group of people, such as one focusing on the needs of people at a local senior center. All that said, we scheduled our first major fair during the annual mental health peer conference in New Jersey, where we knew there would be over 250 peers in attendance whom we could reach with health screening and information. Screening at statewide conferences can be a big success!

Bright Idea!

When planning your venue, think outside the box. One time, 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/AIDS. 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 give their practitioners in training practice with 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 gauge 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 much 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.

Your Venue Decisions Include:

- Do you want to host your event within your peer or professional program?
- Would your program members/clients feel most comfortable at a fair inside or outside of your program?
- Do you have the space to set up testing stations and information booths?
- Which other organizations host health fairs in your local area?
 - Would they be interested in partnering with you?
 - Would you be interested in partnering with them?
- Do you have the resources to rent the external space, if that is required?
- Does the partnering program share your recovery and wellness views?

How Many People?

One of the toughest things to estimate when planning your first health fair is how many people to expect. We've hosted fairs where about half of the people who signed up actually showed up, and other fairs where three times as many people as expected were lining up to be screened! If you're working within your own program, you will have a general sense of how popular these types of events tend to be. We strongly recommend "amping up" your enthusiasm and 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 if you find that to be a reasonable number or if you'd like to bolster your marketing plans to increase attendance.

Additionally, ask the partnering programs to consider days of the week or hours of the day when people are most likely to be coming to the center anyway, such as days that a doctor is in attendance or when checks are distributed. You may find it easier to attract attendees 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 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 a van you were counting on breaking down.

How Many People Do You Expect?

Would You Like to Attract More?

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.



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 also will need interpreters, and possibly extra support getting through the fair.

When and for How Long?

Part of deciding on 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. Ask well in advance so that everyone can be prepared.

Estimating Space Needs Based on Square Footage

A health fair may require a surprising amount of space. You'll need to plan for testing stations, information areas, waiting areas, and "back of the house," followed by laying out stations to ensure flow and reasonable privacy. The ideal is to have 70 square feet per person. Keep in mind that the total at any given time includes both those being screened and all of your workers/volunteers. For example, 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). This number usually is higher for space 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 the 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 desired 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). Generally, we recommend several feet between testing and counseling stations to ensure privacy and comfort for attendees and staff. Less space is typically needed between information stations, at least in terms of privacy.

Other Key Space Requirements

Also considered in 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 further 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 have to bring in a refrigerator or coffee urns, remember to

include them in your space estimates (and be sure there is access to electricity through a surge protector).

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, if you're displaying 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. If your program's space is too small or lacks needed resources, consider requesting or renting a different space instead.

Access to Emergency Care

It is important to choose a location that is conveniently located to 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 of the 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 the phone number) to ensure that everything is okay, that needed treatment at the urgent care facility 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 "cleaning-up checklist" to ease 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 about any health changes they want to make. Key venue decisions to make this possible 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 needed 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 an accessible space on evenings or weekends to accommodate attendees who work, are in school, or are otherwise unavailable on weekdays.

Make a List of Your Main Space Requirements

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Chapter 6 - Health Fair Supplies, Resources, and Signage

Depending on the size of your health fair, you may require a surprising amount of supplies, resources, and signage. The good news is that many 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, resources, and signage you will need for your fair. We have included a **Health Fair Supplies & Budget** spreadsheet in the Appendix that we have 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 the needed testing and other supplies is a primary task for your health fair committee. It can take 10-12 weeks to identify and order the correct supplies, particularly if you are asking for free donations from local pharmacies, grocery stores, or national trade organizations.

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-soiled materials). 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 bio-hazardous waste (sharps and blood-soiled materials) for free.

Plan for Event Forms, Resources, and Signage

Several pieces of paperwork are important for planning and executing your health fair. For example, in order to ensure attendee privacy at our fairs, we issued everyone an inexpensive paper wristband (the kind often worn at fundraising, church, and school events) with an identification number on it. We used this identification number on participants' **Health Passports** into which we recorded their test results (Health Passports are described on the next page). We prepared the labels in advance of the health fair with a series of numbers to identify each site and person.

If you are anonymously tracking participants' test results to inform program development, policy, or evaluation, then you will need a **Results Recording Sheet** to document each person's results by his/her identification number (and/or enter them into a laptop computer anonymously by number). We also used identification numbers to track when people received their gift cards at the end of our fairs. If you are using them for your fair, all of these materials must be ordered or prepared in advance.

Note, you may not need to track each person by identification number if you are not gathering information for policy, program, or evaluation purposes (and thus, won't need the wristbands or Results Recording Sheets).

An important resource to prepare in advance of your fair are **Medical Fact Sheets** with basic information about body mass index, diabetes, hypertension, high cholesterol, heart health, and smoking cessation. We have included our fact sheets in the Appendix of this manual, and you are welcome to distribute them at your fair (maintaining the Center's information and funding statement on each one). 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 provide 10-12 weeks of lead-time to request and receive these resources in the mail, if you are not able to download them from the Internet. We also gave each participant **a list of free or low-cost local health clinics**, so they could easily find an affordable doctor or nurse practitioner with whom to discuss their health fair results, if needed.

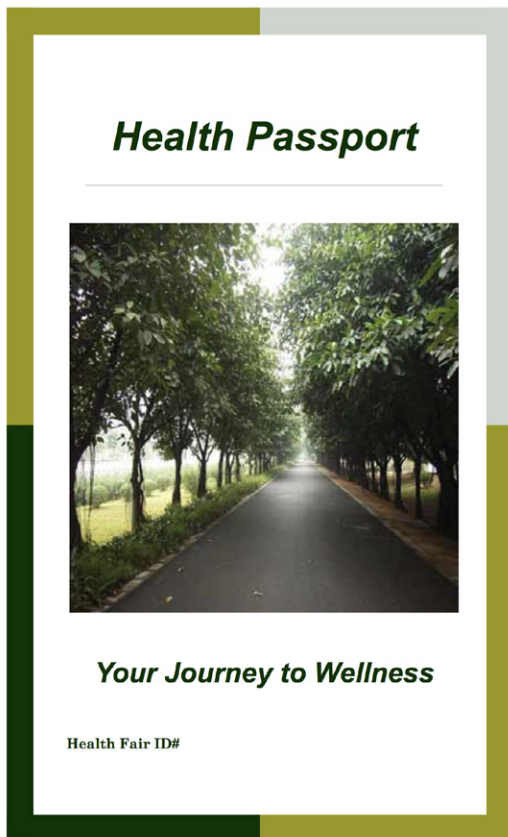


Health Passports

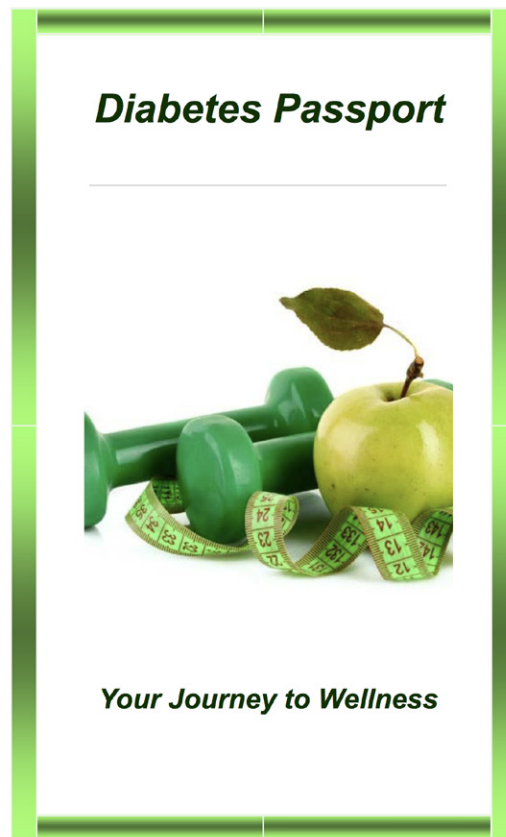
Health Passports are commonly used at health fairs because they provide an easy and accessible way to record results of participants' screening tests. Generally, Health Passports contain information about the medical conditions being assessed, interpretation of scores for each medical condition tested, and space to record a person's personal results.

Health Passports also can provide information about free resources, and space for health fair staff and attendees to record questions, answers, and next steps.

The two Health Passports that we designed can be found in the Appendix of this manual, or can be downloaded for free from our web site.



<http://www.cmhsrp.uic.edu/download/NRTC5.MyHealthPassport.pdf>



http://www.cmhsrp.uic.edu/health/Diabetes_EDU/Diabetes-101/Diabetes_Passport.pdf

Additional Considerations

A **schedule of the shifts** for all staff and volunteers, along with name badges for them, also must be prepared (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 a whole 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.

Also included in this section of the spreadsheet is the **signage** you will need to prepare for your overall health fair and each testing station or information booth.

As discussed previously, signage also needs to be created to guide people from the parking lot and throughout your entire fair, in order to maintain flow and reduce confusion.

If you are paying your staff/volunteers or providing them with a stipend, remember to prepare in advance for the **contracts and/or receipts** they will sign. The same goes if you are offering the site at which you are holding your fair a stipend for using the space.

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.

What forms, resources, and signage do you need?

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Plan for Services and Refreshments

Offering free or low-cost demonstrations or services is a big part of the attraction of health fairs. Because your planning committee will be calling local businesses, universities, and organizations to request donations of time or resources, it is important to dedicate approximately 3-6 months to arrange for this phase of the fair.

One of the most popular services we've offered is massage, provided for free by local massage therapy students who also needed the hours toward certification. Also popular are facials and cosmetics demonstrations, or demos by personal trainers and fitness experts. We have provided yoga, dance, and exercise demos, donated from local schools and studios. We've approached universities

and local departments of health for nutrition and healthy cooking demonstrations as well.

The possibilities of services that can be offered on-site are broad in scope, and you can get creative based on the needs and age range of your anticipated participants. Note, however, that it is not uncommon for at least one demonstration to fall through on the day of the health fair, due to unforeseen emergencies or 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 and volunteers at your event. Similar to free services/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, leave 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, or coffee mugs.

Tap People Who Know People

We have found it critical to make use of any personal contacts had by members of your planning committee or overall organization with local businesses and organizations. A sampling of these include:

- Grocery stores and coffee shops
- Pharmacies, pharmaceutical companies, or national trade associations
- Super stores or “big box” stores
- Local schools of massage, dentistry, pharmacy
- City or state departments of public health
- Dance or yoga studios

Get it in Writing

When arranging for services and demonstrations, you will start with phone calls or emails, and follow-up on affirmations with a letter of agreement. The letter clearly outlines the expectations, days/times of the fair, location of parking, stipend (if any), 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, if needed.

Which local organizations might provide donations?

- 1 _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____
- 6 _____
- 7 _____
- 8 _____
- 9 _____
- 10 _____

Plan for Respite

A respite room for both participants and volunteers is beneficial, if your space can accommodate it. This room is designated as a place for people to take a break to relax, meditate, or participate in an online support group. In the event that someone wants to meditate or have silent time, it's best to suggest that there be no talking 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 soothing music (which can be turned off easily), water, pillows, facial tissue, hand sanitizer, and reading materials such as magazines for both women and men. We similarly stock the break room for event volunteers.



Plan for Meals

You also will need to arrange for **food and beverages for the volunteers** working your event. This is especially the case if they are working full-day shifts. Although there may not always be agreement among the planning committee members on this, we feel it is important to provide healthy beverages, snacks, and meals to the staff/volunteers, just as you are seeking to model healthy eating for your participants. Many people turn to comfort or junk food when they are working long days under conditions of stress. However, we recommend trying to avoid this temptation (or at least reduce it to only a few less healthy options) 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 bought, 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 the day of the fair. If food items or testing supplies will need refrigeration, space in a refrigerator will need to be arranged.

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 enough refrigerator space is not available, you will need to explore whether you can bring one into the event or other options.

Along with actual space, fairs require furniture. You need, at a minimum, waiting area seating and chairs, as well as tables and chairs for screening and information stations. Make sure you have adequate and 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 the blood and any blood-soiled materials, and a shredder if you wish to shred any confidential health information right at the fair. For example, at our fairs, after asking participants questions about their alcohol and substance dependence to assess risks (all had the right to refuse these questions), even though all of the information was kept anonymous, we shredded the questionnaires after we computed a substance dependence risk score. This allowed us to assure participants that the information would never be shared with anyone else.

Electrical needs encompass the ability 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. When using outlet extenders and extension cords, there can be issues of cord safety hazards, so please make sure all cords are in working order and are duct taped to the floor at the event to avoid anyone tripping and falling. Surge protectors will keep equipment safe from power surges.

Tech Needs

If you wish to use wireless computers or other devices to project information onto screens, be sure to discuss this in advance with the host organization to see what they may have on-hand to borrow (an LCD projector) and what you will need to bring in (the laptops and screens).

Chapter Summary

Even a modestly-sized health fair can require a good deal of supplies and resources to run smoothly. There are the more obvious supplies to order, including testing kits and health supplies, along with the less apparent ones, such as electricity and free health demonstrations.

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 planning your event.

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

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Chapter 7 - Planning and Operating Your Health Fair Stations

This chapter reviews steps for planning and operating a health fair, with a specific focus on the health testing or screening stations. The stations you choose to provide will depend partly on the needs of the people you wish to reach, partly on the expertise of the staff/volunteers you are able to engage, and partly on the location and time you have to 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 needs include 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 volunteers to administer them.

Choosing Your Stations

Here are the stations that we found best help people learn about health promotion and prevention. Arranging the stations in this order creates a nice “flow” for the fair, while providing useful information about health status and lifestyle modifications.

Station/Activity #	Activity
1	Parking
2	Reception Station (Welcome, Orientation)
3	Body Mass Index Station (calculated based on weight, height, 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 assess current, non-fasting cholesterol and triglycerides)
6	Blood Pressure Station (manual or electric cuff to take blood pressure)
7	Health Habits Station (discussion of how alcohol and/or drugs, sexual health, and safety affect overall wellness)
8	Nicotine Use Station
9	Framingham Heart Health (computer program to assess personal risk)
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

Although you can order your stations in whatever manner you wish, we recommend putting them in a specific order and guiding people through them in that order, so that attendees can easily move from the first to the last station and achieve the most value for their time. Additionally, to achieve flow, we recommend assigning a number to each station (including parking, welcome, and checkout) and to include the station numbers on the signs/banners. This way, everybody involved with your fair, from the staff to the attendees, will have a simple “short hand” for finding everything they need.

Distributing Information

At all stations, we provided reliable information and resources on the medical conditions being assessed. People were free to refuse the information, of course, but it was always offered with the belief that health empowerment begins with improved health literacy/knowledge. For example, at the Glucose Station, we provided fact sheets explaining diabetes and pre-diabetes, and steps people can take to control their blood sugar and/or prevent Type 2 diabetes. Or, at the Blood Pressure Station, we provided information on what hypertension means and ways to reduce sodium intake in one’s daily diet to either prevent or manage hypertension.

Operating Each Station

The following sections provide details on how we have operated each testing and information station listed in the beginning of this chapter. There are many ways to order and run health fair stations, but this is the process we found to be most successful at our events.

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

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

Station/Activity #1: Parking



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

If people arrive by car or van, we have found it helpful to designate in advance where vehicles will park. Signage will be needed to tell people where to park, and how to enter the health fair. If people are coming by public transportation, clear signage at the street and around the front entrance also is important. It is beneficial for 1-2 staff or volunteers to serve as parking lot monitors to further guide other volunteers, exhibitors, and participants.

Some health fairs have a mobile station parked outside, such as a dental office or eye exam suite. If you do this, plan carefully for where to park it so that people have easy access and you can bring electricity to it.

Note, you also should have clear signage and an accessible route marked out for how people will work their way through the fair. While you are at it, don't forget to provide clear signage to help people find their way to the restrooms, the respite room if you provide one, the staff break room, and back to the screening area.

Station/Activity #2: Reception and Orientation



Reception Station Overview

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

- A brief orientation about what to expect at the health fair
- Participant rights to refuse any test or screening
- How long the fair will take
- How to get started

If using them, this is the station where you will give participants their identification wristbands, as described in a previous chapter. If you're using one, you'll also distribute the health passports 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, what screenings are offered, 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 discuss the availability of peer and other supports to discuss health results and next steps.

Ask for any questions and determine whether the person understands the purpose of the health fair and his/her rights.



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

Station/Activity #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. This makes healthy eating and exercise even more important. 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 first ask people to stand against a wall where the height chart is posted for you to note how tall they are. Then, you ask people to remove their shoes and step on the scale to record their weight. Next, you 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. Thus, 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 (per the previous chapter), or download one for free at: http://www.nhlbi.nih.gov/guidelines/obesity/bmi_tbl.pdf.

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. Please 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, and/or successfully lost weight, you can briefly offer this information as peer support.



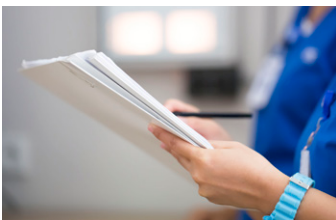
Request that the person remove his/her shoes to begin.

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.



Document the participant identification number, height, weight, and waist circumference in the **Health Passport BMI** section, and on the **BMI Station Recording Form**. Use the charts provided to identify a 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 giving them the healthy eating Fact Sheet.)



Provide the participant with the Fact Sheet 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	BMI:	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/Activity #4: Glucose/Diabetes Testing



Glucose Station Overview

Diabetes and pre-diabetes are common among people with mental illnesses, and are related to a high prevalence of overweight and obesity. Additionally, second generation antipsychotics are strongly associated with higher incidence of metabolic syndrome, diabetes, and insulin resistance. Growing concern about the association of obesity, diabetes, and inadequate preventative health care for people with mental disorders led to a consensus report issued by several 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 (i.e., registered nurse or physician in training) takes a small drop of blood from a person's finger. This blood sample 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 test measures whether a person has diabetes or pre-diabetes.

The test is now commonly used because it indicates average blood glucose levels 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.

*American Diabetes Association, American Psychiatric Association, American Association of Clinical Endocrinologists, and North American Association for the Study of Obesity (2004). Consensus development conference on antipsychotic drugs and obesity and diabetes. *Diabetes Care*, 27(2), 596-601.

Processing the Blood Sample

The blood tests take 10 minutes or more to develop, which is important to keep in mind when considering flow through your health fair. We recommend the 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 comfortably wait for their results. Or, if it will work, you can encourage them to visit 1-2 other nearby testing stations or information booths while they wait for their blood sample to process for both glucose and lipids.

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 at this station can help people who feel faint after the finger prick.

Remember to Plan for Crisis Results

Screening may reveal that someone has a high risk A1C. This has happened several times at our health fairs. We recommend developing a crisis protocol before your health fair, stating who will assess the presence of a medical emergency on the basis of elevated A1C, and how the person will be transported to an emergency department.

Our suggested cut-off values for high risk A1C can be found later in this section. 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.

A1C Testing, Step-by-Step



Introduce yourself.

A1C 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 it doesn’t really hurt, 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 simply 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.



A1C Results

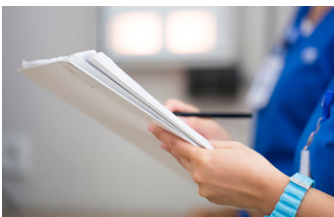
4 to 5.6% = Balanced A1C

5.7 to 6.4% = Pre-diabetes A1C

6.5% or higher = Diabetes A1C

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, document the participant identification number and the value of his/her test in the **Health Passport Diabetes section** and on your **Blood Glucose Recording Form**. 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 the condition. 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 potential cross contamination.

A1C Emergency Protocol

Check for high risk values:

**Greater than 10.5
(indicating a 2-3 month average
blood glucose of 253 mg/dL)**

- Nurse or medically-trained practitioner will assess the individual to decide whether immediate medical attention is warranted.

**Greater than 12
(indicating a 2-3 month average
blood glucose of 298 mg/dL)**

- Nurse or medically trained practitioner will assess potential for imminent medical emergency and discuss arrangements for immediate medical care.

Activate the Protocol

If an individual's A1C reading denotes high risk, assess whether immediate medical attention is warranted. Then, talk with the event leaders about activating the emergency protocol. All decisions and actions should be well-documented.

Ask the person for permission to be contacted the next day to ensure that s/he is okay, and ask for a phone number to use.

Provide Support

The participant may become scared or upset, so provide calming support and neutral information. Peers who can empathize and support the person while waiting for a decision/transport can be very beneficial as well.

Your A1C Station Emergency Protocol

Use the space below to outline the simple steps of your emergency protocol. Make sure that it has been reviewed by medical personnel and approved by your host organization. Keep this sheet visible at the A1C Testing Station. See sample procedures below.

What A1C values will be considered high risk?

Who will determine that high risk is present?

Where will participant be referred for urgent care?

How will participant be transported?

In emergency, call EMS at (phone number):

Date:

[illegible]

Station/Activity #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 in the blood, it 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. Because people in recovery are at elevated risk for heart disease and diabetes, it is important to include cholesterol testing at a health fair for them, 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. As mentioned above, we recommend putting this station with the glucose testing station, so the one blood sample can be used to process both tests, reducing the number of blood draws you need to make.

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, however, if any abnormal results are found (high total cholesterol and/or high triglycerides), the station staff should encourage the person to have a follow-up cholesterol test at a doctor’s office after fasting.

Cholesterol & Triglycerides 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

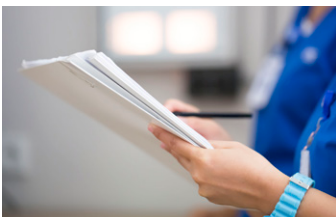
<200 mg/dL =

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.

Cholesterol and Triglycerides Testing Station Recording Form

Site:

Date:

Attendee ID #	Total cholesterol	LDL	HDL	Triglycerides	Recorder/ Staff initials

Station/Activity #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 it can be challenging for lay people (non-medical staff/volunteers) to obtain an accurate blood pressure reading, even after being trained in how to do so. Therefore, we recommend either using medically-trained personnel to obtain blood pressures or purchasing an electronic blood pressure system, if at all 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. Allowing them to rest and breathe normally can help you 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

You will find that at least one person may be tested as having dangerously high blood pressure. We recommend developing a crisis protocol in advance of your health fair for 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. Our suggested cut-off value for blood pressure can be found later in this section.

Any emergencies should be well-documented for liability protection.

As discussed in a previous chapter, with permission the person should be contacted the next day to ensure she/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 low- sodium 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.



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.
7. 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.
8. Record the reading (using the second one if you took two) on your Blood Pressure Results Recording Form.

Blood Pressure Results

120/80 = Normal

121-139/81-89 = Pre-Hypertensive

140+/90+ = Hypertensive



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 values:

- Systolic (top number) reading is more than 180+
- Diastolic (bottom number) is 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 well-documented.

Ask the person for permission to be contacted the next day to ensure that s/he is okay, and ask for a phone number to use.

Provide Support

The participant may become scared or upset, so provide calming support and neutral information. Peers who can empathize and support the person while waiting for a decision/transport can be very beneficial as well.

Your Blood Pressure Station Emergency Protocol

Use the space below to outline the simple steps of your blood pressure emergency protocol. Make sure that it has been reviewed by medical personnel and approved by your host organization. Keep this sheet visible at the Blood Pressure Testing Station. See sample procedures below.

What blood pressure reading will be considered high risk?

Who will determine that high risk is present?

Where will participant be referred for urgent care?

How will participant be transported?

In emergency, call EMS at (phone number):

Blood Pressure Station Recording Form

Site:

Date:

Attendee ID #	Blood pressure reading	2nd reading, taken only if first reading is high	Blood pressure category (normal, pre-hypertensive, or high)	Recorder/ Staff initials

Documentation Convention:

When the systolic and diastolic blood pressure readings fall into different categories, the HIGHER CATEGORY should be used to classify the blood pressure level in the Health Passport. As one example, if the person has an elevated diastolic pressure (bottom number), the attendees results should be recorded as pre-hypertensive, even if the systolic pressure (top number) is normal.

Station/Activity #7: Health Habits



Health Habits Station Overview

Although it can be a “touchy” topic, sometimes personal habits can have a negative impact on our health and well-being. Additionally, sometimes people live in traumatic situations that worsen their physical and emotional wellness. Therefore, it is beneficial to offer one or two stations that combine questionnaires and information on alcohol and drug use; sexual health; physical and emotional safety; or use of medical care. It’s important to discuss the various implications of offering HIV/AIDS and/or substance abuse testing at your health fair before making any decisions. Some agencies will require that these tests be administered by experts; others will be concerned that people will not attend a health fair if they believe they’ll be tested for HIV or drug use. We recommend being fully informed of the requirements and implications of offering sensitive health tests at your fair before moving forward with them.

If your group determines that you would like to assess risks arising from alcohol and drug use, we’ve successfully used two standardized questionnaires at our events. One is called the Alcohol Use Disorders Identification Test (AUDIT-C; World Health Organization, 1990); and the other, the Drug Abuse Screening Test (DAST-10; Skinner, 1982). They are often used when documenting the prevalence of alcohol and/or drug dependence among a specified group (or groups) of people. They are found in the Appendix.

It is best for these scales to be administered by someone who can put others at ease. You want the person asking questions and discussing alcohol/drug dependence (or any other sensitive topic) to be skilled at helping others to be honest and avoid feelings of shame. Most people will under-report their alcohol and/or drug use when asked about them directly, for fear of being judged, shamed, reported, or losing needed services or supports. Sometimes, staffing this station with someone in recovery from alcohol/drug dependence can help attendees discuss things more openly.

Dealing with Sensitive Data

Your team should consider whether recording sensitive information, such as someone's drug dependence level or HIV/AIDS status, in a Health Passport is necessary or a good idea. If in doubt, you can always ask each person whether or not s/he would like such results recorded into the Health Passport.

Either way, we advise shredding all paper questionnaires used while the person is still at this station, so s/he feels assured of privacy. If you have received permission to record the results, then you can shred them once you've recorded them in the Health Passport and/or on the station documentation forms.

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

Develop a Safety Procedure

It also is advisable for your planning 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 is identified. You also want to talk in advance about how to handle it if an attendee 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 drugs will be collected using paper 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 certain of their habits may need attention. There are self-help and professional supports available, and you want to connect people to any help they believe they need.

Remember, like any other station, people are free to decline participation in this station or in some or all of the questionnaires. If they decline the station, 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

1–2 = Low Risk

3–5 = Moderate Risk

6+ = Very High Risk

AUDIT-C Results

For men: 0–3 = No Risk

4+ = At Risk

For women: 0–2 = No Risk

3+ = At Risk

For the Drug Abuse Screening Test (DAST-10; 10 item version):

Tell participants that they should respond with “yes” or “no” to each of the questions. Ask each of the DAST items. Score the items “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 **Health Habits 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, even if they did not score as being at-risk, heavy or prolonged use of alcohol or drugs can be harmful to the body and emotions over time. When they’re ready to reduce or quit, help is available. Stamp the Health Passport, and direct the person to the next station.

AUDIT-C and DAST-10 Recording Form

Site:

Date:

Auditee ID #	AUDIT-C score	AUDIT-C risk tested as (circle only 1 option)		DAST score	Recorder/ Staff 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		
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		No Risk	At Risk		
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		No Risk	At Risk		
		No Risk	At Risk		
		No Risk	At Risk		
		No Risk	At Risk		
		No Risk	At Risk		
		No Risk	At Risk		

Station/Activity #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/treatment. One of the first steps to quitting is assessing levels of dependence on nicotine. We used the Fagerstrom Test for Nicotine Dependence (Mayo Foundation for Medical Education & Research, 2003) to assess the level of nicotine dependence among participants 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/or 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.

Nicotine Use, 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 this 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 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 during the 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 items by adding the value of each of the responses together for a total score. 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. Document the participant's identification number and the Fagerstrom score on the 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 with low dependence, smoking cigarettes can be very harmful to the body over time. The second-hand smoke they generate can also negatively affect the health of others around them. When 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			

Station/Activity #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 may help them stay or become motivated to develop as healthy of a lifestyle as they can manage. Therefore, we recommend offering a station on heart disease at your fair, using a well-known computer application that we successfully used to assess people's 10-year risk for heart attack.

This application applies information from the well-regarded Framingham Heart Study to obtain a score indicating personal risk for having a heart attack within the next 10 years (Wilson et al., 1998). The application directs the user to enter his/her sex, age, cholesterol levels, blood pressure, diabetic or non-diabetic, and smoker or non-smoker.

Based on the answers, the application returns the level of risk for a heart attack within a decade, along with how that risk compares to other people of the same age and sex as the user.

Information Needed for the Framingham

If you use this web-based application, it is best to have the Cholesterol, Diabetes, and Blood Pressure Stations come before this one, so that you have the most current information on participants to enter into the computer (from their Health Passports). If attendees declined one or more of these stations, then you can enter the indicators as best they know them.

“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. 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, blood sugar, and cholesterol, or quit smoking.

Free Web Tool

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

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

Framingham Test for Heart Health, Step-by-Step



Introduce yourself.

At this station, you will determine participants' coronary health and the risk for heart attack within 10 years, using a Framingham risk score. The Framingham risk score uses a system that is based on 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 each participant by entering the requested information. Obtain the information about cholesterol, blood pressure, and diabetes from participants' Health Passport, if they participated in those stations. If they declined those stations, then they will need to tell you 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 characterized into three categories, listed at the left.

Now do the "What If Activity," showing each person how his/ her risks change based on changes in the main indicators for heart attack. If they do not know one or more of their indicators, enter the information they do know, and then, enter hypothetical cholesterol, blood pressure, and diabetes information to show them how the risk goes down by quitting smoking, or controlling blood sugar/pressure.



Document the Framingham Risk Score value in the space provided on the **Health Passport Heart Health Section**, and 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.

Site:

Date:

[illegible]

Station/Activity #10: Peer Support and Resources



Peer Support and Resources Station Overview

We had a great experience with this unique station at our health fairs. This station is staffed by peers in mental health recovery who are versed in whole health and/or peer wellness coaches.

Attendees are given the opportunity to review their test and screening results with the peer workers. Attendees are able to talk about what the results mean to them and their lives. They consider whether they have further questions, and how to follow-up with a doctor if needed. They also discuss whether there are other resources they need and how to find them in the community.

This chance to debrief with supportive peers gives attendees hope that they can manage their health conditions, or prevent them from developing if they were found to be completely healthy. It also serves to model the career option of peer counselor for attendees, which is an invaluable part of recovery.

Framingham Test for Heart Health, 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 starting walking 5 days a week and eliminated soda. 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/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 that the person might be able to improve upon, help him/her to consider questions such as: will s/he see a doctor to follow up, will s/he begin to exercise more, can s/he cut back or eliminate soda or 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/Activity #11: Check-Out



Check-Out Station Overview

Most fairs have a station or process that lets people know they have reached the end of the fair. You can do this more formally with an actual check-out station, or more simply 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. Also issue the free give-aways, gift cards, and/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 which 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 to locate stations that require blood draws or other medically-trained personnel together.

Your team needs to be trained on how to run each station smoothly and respectfully. They also need to be trained on how to anonymously document attendees' values, if your team is keeping this information.

You also will want to develop a protocol in advance for medical emergencies and emotional crises.

Also 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/ or 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 the best staffing for:

1. pre-planning activities,
2. health fair set-up,
3. testing and information stations, and
4. clean-up activities.

In creating a staffing plan, you also 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 each person involved in the health fair knows his/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 attendees and others with respect. Let's take a look at some of these staffing considerations.

Forming a Health Fair Planning Committee

One of the first steps in staffing a health fair is designating your planning committee. 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, the staff/volunteers, the potential attendees, and the exhibitors all know whom to contact with questions or 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 planning 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 regular 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 planning 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 acquire 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 with exhibitors accordingly for 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 information- sharing 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 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 properly 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 Chapter 6 for recommendations).

- **Vendors or exhibitors**

The vendor/exhibitor subcommittee is a critical and busy subcommittee, being responsible not only for seeking vendors, but for determining their requirements (ranging from bus parking to specific electrical needs), getting letters of confirmation, and getting their details correct for the event 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 the chance to practice the 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 likely would assign your registered nurses to take blood at the glucose and cholesterol testing stations, your practical nurses to take the blood pressures, and your peer wellness coaches to run the peer support station. People who have struggled with their weight and/or have successfully lost weight would be an asset 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. Of course, you don't want someone who cannot tolerate the sight of blood at the blood drawing stations. You also don'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 the RNs could share the workload and the blood samples. 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 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 (like all staff or volunteers). That said, like other staff, some peers specialists will already be on paid staff of the host organization (and cannot accept additional payment), 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 screens 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 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.

Make a List of the Subcommittees You Will Need

- 1 _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____
- 6 _____
- 7 _____
- 8 _____

Chapter 9 - Financial Considerations in Running a Health Fair

Running a successful health fair can be rather expensive, although you should be able to off-set some costs through donations and sponsors. Many costs are easy to see (such as costs of testing kits, food, publicity, 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.

Typical Health Fair Costs

The following are some of the operational expenses you can expect when running a health fair. The spreadsheet provided in Chapter 6 can be used to track and monitor all of your expenses.

- **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
- **Marketing expenses:**
 - Graphic designer
 - Printing brochures and flyers Signage
- **Staffing expenses:**
 - Staff time to attend meetings to advertise the event
 - Labor costs for set-up, transportation, parking, etc.
 - Internal and external staff to plan and implement the event
- **Transportation expenses:**
 - Transporting furniture
 - Transporting attendees
 - Travel expenses to bring in staff/volunteers/exhibitors
- **Services and supplies expenses:**
 - **Giveaways or incentives**
While you certainly can save money by not providing incentives to the 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 contacts had by 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 AIDS, can cost \$20 or more each. Even a few boxes of 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.

Make a List of Your Main Sources of Health Fair Funding

- 1 _____
- 2 _____
- 3 _____
- 4 _____

Make a List of Any Special Expenses You Will Incur

- 5 _____
 - 6 _____
 - 7 _____
 - 8 _____
-

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://cspnj.org/links>

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.samhsa.gov/wellness-initiative>

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.

Health Fair Checklist and Timeline

Health Fair Checklist and Timeline

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: <ul style="list-style-type: none"> Calculate & monitor food budget Calculate & monitor educational materials budget Calculate & monitor supplies/kits budget 		
Other:		
Other:		
Other:		
Other:		

Health Fair Checklist and Timeline

Four to six months before the health fair	Due By	Notes
Identify & secure commitments from nurses/medical personnel administering health tests/screenings.		
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:		
Other:		
Other:		
Other:		

Health Fair Checklist and Timeline

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:		
Other:		
Other:		
Other:		

Health Fair Checklist and Timeline

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:		
Other:		
Other:		
Other:		

Health Fair Checklist and Timeline

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:		
Other:		
Other:		
Other:		

Health Fair Checklist and Timeline

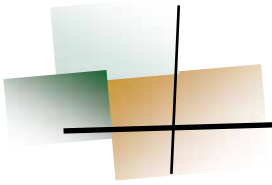
Day before the health fair	Due By	Notes
Set up tables, booths, exhibits, waiting area, etc.		
Bring the "be prepared for anything kit."		
Label the command center table and equip it with the "be prepared for anything kit."		
Set up the registration table (include registration sheets, pens, maps, etc.)		
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:		
Other:		
Other:		
Other:		

Health Fair Checklist and Timeline

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:		
Other:		
Other:		
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:		
Other:		
Other:		
Other:		

Health Fair Checklist and Timeline

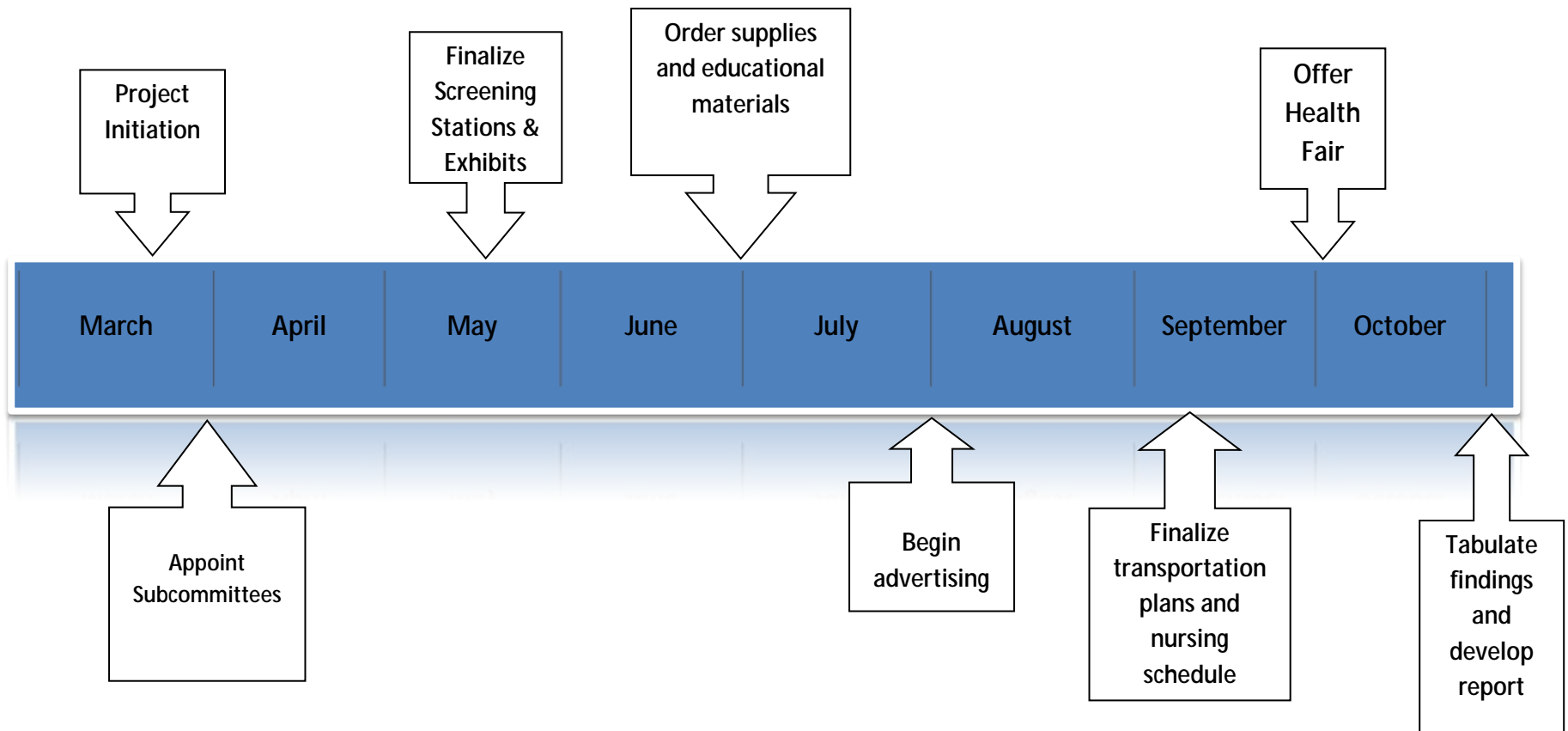
Follow-up after the fair	Due By	Notes
Send thank you letters to exhibitors, volunteers, etc.		
If feasible, check with agencies providing attendees to ensure follow-up is done for test results.		
Tabulate satisfaction survey results.		
Determine and document possible improvements for next time.		
Report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

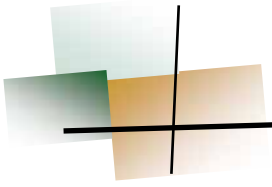


Health Fair Milestone Timeline

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)

Logos for sponsors

Your logo

Name of your program
Address
Phone
Web Site

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:

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:

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:

HOURS:
HOURS:
HOURS:

LOCATION:

Call Our Toll-Free Number for More Information!

Check it out!

A HEALTH FAIR!

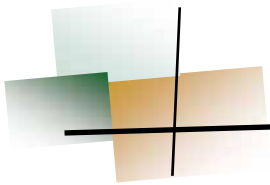
- Free blood pressure & cholesterol checks
- Free Type II diabetes screening
- Free weight & height checks
- Free health & wellness materials
- Giveaways & a raffle

HEALTH FAIR DATES:

HOURS:
HOURS:
HOURS:

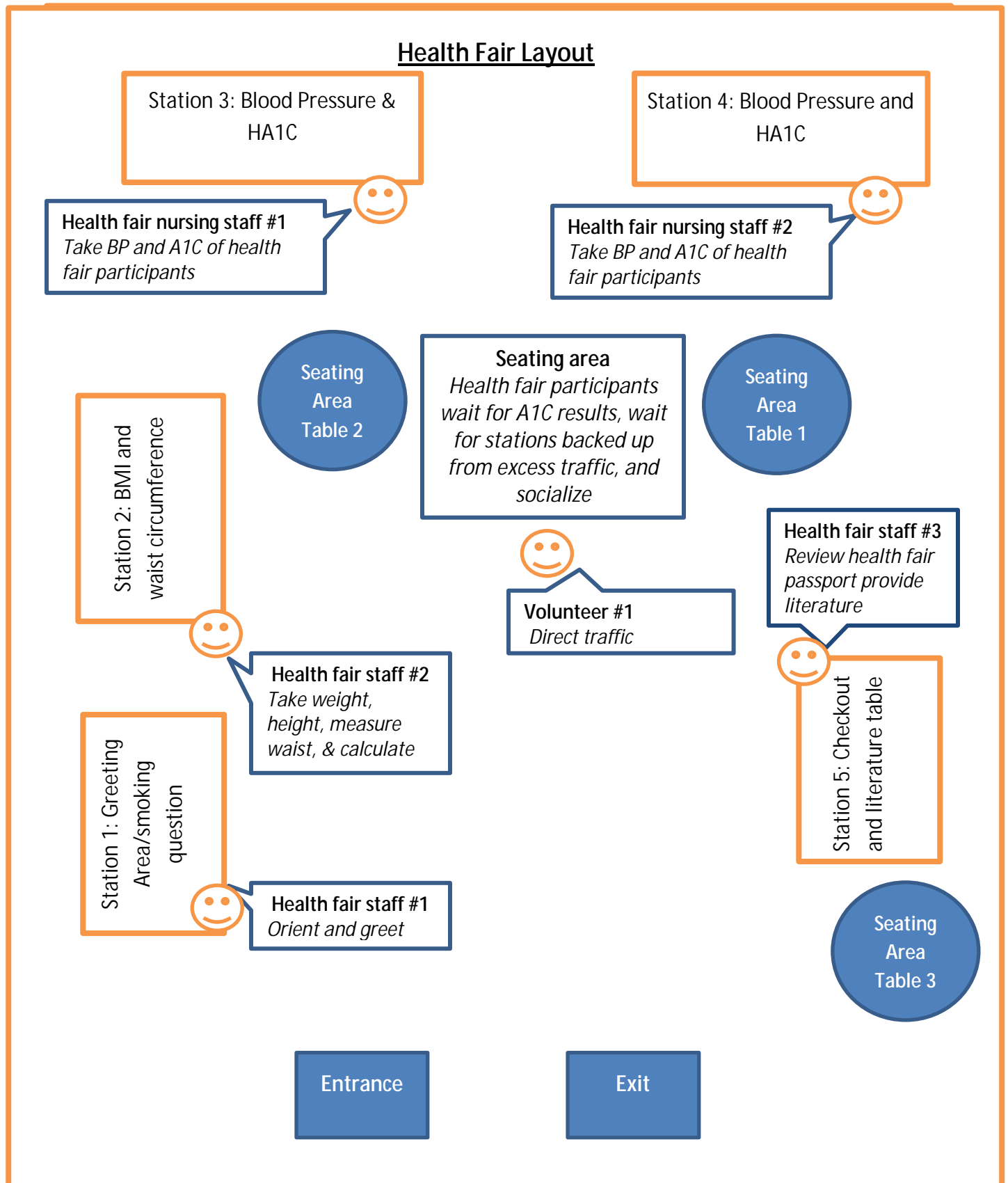
LOCATION:

Call Our Toll-Free Number for More Information!



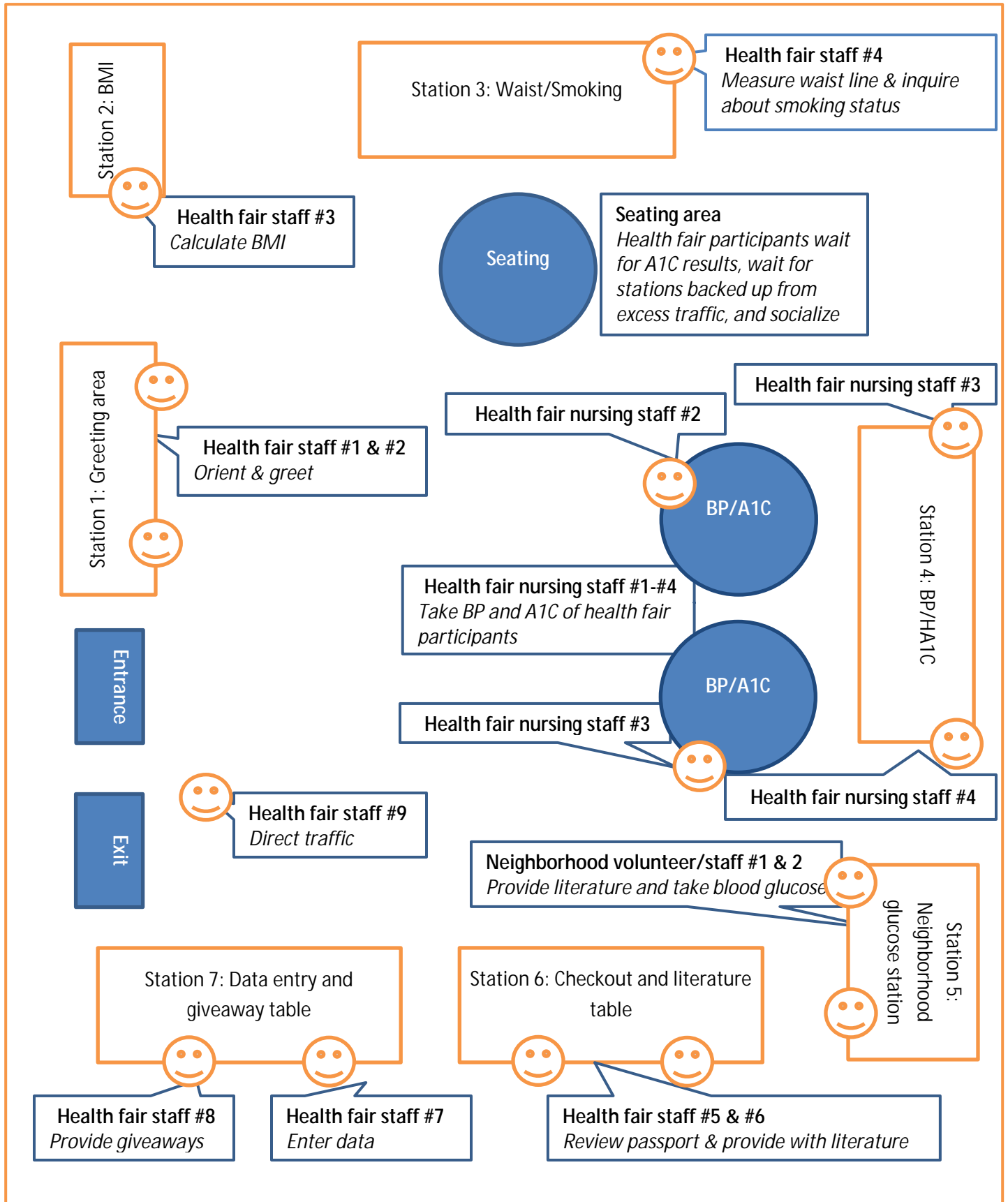
Sample Layouts for Health Fair

Health Fair Layout



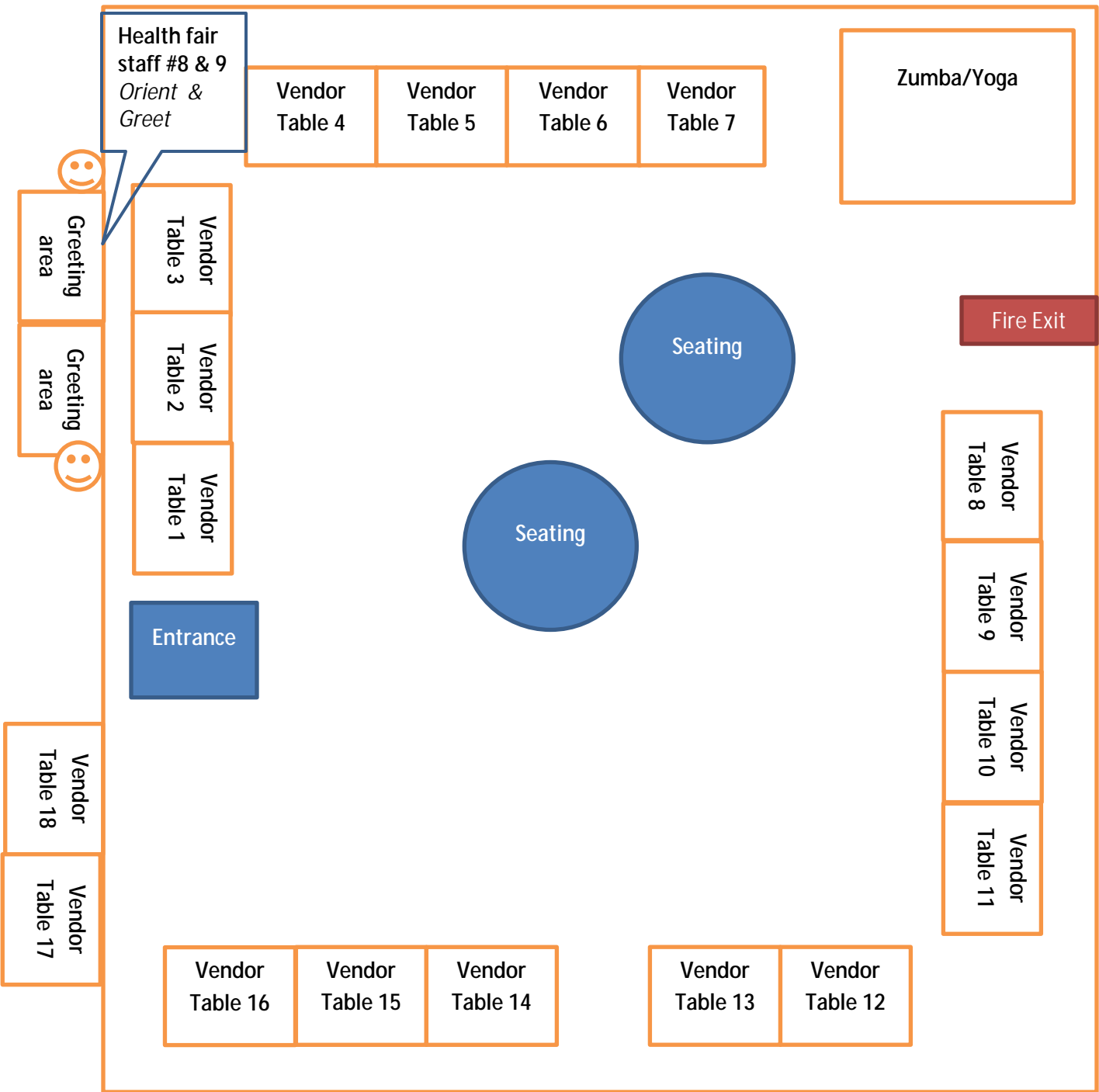
This layout was used when offering one of our health fairs at a hotel. It is a good example of how to arrange stations and booths in a smaller space.

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 participants giveaways

Traffic

1. Health fair staff #9
Direct health fair participant traffic

Health and Wellness Fair: Overview Room 2

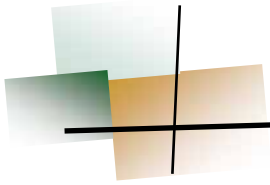
Greeting area

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

Health Testing Supplies	# NEEDED	COST/EACH	TOTAL \$	DATE ORDERED	DATE RECEIVED	INITIAL WHEN DONE	NOTES
Cholesterol System Printer Labels (extra rolls)			\$0				
Test Cassettes for LDX (boxes)			\$0				requires re Fridgeration
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							
RESPIRE 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			

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**

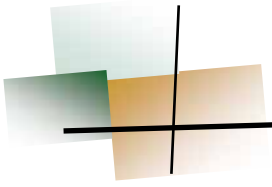
DEMONSTRATIONS	# NEEDED	COST/EACH	TOTAL \$	DATE REQUESTED	STAFF	DATE CONFIRMED	STAFF	NOTES
Massage			0					
Confirmation Letter (Massage)								
Cooking			0					
Confirmation Letter (Cooking)								
Dental			0					
Confirmation Letter (Dental)								
Yoga			0					
Confirmation Letter (Yoga)								
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. http://www.amazon.com/Safetouch-Powder-Gloves-Non-Sterile-Medium/dp/B0019R329O/ref=sr_1_1?s=hpc&ie=UTF8&qid=1314284758&sr=1-1
3. **Band-Aid Flexible Fabric Bandages**
 - a. http://www.amazon.com/Band-Aid-Johnson-Flexible-Fabric-100-Count/dp/B000GCKDGI/ref=sr_1_1?s=hpc&ie=UTF8&qid=1314284826&sr=1-1
4. **Alcohol Prep Pads**
 - a. http://www.amazon.com/Alcohol-Prep-Pads-Medium-Size/dp/B000KDH3YI/ref=sr_1_1?ie=UTF8&qid=1314284961&sr=8-1
5. **Sharps Container - Large Volume - 2.2 Quarts**
 - a. http://www.amazon.com/Sharps-Container-Large-2-2-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 =	underweight
18.5 to 24.9 =	normal
25.0 to 29.9 =	overweight
30.0 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:

<http://www.cdc.gov/healthyweight/assessing/bmi/>

For more information about the effects of a healthy BMI, visit:

<http://www.heart.org/HEARTORG/>



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:

⇒ **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 doctor or nurse
(whose name is: _____)
 - 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:

- ⇒ A dry mouth
- ⇒ Being extremely thirsty, even after drinking water
- ⇒ Urinating often
- ⇒ Diarrhea or nausea/vomiting
- ⇒ Feeling tired all of the time
- ⇒ Having blurred vision
- ⇒ 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 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.

- ◆ 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**
 - ⇒ 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**

If you have high cholesterol

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

Some foods to choose

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

Healthy vs. Unhealthy Fats

*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.*

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

Tips for Cutting Fats

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*

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.

Saturated fats raise your blood cholesterol.

Trans fats are even worse!

They raise your bad LDL cholesterol and 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.

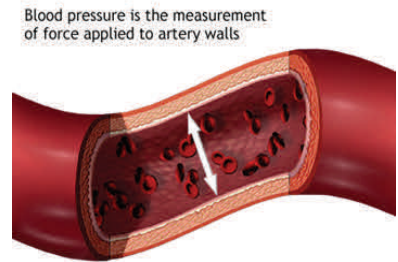
Be wise when eating out.

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.



ADAM

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 = 120-139/80-89

High 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.

Managing High Blood Pressure

Most of the salt people eat comes from processed & restaurant foods. Try to avoid these.

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.

Salt (called sodium) raises your blood pressure.
Take heart! You can still eat tasty foods.

Green Light Foods



- ⇒ Fresh fish, fresh lean meat, and fresh poultry
- ⇒ Fresh or frozen vegetables
- ⇒ Low-sodium canned veggies (but try not to eat these often)
- ⇒ 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, non-microwavable popcorn, and pretzels (in small portions)

Red Light Foods



- ⇒ Soda, including diet soda
- ⇒ Frozen dinners and packaged dinners
- ⇒ Instant or flavored rice or pasta kits
- ⇒ Canned soup or canned broth
- ⇒ “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.

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: <http://www.cdc.gov/alcohol/index.htm> and <http://www.nlm.nih.gov/medlineplus/ency/article/001944.htm>.



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:

<http://www.nida.nih.gov/Infofacts/understand.html>

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

<http://helpguide.org/mental/>

http://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:

<http://www.cdc.gov/tobacco/>

<http://njchoices.org/>



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

BMI

- 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

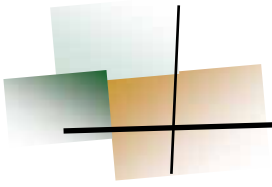
- Scheduling a regular check-up with your doctor, healthy eating, regular physical activity, limiting intake of alcohol, and choosing to stop smoking if you are a smoker can help your heart health!

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





Health Passports

Health Passport



Your Journey to Wellness

Health Fair ID#

My Health Passport

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.



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

What are healthy triglycerides?

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

What are my results?

Your total cholesterol:

Your LDL:

Your HDL:

Your total cholesterol tested as:

Healthy	Borderline High	High
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Your triglycerides:

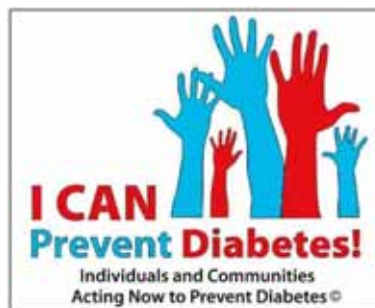
	Healthy Borderline high High
--	------------------------------------

If your cholesterol and/or triglycerides are elevated, we suggest you get them re-tested 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.



What are my results?

Your A1C:

Your A1C level tested as:

NORMAL	PRE-DIABETES	DIABETES

Testing for Blood Sugar

An A1C test shows your average blood sugar level over the past 2 to 3 months. This lets you know how well your blood sugar is being controlled over time.

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

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.

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

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.

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 well-being. 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	Low	Moderate	High	Very High

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.

Nicotine Use

YES

NO

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.

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

Dependence on Nicotine

What is my result?

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.

Your dependence tested as:

Number of cigarettes smoked each day:

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.

My Health Passport

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.

Health Resources

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

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/](http://www.mayoclinic.com/health/HealthyLivingIndex/HealthyLivingIndex)

[HealthyLivingIndex](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.



My Health Passport

Record of Health Tests

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

<u>DATE</u>	<u>TEST</u>	<u>RESULTS</u>
<hr/>	<hr/>	<hr/>
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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.

The UIC Center on Psychiatric Disability and Co-Occurring Medical Conditions is funded by the U.S. Department of Education, National Institute on Disability and Rehabilitation Research; and the Substance Abuse and Mental Health Services Administration, Center for Mental Health Services, Cooperative Agreement #H133B100028. The views expressed herein do not reflect the policy or position of any Federal agency.

Diabetes Passport



Your Journey to Wellness

This Diabetes Passport will help you track your health in 4 key areas for people living with diabetes:

- **Body Mass Index**
- **Blood Sugar (Blood Glucose)**
- **Blood Cholesterol**
- **Blood Pressure**

Bring this Passport with you when visiting the doctor, so you can monitor your results and stay on track with your self-care plans.



My Diabetes Passport

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?

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

BMI is only one way to understand your risk for health problems. BMI also varies by gender, age, and race. Your doctor will help you identify your own health strengths and risks.



What is my BMI?

Your height:

Your weight:

Your waist:

Your BMI:

Your BMI is considered:

If your BMI is over- or under-weight, ask your doctor for resources to learn more about healthy eating and exercise.

My Diabetes Passport

Blood Glucose (Blood Sugar)

The food we eat is turned into glucose, or sugar, that gives our bodies energy. The pancreas makes a chemical called insulin to help blood sugar enter 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. When blood sugar goes up and stays high, it's called diabetes.

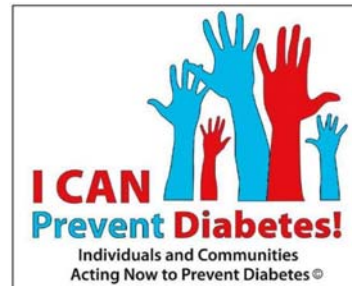
Diabetes can cause serious health problems like heart disease, blindness, and kidney failure.

Testing for Blood Sugar

An A1C test shows your average blood sugar level over the past 2 to 3 months. This lets you know how well your blood sugar is being controlled over time.

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



What are my results today?

Your A1C:

Diabetes is a serious illness that can respond well to changes in diet, daily exercise, and proper treatment. Ask your doctor to help you make a diabetes and emotional wellness self-care plan.

Cholesterol & Triglycerides

Cholesterol and triglycerides are needed by your body. But, if you have too much of them in your blood, it can lead to (or make worse) heart disease, diabetes, stroke, and other health problems.

Cholesterol is carried in the blood by LDLs and HDLs. 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.

LDL = “Lousy” cholesterol
HDL = “Healthy” cholesterol

What is healthy total cholesterol?

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

What are healthy triglycerides?

<150 mg/dL = **Healthy**
150-199 mg/dL = Borderline high
200 mg/dL and above = High

What are my results today?

Your total cholesterol:

Your LDL:

Your HDL:

Your total cholesterol tested as:

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

Your triglycerides:

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

High cholesterol or triglycerides can be a sign of health problems that can be treated with diet, exercise, and/or medicine.

My Diabetes Passport

Blood Pressure

Your blood pressure moves blood throughout your body. Blood pressure goes up and down throughout the day. When it goes up and stays high, it's called high blood pressure.

With high blood pressure, 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.



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 veins. Results are read like this:

Normal = <120/80

Pre-hypertensive = 120-139/80-89

High blood pressure = 140/90+

What is my BP?

Your BP:

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

Today, your BP tested as:

Normal	Elevated	High
--------	----------	------

High blood pressure can be well controlled with diet, exercise, and medicine.

My Diabetes Passport

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 diabetes, obesity, high cholesterol, and high blood pressure.

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 or failure.

The good news is that heart disease can be managed. You can manage it by learning more about it, finding the best treatments and supports, and becoming an active partner in your own care.

You also can maintain a healthier lifestyle to reduce strain on your heart.



The first step to better health is understanding your own risks, needs, and strengths. People at the lowest risk for heart attack can say ALL of the following are true for them:

- Nonsmoker
- Total cholesterol less than 200 mg/dL,
- HDL cholesterol greater than 40 mg/dL
- Systolic BP less than 120, Diastolic BP less than 80
- No evidence of diabetes
- Not overweight
- No family history of early cardiovascular disease

With diabetes, you are at some risk for heart disease. If you also have a history of heart disease and/or these other risk factors, your needs are more pressing.

But, there is hope! You can work with your doctor and other supporters to manage your heart health for a longer and happier life!

My Diabetes Passport

Record of Health Tests

<u>DATE</u>	<u>TEST</u>	<u>RESULTS</u>

My Diabetes Passport

Record of Health Tests

<u>DATE</u>	<u>TEST</u>	<u>RESULTS</u>

Steps to a Healthier You

See a doctor regularly. Continue to monitor your weight, blood sugar, cholesterol, blood pressure, and other health needs to get the support and treatment you may need. Self-care plans work!



Eat healthy meals and snacks. Eat fruits, vegetables, whole grains, and low fat dairy products. Drink 6-8 glasses of still water every day.

Be active. It is important to be physically active every day. Being active doesn't only mean working out at a gym. You also can take walks, garden, play sports, or dance to your favorite song. Plan to move your body every day.

Reduce or eliminate unhealthy habits. Work to reduce or stop using cigarettes, alcohol, caffeine, energy drinks, and other unhealthy substances. It can be very hard to break these habits, but doing so could improve your physical and mental health.

Manage stress and isolation. Many people with diabetes and mental health issues deal with a lot of stress. Others may become isolated as they struggle to manage their health needs. If this sounds like you, please ask your doctor and supporters for help and resources to reduce stress and isolation.

Create balance in your life. Creating balance means having healthy meals, physical activity, and adequate sleep each day. It also means doing things that make you happy. Create time in your life to relax and have fun!

Track your progress. Set small goals that you can achieve over time. When needed, ask for support from family, friends, peers, and/or health care providers.

Health Resources

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

Center on Psychiatric Disability & Co-Occurring Medical
Conditions

<http://www.diabetes.org/>

American Diabetes Association

1-800-860-8747

National Diabetes Information Clearinghouse

<http://www.webmd.com/>

WebMD

<http://www.cdc.gov/>

Centers for Disease Control and Prevention

<http://www.heart.org/HEARTORG/>

American Heart Association

[http://www.mayoclinic.com/health/HealthyLivingIndex/](http://www.mayoclinic.com/health/HealthyLivingIndex/HealthyLivingIndex)

[HealthyLivingIndex](http://www.mayoclinic.com/health/HealthyLivingIndex/HealthyLivingIndex)

Healthy Living, Mayo Clinic

University of Illinois at Chicago
Center on Psychiatric Disability and Co-
Occurring Medical Conditions
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Scales for Health Habits and Nicotine Use Stations

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
None, I do not drink	0
1 or 2	0
3 or 4	1
5 or 6	2
7 to 9	3
10 or more	4

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 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 dependence interpreted as:

No risk:

Total score of 0-2 for women

Total score of 0-3 for men

At risk:

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?	Yes	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	
Total 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 dependence interpreted as:

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.

1. How soon after you wake up do you smoke your first cigarette?	a. Within 5 minutes	3 pts
	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 forbidden, e.g., church, at the library, in the movies, etc.?	a. Yes	1 pts
	b. No	0 pts
3. Which cigarette would you hate most to give up?	a. The first one in the morning	1 pts
	b. Any other one	0 pts
4. How many cigarettes per day do you smoke?	a. 10 or less	0 pts
	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 than during the rest of the day?	a. Yes	1 pts
	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	

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**

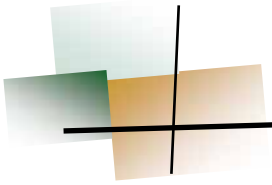
Add up the total points. A total of 0 is interpreted as the lowest level of dependence. A total of 10 is interpreted as the highest level of dependence.

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?



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

University of Illinois at Chicago
1601 West Taylor Street
4th Floor, MC912
Chicago, IL 60612
312-355-1696
[http://www.cmhsrp.uic.edu/
health/](http://www.cmhsrp.uic.edu/health/)

Collaborative Support Programs of
New Jersey
8 & 11 Spring Street
Freehold, NJ 07728
(732) 780-1175
<http://cspnj.org/>