

# With Every Heartbeat Is Life

A Community Health Worker's Manual on Heart Disease for African Americans



National Heart, Lung,  
and Blood Institute



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and Blood Institute



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### Dear Community Health Worker:

You're important to us. We need your help to deliver lifesaving information to African Americans about heart health. Many African Americans have some form of heart disease. Heart disease is the leading cause of death for Americans, but the death rate is higher for African Americans than for whites. African Americans are more likely to die from heart failure at a younger age compared to other groups.

We know a lot about how to prevent heart disease and stroke. High blood pressure, high cholesterol, obesity, smoking, not being physically active, and diabetes all increase the risk of heart disease and stroke. People can lower these risks by making healthy lifestyle changes; controlling blood pressure, cholesterol, and weight; and following the advice of their health care provider. Community health workers like you can help people learn how to protect their heart.

*With Every Heartbeat Is Life: A Community Health Worker's Manual on Heart Disease for African Americans* was created especially for African American communities by the National Heart, Lung, and Blood Institute (NHLBI), part of the National Institutes of Health and the U.S. Department of Health and Human Services (HHS). Culturally relevant information makes the manual particularly useful, meaningful, and appealing to African American communities.

The manual provides you with information to help you educate members of your community about heart health. You can help people learn how to make practical, lasting changes to protect themselves against heart disease. You can also use the manual to train other community health workers about heart disease and ways to prevent it, so they can use this information in their community activities.

We dedicate *With Every Heartbeat Is Life* to community health workers like you who devote time and energy to helping others live longer, healthier, happier lives. Thank you for making a difference.

Sincerely,

*The Heart Truth*® Program Team  
National Heart, Lung, and Blood Institute

# Introduction



## Your Role as a Community Health Worker

Your role is critically important to your community. Without you, many people might not receive vital health information.

To be successful, you need to know your community well, enjoy teaching others, feel comfortable speaking in front of people, know how to work with a group, and be willing to try to improve your own health.

### You also should be:

- A good listener
- Caring
- Patient
- Helpful
- Trustworthy
- Nonjudgmental
- Approachable

## Acknowledgments

The National Heart, Lung, and Blood Institute is grateful to the organizations, community health workers, public housing leaders and residents, families, and staff who contributed to the original development of this manual, including:

- Association of Black Cardiologists
- District of Columbia Housing Authority
- Housing Authority of Baltimore City
- National Institute of Diabetes and Digestive and Kidney Diseases
- Johns Hopkins Bloomberg School of Public Health
- U.S. Department of Housing and Urban Development, Baltimore office

## About *With Every Heartbeat Is Life*

This manual is part of the With Every Heartbeat Is Life community health worker's toolkit on heart disease prevention for African Americans and is meant to be used with the *With Every Heartbeat Is Life: Picture Cards for Community Health Workers* and other heart health education materials.

### Information provided in this toolkit came primarily from the following sources:

- *The Heart Truth*® program: [hearttruth.gov](http://hearttruth.gov)
- National Heart, Lung, and Blood Institute: [nhlbi.nih.gov](http://nhlbi.nih.gov)
- National Institute of Diabetes and Digestive and Kidney Diseases: [niddk.nih.gov](http://niddk.nih.gov)
- Medline Plus: [medlineplus.gov](http://medlineplus.gov)
- Choose My Plate: [choosemyplate.gov](http://choosemyplate.gov)
- Centers for Disease Control and Prevention: [cdc.gov](http://cdc.gov)

## How To Use This Manual

### Community Health Workers

This manual is for you! It can help you learn how to educate people in your community about heart health. It can also help you train other community health workers to do the same.

The manual has 12 sessions and an appendix.

#### The first 11 sessions have:

- Step-by-step instructions on how to teach the session
- Approaches for keeping the attention of the group
- Worksheets and handouts for participants

The 12th session (pages 12.1-12.72) is only for community health workers. It's about how to use the manual and do a project evaluation.

In the appendix, you'll find teaching tips, activity suggestions, and ideas on how to offer this course in your community.

### *With Every Heartbeat Is Life Sessions*

1. Knowledge Is Power: Know Your Risk for Heart Disease
2. React in Time to Heart Attack Signs
3. Get Energized! Say YES to Physical Activity
4. Control Your Blood Pressure
5. Keep Your Cholesterol in Check
6. Embrace Your Health! Aim for a Healthy Weight
7. Protect Your Heart From Diabetes
8. Make Traditional African American Dishes Heart Healthy
9. Eat Heart Healthy—Even When Time or Money Is Tight
10. Take Control of Your Health: Enjoy Living Tobacco Free
11. Review and Graduation
12. Evaluation To Track Your Progress (*Only for Community Health Workers*)

## About the Sessions

### Each session:

- Covers a different topic related to heart health
- Generally follows the same structure
- Includes “More Information” boxes to help you answer participants’ questions
- Lasts about 2 hours

## Evaluation

Session 12, *Evaluation To Track Your Progress (Only for Community Health Workers)*, describes how to evaluate the effectiveness of the With Every Heartbeat Is Life course. The session guides community health workers and evaluators in planning, implementation, and evaluation.

### It provides:

- Ideas for tracking activities
- Tools for measuring changes in participants’ behaviors and clinical values

These ideas and tools will show you whether your activities worked and will help you improve the quality of the course. Having this tracking data will be useful in your discussions with organizations that support your work.

## For More Information

For more information on diseases, conditions, and procedures related to heart disease, visit the NHLBI website at [www.nhlbi.nih.gov](http://www.nhlbi.nih.gov) or call the NHLBI Center for Health Information at 1-877-NHLBI4U (1-877-645-2448). For TRS, call 7-1-1.

## Session Outline

Each session begins with a summary page that explains:

- What you want participants to do or learn
- Materials and supplies you'll need
- What you need to prepare, if anything, before the class begins
- Handouts and take-home materials
- The session outline

In addition, each session includes five major parts:

### 1: Introducing the Session

- Welcome the participants.
- Review the information from the last session.
- Ask the participants to talk about their pledges. (See the Weekly Pledge section below.)
- Explain what you'll talk about today.

### 2: Conducting the Session

- Present new information to your group.
- Lead the group in fun, educational activities.
- Ask participants questions.
- Allow them to ask questions.

### 3: Review of Today's Key Points

- Ask questions to help the participants review what they just learned.
- Emphasize the key points.

### 4: Weekly Pledge

- Help participants come up with a pledge to use what they learned during the session.
- Give a few examples of specific, realistic pledges.
- (*Optional*) Talk about the role of personal values—qualities you consider important in yourself and others—for motivating lifestyle changes.

### 5: Closing

- Ask participants what they thought of the session. Thank them for their comments.

### Picture Cards

Along with this manual, you'll find picture cards that show a different aspect of heart health, from controlling blood pressure to being physically active and aiming for a healthy weight. Show participants the picture while reading out loud the text on the back.

### Symbols

These symbols tell you what to do next, including when to use a picture card:



**Do an activity.**



**Use a picture card.**



**Give out a handout.**



**Help participants make a pledge for heart health.**



**Give out a recipe.**



**Do a training activity.**

### Breaks and Refreshments

Take a short break about halfway through each session. Consider using the time to:

- Do some easy stretches (see the “Walking and Stretching” handout in Session 3 on page 3.27).
- Serve a healthy snack, such as yogurt, fruit, or vegetables with low-fat dip. Or you can prepare a recipe from this manual for participants to try. Have a pitcher of water and paper cups available or encourage participants to bring a reusable water bottle to class.

# Getting Started

## At Least 6 Weeks in Advance

1. **Find** a location to teach a class. Make sure you have a room to accommodate the number of participants you expect. Contact local clinics, schools, libraries, churches, recreation centers, or community centers. Depending on who signs up, you may need a space that's available after regular work hours.
2. **Promote** the course to community leaders, the Chamber of Commerce, local clubs, and your friends, acquaintances, and colleagues. Ask medical clinic staff, clergy, educators, and caseworkers to recommend the course. See the sample emails and social media posts on *The Heart Truth* website, and the flyer on page (I.16) for promoting the course.
3. If your organization uses social media, **promote** the course on your organization's social media accounts, and encourage others to share your posts. Also, put up flyers at health fairs, clinics, grocery stores, churches, libraries, and other places in your community.
4. **Put** announcements in online neighborhood listservs, and in online and print newsletters and local newspapers or magazines.

### Here are talking points for promoting the course:

- Heart health experts developed the course, and it's free.
- The course is for anyone who wants to learn more about protecting their heart health and those who are under a health care provider's care for heart disease.
- Participants will learn about risk factors for heart disease and how they can prevent it.
- The sessions will help participants learn what steps to take to protect and improve their—and their families' or friends'—heart health.
- Specifically, the sessions cover:
  - How to prevent or control high blood pressure, high cholesterol, and diabetes
  - How to prepare healthy food, particularly traditional African American meals
  - How to be more physically active, have a healthy weight, and quit smoking

### At Least 1 Week Before Each Session

1. **Read** through the sessions, the picture cards, and the handouts. Read them two or three times so you feel prepared.
2. **Practice** your presentation in front of a mirror or a friend or family member. Be sure to use the picture cards. Also, try making a few healthy changes in your own life.
3. **Review** the instructions for each activity. Make a list of what you need to do before the session, such as displaying items on a table or making a list of local places to get blood pressure, cholesterol, and glucose (blood sugar) levels checked.
4. **Pay attention** to the “More Information” boxes. They can help you answer questions you may get from participants.
5. **Ask** a health educator, registered dietitian, nurse, or doctor at a local hospital or clinic to explain any information you don’t understand. You can also contact the National Heart, Lung, and Blood Institute’s Center for Health Information at [nhlbiinfo@nhlbi.nih.gov](mailto:nhlbiinfo@nhlbi.nih.gov) or 1-877-NHLBI4U (1-877-645-2448). For TRS, call 7-1-1.
6. **Review** the list of handouts, materials, and supplies you’ll need for each session to make sure you have enough of everything.
7. **Make** enough copies of the handouts for all participants.

### The Day of the Session

1. **Review** the list of materials, supplies, and handouts. Make sure you have everything.
2. **Arrive** 30 to 60 minutes ahead of time to set up the room.

# Tips for Working With Your Group

## Leading the Group

- **Get to know** the participants. They may have varied backgrounds, interests, and needs.
- **Encourage** participants to ask questions. Asking questions will help them apply the information to their lives and remember what they've learned.
- **Keep** the sessions flowing, so everyone is interested and involved.
  - If someone talks for too long, thank them for sharing their opinion. Then quickly ask if anyone else has something to share.
  - If only a few people are talking, ask more questions or change the discussion topic.
  - Help participants who don't read or write well, but do this quietly and without bringing attention to them.
  - Offer help without being pushy.
  - Be observant. Watch for clues that people don't understand or are losing interest, such as:
    - Looking puzzled
    - Looking away from you
    - Being quiet
    - Looking at their phone
- **Ask** participants to leave their phone in their bag or pocket and to turn the sound off, unless they're expecting an urgent call.

## Motivating Participants

- **Praise or reward** participants' efforts.
  - Praise and rewards can make the information you're teaching more meaningful to participants.
  - Praising and rewarding people can help them stay committed.
- **Encourage** participants to share their opinions.
- **Show interest** in participants and what they say.
- **Be patient.** Some people may not speak because they aren't used to sharing their ideas in a group.
- **Try to involve** everyone in the discussion and activities, but don't force it. People will speak up when they become more comfortable.

### Getting People To Attend

- **Tell participants** that at every session they'll:
  - Learn something new that helps them and their family or friends
  - Be with other motivated people
- **Suggest** they remind each other to attend the sessions or carpool to class.
- **Remind** them what time the sessions start and how long they last.

### Answering Hard Questions

Remember that it's okay not to know all the answers! Say that you'll have the correct answer by the next session. Call a local health educator, registered dietitian, or nurse to find out the correct information. If participants ask personal medical questions, it's best to tell them they should talk to their health care provider.

### Keeping People on Track

If a participant says something incorrect, thank them for any part of the information that's correct. Then say:

- There's a lot of incorrect information out there, particularly on the Internet.
- This is one reason why you're coming to the sessions—to get correct information!

### For More Information

Review the handouts on pages A.7-A.8, "Tips To Teach the *With Every Heartbeat Is Life* Manual" and "12 Ground Rules for Teaching Groups." They are in the Appendix.

### And Finally...

Have a good time. You're doing an important service for yourself and your community. Thank you!

## Let's Hear From You!

Thank you for helping African Americans to protect their hearts. Please tell us how you're using the *With Every Heartbeat Is Life* manual and picture cards in your community.

Your feedback will help make sure NHLBI continues to provide useful educational tools to help you promote heart health in your community.

Please send your feedback to *The Heart Truth* Program Team at **[HealthEdu@nhlbi.nih.gov](mailto:HealthEdu@nhlbi.nih.gov)**.

# Did You Know...?

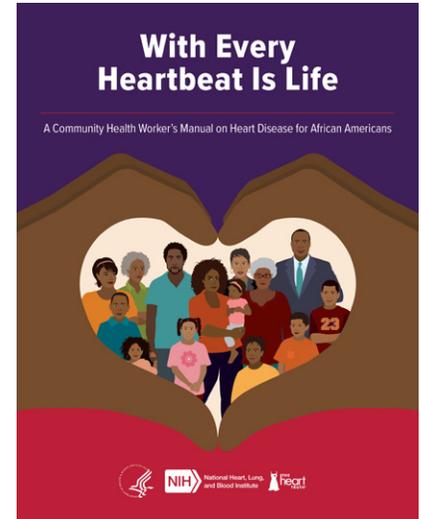
About one out of four African Americans dies of heart disease.  
But you can do something about it!



## Take the free course: With Every Heartbeat Is Life!

### It's designed for you.

- ♥ Learn how to keep your own heart healthy, and help your family and friends do the same.
- ♥ Participate in games, role-playing, and other fun learning activities.
- ♥ Find out ways to be more active, eat in a heart healthy way, keep a healthy weight, and quit smoking.
- ♥ Learn how to talk to your family, neighbors, and friends about heart disease and how to help prevent it.
- ♥ Get take-home materials you can share with others.



## Classes meet once a week for 11 weeks.

Classes meet on \_\_\_\_\_

Sponsored by \_\_\_\_\_

Location \_\_\_\_\_

Day/time \_\_\_\_\_

Classes begin on \_\_\_\_\_

For more information or to register, contact \_\_\_\_\_



**The Course is Free!**

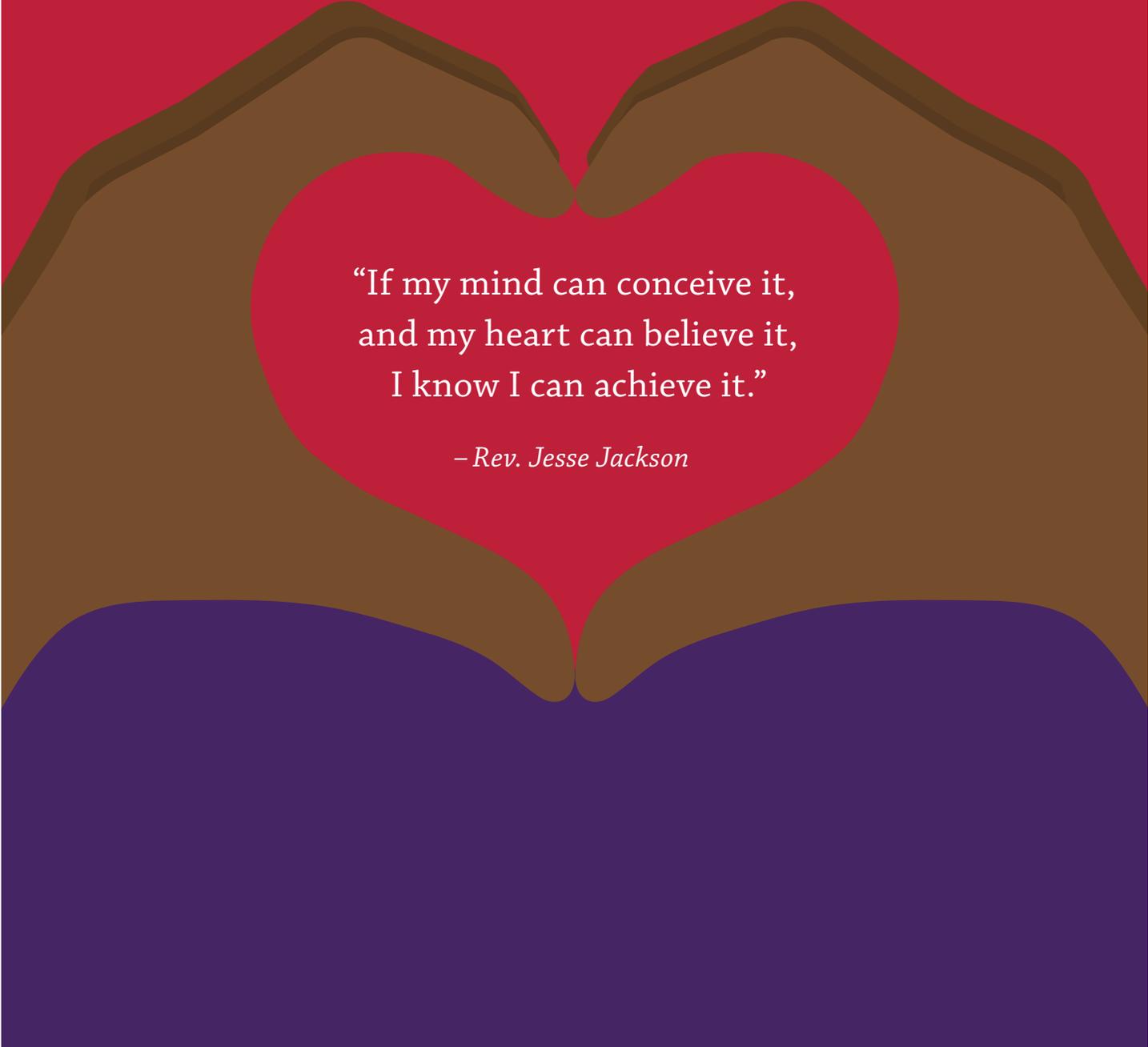
**Everyone who completes the classes will receive a certificate.**

# Begin With a Heart

Use this shape to cut out the heart. You will use these heart shapes in Session 1. (See page 1.1.)



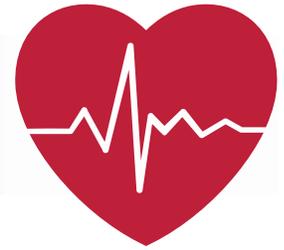
# Knowledge Is Power: Know Your Risk for Heart Disease

An illustration of two hands, one light brown and one dark brown, cupping a red heart. The hands are positioned as if holding the heart gently. The background is a solid red color at the top, transitioning to a dark purple at the bottom.

“If my mind can conceive it,  
and my heart can believe it,  
I know I can achieve it.”

*– Rev. Jesse Jackson*

# Session 1



## Knowledge Is Power: Know Your Risk for Heart Disease

### Objectives

#### By the end of this session, participants will:

- Understand how you'll teach the With Every Heartbeat Is Life course
- Understand how the heart works and its importance
- Know lifestyle changes they can make to help reduce their risk of heart disease
- Understand their risks of developing heart disease

---

### Materials and Supplies

#### To conduct this session, you'll need:

- *With Every Heartbeat Is Life* manual and picture cards
- Name tags
- Hearts cut from red felt or red construction paper. Look for felt that has a sticky (adhesive) backing. (Use the shape on page I.17 to cut out the heart.)
- Safety pins (if not using felt with sticky backing)
- Blackboard and chalk, dry erase board, or several large pieces of paper, a marker, and tape
- Clear container filled with 4 cups of water

---

### Handouts

#### Give each participant these handouts during this session:

- Introducing the Harris Family and Friends (page 1.22)
- Are You at Risk for Heart Disease? (page 1.23)
- Harris Family Health History (page 1.24)
- My Family Health History (page 1.25-1.26)

## Before This Session

Read the “More Information” chart on pages 1.14-1.16 to be ready to answer questions from participants. This chart lists heart disease risk factors that you can do something about. It also has steps to take to lower those risks.

## Session Outline

### Introducing the Session

1. Welcome
2. Overview of the With Every Heartbeat Is Life course
3. Guidelines

### Conducting the Session

1. Getting To Know Each Other
2. Getting To Know the Secrets of the Heart
  - A. How the Heart Works
  - B. The Heart’s Structure
3. Facts About Heart Disease
4. Risk Factor Activity
5. Family Health History Activity

### Review of Today’s Key Points

### Closing

# Introducing the Session

## 1. Welcome

- **Introduce** yourself as participants walk in.
- **Ask** each participant their name. **Write** it on a name tag.
- **Give** each participant a name tag and a felt or paper heart.
- **Ask** participants to wear the name tag on their shirt and to place the felt/paper heart over their own heart.
- **Welcome** participants to the session. **Tell** them you're very happy to see them.

---

**SAY** I want to start today's discussion with a quote from Rev. Jesse Jackson. He said, "If my mind can conceive it, and my heart can believe it, I know I can achieve it."

---

**ASK** What does this quote mean to you?

### NOTE



Allow 2 or 3 minutes for participants to respond.

**SAY** These classes will prepare you to make healthy lifestyle changes in order to help you live heart healthy today and into your future—your tomorrow! I congratulate you on taking this step for your health.

## 2. With Every Heartbeat Is Life Overview

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**SAY** Heart disease is the #1 cause of death in this country. The National Heart, Lung, and Blood Institute (NHLBI) created With Every Heartbeat Is Life to help African Americans prevent heart disease. NHLBI is part of the National Institutes of Health, the federal government's health research agency.

**SAY** Knowledge is power. Knowing your risk for heart disease can encourage you to do something about it.

Learning how to protect your heart empowers you to take better care of yourself and your family.

**SAY** This heart health education course includes 11 sessions for you to attend, plus an optional tour of a grocery store.

**NOTE**

If you're teaching the course to community health workers, **explain** that there's a 12th session that's only for them.

**SAY** The sessions cover these topics:

**DO** **Put** the names of the sessions on the blackboard, dry erase board, or large piece of paper taped to the wall:

1. Knowledge Is Power: Know Your Risk for Heart Disease
2. React in Time to Heart Attack Signs
3. Get Energized! Say YES to Physical Activity
4. Control Your Blood Pressure
5. Keep Your Cholesterol in Check
6. Embrace Your Health! Aim for a Healthy Weight
7. Protect Your Heart From Diabetes
8. Make Traditional African American Dishes Heart Healthy
9. Eat Heart Healthy—Even When Time or Money Is Tight
10. Take Control of Your Health: Enjoy Living Tobacco Free
11. Review and Graduation

**SAY** Please come to all of the sessions. I'll lead them, but I need each of you to participate. This will help you learn the information and enjoy the sessions more. Please feel free to ask questions. Your questions also help others learn.

**DO** **Give** each participant the “Introducing the Harris Family and Friends” handout (page 1.22). **Ask** for a volunteer to read it out loud.



**DO** **Show** picture card 1.1.



**SAY** We'll be talking about the Harris family to learn how a family can adopt healthy habits together.

### 3. Guidelines

#### NOTE



This section will help participants feel like a team. It also will make it easier for you to lead the sessions.

**SAY** Everyone will feel more at ease if you know what to expect from the course, and we agree as a group on a few basic guidelines.

**SAY** This course takes effort and time. It's important for each of you to attend every session and to arrive on time. Sessions are about 2 hours long.

#### NOTE



**Ask** the following only if you're able to make time and location changes:

**ASK** How often do you want to meet—once a week, twice a week?  
Is this a good time and place to meet?

#### NOTE



**Give** everyone a few minutes to respond and **decide** on a time and location that's best for most of the group.

- SAY** Here's how to get the most out of each session:
1. Ask questions.
  2. Share your personal experiences. This will make the course more meaningful to all of us.
  3. Stick to the topic we're discussing. We have a lot of information to cover in a short time.
  4. *(Optional)* Contact me at (telephone number or email) if you have questions or concerns about this course. I'm here to help you in any way that I can.

---

**SAY** Because you'll share your experiences and opinions, we need to agree on a few things. Say "yes" if you agree to the following questions.

---

**ASK** Do you agree to keep other participants' comments to yourself?  
Do you agree not to judge others?  
Do you agree to try to come to all of the sessions?

---

**ASK** Do you have other guidelines you'd like to suggest?

**NOTE**

Allow a few minutes for participants to respond.

# Conducting the Session

## 1. Getting To Know Each Other

**SAY** We'll begin today's session by introducing ourselves and getting to know each other.

Please introduce yourself and tell one or two things about yourself.

Say why you came to this class and what you hope to learn. I'll go first.

### NOTE



**Tell** the group why you're interested in heart health. **Be honest** and **talk** about your own experience.

**SAY** Share what you learn in this course about heart health with your family and friends. Encourage them to adopt heart healthy habits with you. Thank you for making this effort.

## 2. Getting To Know the Secrets of the Heart

**SAY** Now that we know a little bit about each other, let's get to know our heart.

### A. How the Heart Works

**SAY** The heart is an amazing part of the body. In a single day, it beats about 100,000 times and pumps about 2,000 gallons of blood throughout your body.

Your blood carries the oxygen and nutrients to your organs so they'll get what they need to work well.

Your heart is vital to your health and nearly everything that goes on in your body.

## NOTE



**Hold up** a clear container that has about a quart (4 cups) of water in it. **Remind** the group that in one minute, your heart pumps about five quarts of blood through your arteries.

## SAY

Health care providers can learn a little bit about the health of your heart simply by taking your pulse. For example, they learn what your resting heart rate is and whether it's slow or fast.

To find your pulse, gently place the index and middle fingers of one hand on the inside wrist of your other hand. Slide your two fingers toward the thumb side of your wrist until you feel a heartbeat.



## DO

**Show** participants how to do this.

## B. The Heart's Structure

## DO

**Show** picture card 1.2.



PICTURE

## SAY

The heart is a muscular, cone-shaped organ about the size of a fist.

## DO

**Hold up** your fist for everyone to see.

**Point** to each part of the heart on the picture card.

## SAY

The septum divides the heart into two sides. Each side has an upper chamber, called an atrium, and a lower chamber, called a ventricle.

Blood that has moved through your body and is low in oxygen enters the right atrium. Your heart pumps that blood to the right ventricle, then to your lungs for a refill on oxygen.

That oxygen-rich blood goes into the left atrium, on to the left ventricle, and out to the rest of your body.

DO **Show** picture card 1.3.



**SAY** The heart is located in the middle of the chest, near your lungs. Did you place your felt or paper heart in the correct spot?

Your heart and blood vessels make up your blood circulatory system. The circulatory system keeps you alive.

Blood vessels are long, hollow tubes of tissue, much like drinking straws.

**SAY** You have many different types of blood vessels. But the main three are arteries (shown in red), veins (shown in blue), and capillaries (not shown). Arteries carry the oxygen-rich blood from your heart to all parts of your body. The farther the arteries are from your heart the smaller they are. Capillaries connect your smallest arteries to your smallest veins, which carry blood that is low on oxygen back toward your heart.

DO **Show** picture card 1.4.



NOTE



**Point** to each vein and artery. **Describe** the two steps while pointing to pictures 1 and 2.

**SAY** Let's go over the major veins and arteries.

Blood (with little oxygen) enters the right, top chamber of the heart through the largest veins in your body. These veins are called the superior and inferior vena cava.

Blood then flows down to the right lower chamber, where it's pumped out to the lungs through the pulmonary arteries. In the lungs, waste (carbon dioxide) is removed from the blood. The blood then gathers more oxygen.

DO **Show** picture card 1.5.



## NOTE



**Point** to each vein and artery. **Describe** the two steps while pointing to pictures 3 and 4.

## SAY

The blood, rich with oxygen, returns to the heart and enters the upper left chamber through the pulmonary veins.

The blood then flows down to the lower left chamber and is pumped out of the aorta (which is your body's largest artery) to the rest of your body. Your left and right coronary arteries carry oxygen-rich blood to all parts of your heart.

## SAY

We're going to review the meaning of a few terms that often get confused.

**Cardiovascular disease** is the umbrella term for *all* types of diseases of your heart or blood vessels.

One type of cardiovascular disease is **coronary heart disease**. This is when a person has "clogged arteries."

The term **heart disease** by itself is a catch-all phrase for a variety of problems that affect the heart's structure and how it works. The most common type of heart disease is coronary heart disease, when the arteries are clogged.

## NOTE



**Visit** *The Heart Truth* website at [www.hearttruth.gov](http://www.hearttruth.gov) for additional resources to help explain the difference between cardiovascular disease, coronary heart disease, and heart disease.

### 3. Facts About Heart Disease

**NOTE**

Before the session, **read** the “More Information” chart on pages 1.14-1.16.

**SAY**

Now that we know how important the heart is, let’s talk about heart disease and why it’s so important to protect your heart.

**ASK**

Do you know someone who has heart disease?

**NOTE**

Allow about 2 minutes for participants to respond.

**DO**

**Show** picture card 1.6.



PICTURE

**SAY**

Did you know that:

- Heart disease is the #1 cause of death for all men and women in the United States.
- One in four African Americans dies of heart disease.
- Heart disease is particularly deadly for African Americans.
- The death rate from heart disease is 24 percent higher for African American men and 26 percent higher for African American women of all ages than for whites.
- Among African Americans ages 25 to 44, the death rate from heart disease is *twice* as high for men, and *more than twice* as high for women, compared with whites in the same age group.

**SAY** This course will help you understand the facts about heart disease, such as:

- A heart attack or stroke may seem sudden, but the truth is that heart disease happens over many years. Often it begins when you're very young.
- Stress and anxiety play a role in heart disease. Stress and anxiety can trigger your arteries to tighten, which can raise your blood pressure and your risk of a heart attack.
- Preventing heart disease is important at any age. Just like maintaining your car, to keep it running smoothly, you need to care for your body so you keep it healthy and lower your chances of getting heart disease. This course will show you how.

---

**DO** **Show** picture card 1.7.



**SAY** In every session, you'll hear about risk factors—traits or habits that make a person more likely to get a disease. Some risk factors, such as your age and family history, are things you can't change.

Although there are some risk factors that you can't control, there are many that you can.

These include:

- Diabetes
- Heavy drinking
- Having high blood pressure, including preeclampsia, which occurs only during pregnancy. Having preeclampsia doubles your risk of heart disease and is more common among African Americans.
- High cholesterol
- Physical inactivity
- Not getting enough sleep
- Sleep apnea
- Being overweight
- Smoking
- Stress

## 4. Risk Factor Activity



ACTIVITY

**DO** **Give** each participant the “Are You at Risk for Heart Disease?” handout (page 1.23). **Read** out loud each risk factor. **Ask** participants to check off the ones they have.



HANDOUT

**SAY** The more risk factors you’ve checked, the greater your risk for heart disease and stroke. Talk to your doctor about your risk.

**SAY** This course will explain how these risk factors affect the heart. It also will teach you ways that you and your family can prevent or control them, such as by:

- Getting your blood pressure, cholesterol, and blood sugar levels checked
- Maintaining a healthy weight
- Being more physically active
- Not smoking
- Getting enough sleep
- Getting checked for sleep apnea (when airways are blocked during sleep)
- Taking your medications as prescribed
- Improving your diet
- Learning how to manage stress
- Limiting or avoiding alcohol

### NOTE



(Optional) **Share** information about NHLBI’s *The Heart Truth* program described in the Appendix (page A.11).

More Information

Heart Disease Risk Factors You Can Do Something About

Risk Factors	Facts You Need To Know	Take These Steps To Prevent Heart Disease
<p><b>High blood pressure</b></p> <p>High blood pressure, also called hypertension, is called the “silent killer” because it often has no symptoms, yet it can be deadly.</p>	<ul style="list-style-type: none"> <li>▪ When your blood pressure stays high for a period of time, it can cause serious health problems.</li> <li>▪ High blood pressure makes your heart work harder than it should.</li> <li>▪ Untreated high blood pressure can lead to stroke (brain attack), heart attack, eye and kidney problems, and death.</li> </ul>	<ul style="list-style-type: none"> <li>▪ If your doctor gives you blood pressure medicine, take it the way the doctor tells you to.</li> <li>▪ Check your blood pressure once a year, or more often if it’s high.</li> <li>▪ Aim for a healthy weight.</li> <li>▪ Be physically active.</li> <li>▪ Choose and prepare foods with less salt and sodium.</li> <li>▪ Eat more fruits and vegetables.</li> <li>▪ Choose low-fat milk products.</li> <li>▪ Follow the DASH Eating Plan.</li> <li>▪ If you drink alcohol, do so in moderation.</li> </ul>
<p><b>Cholesterol</b></p> <ul style="list-style-type: none"> <li>▪ Our bodies need some cholesterol, a waxy substance that’s in all the cells of our bodies.</li> <li>▪ Low-density lipoprotein (LDL) is the “bad” cholesterol. High levels of it can clog your arteries.</li> <li>▪ Another type of cholesterol, high-density lipoprotein (HDL), is the “good” cholesterol. It carries cholesterol away from your arteries.</li> </ul>	<p><b>Check your cholesterol numbers (mg/dL*)</b></p> <ul style="list-style-type: none"> <li>▪ A healthy total cholesterol level is less than 200 mg/dL.</li> <li>▪ Your LDL should be less than 100 mg/dL.</li> <li>▪ Men should have an HDL of 40 mg/dL or higher. Women’s should be 50 mg/dL or higher.</li> <li>▪ These numbers are for a person who doesn’t have any risk factors for heart disease. Talk with your health care provider about what your cholesterol numbers should be.</li> <li>▪ Like cholesterol, triglycerides are a type of fat in your blood. High levels put you at risk of a heart attack or stroke.</li> </ul>	<p><b>Ask your doctor for a blood test called a lipid profile</b></p> <ul style="list-style-type: none"> <li>▪ This blood test measures all your cholesterol levels (total, LDL, HDL, and triglycerides).</li> <li>▪ How often you need the blood test depends on your age and whether anyone in your family has high cholesterol or heart disease.</li> <li>▪ Learn what your cholesterol numbers mean. If they’re high, ask your doctor how to lower them.</li> <li>▪ Choose foods that are lower in saturated fat.</li> <li>▪ To control your triglycerides:             <ul style="list-style-type: none"> <li>– Limit sweets, regular soda, juice, and other sugary drinks.</li> <li>– Don’t smoke.</li> <li>– Limit how much alcohol you drink.</li> </ul> </li> </ul>

\*milligrams per deciliter

**Heart Disease Risk Factors You Can Do Something About** (continued)

Risk Factors	Facts You Need To Know	Take These Steps To Prevent Heart Disease								
<p><b>Overweight</b></p> <p>Being overweight increases your risk of developing heart disease, high blood pressure, diabetes, gallstones, breathing problems, and certain cancers.</p>	<p>Check your body mass index (BMI) and waist measurement:</p> <table border="1" data-bbox="613 527 1003 699"> <thead> <tr> <th>Category</th> <th>BMI</th> </tr> </thead> <tbody> <tr> <td>Normal</td> <td>18.5 – 24.9</td> </tr> <tr> <td>Overweight</td> <td>25 – 29.9</td> </tr> <tr> <td>Obese</td> <td>30 or greater</td> </tr> </tbody> </table> <p>Your risk of heart disease increases if your waist is, for women, over 35 inches and for men, over 40 inches.</p>	Category	BMI	Normal	18.5 – 24.9	Overweight	25 – 29.9	Obese	30 or greater	<ul style="list-style-type: none"> <li>▪ Aim for a healthy weight. Try not to gain extra weight.</li> <li>▪ If you're overweight, try to lose 1 to 2 pounds a week.</li> <li>▪ Set a goal to be physically active for at least 30 minutes a day most, and preferably all, days of the week.</li> </ul>
Category	BMI									
Normal	18.5 – 24.9									
Overweight	25 – 29.9									
Obese	30 or greater									
<p><b>Diabetes</b></p> <p>Diabetes occurs when your blood sugar, also called blood glucose, is too high.</p>	<ul style="list-style-type: none"> <li>▪ Diabetes is a serious disease. About one in four people with diabetes don't know they have it.</li> <li>▪ It can lead to heart disease and stroke, blindness, amputations, kidney disease, and other health problems.</li> <li>▪ About 13 percent of African Americans have been diagnosed with diabetes.</li> <li>▪ Being overweight is a major risk factor for diabetes.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Find out if you have diabetes, and if so, how to keep it under control.</li> <li>▪ Ask your doctor how often you should have your blood sugar checked.</li> <li>▪ Medicare pays for the test if you have certain risk factors for diabetes.</li> </ul>								
<p><b>Physical Activity</b></p> <p>Being physically active is one important step you can take to protect yourself against heart disease and feel better every day!</p>	<ul style="list-style-type: none"> <li>▪ You can break your daily 30 minutes of physical activity into smaller chunks, if that's easier for you.</li> <li>▪ You know you're moving enough to help your heart if your heart is beating faster, you're breathing harder, or you break a sweat.</li> </ul>	<p>Stay active. Walk briskly, dance, play soccer, or do other activities that you enjoy.</p>								

**Heart Disease Risk Factors You Can Do Something About** (continued)

<b>Risk Factors</b>	<b>Facts You Need To Know</b>	<b>Take These Steps To Prevent Heart Disease</b>
<p><b>Smoking</b></p> <p>You put your health and your family’s and friends’ health at risk when you smoke.</p>	<ul style="list-style-type: none"> <li>▪ Cigarette smoking is addictive.</li> <li>▪ It harms your heart and lungs. It can raise your blood pressure and cholesterol level.</li> <li>▪ It harms the health of those around you.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Stop smoking now.</li> <li>▪ If you can’t quit the first time, keep trying.</li> <li>▪ If you don’t smoke, don’t start.</li> </ul>
<p><b>Sleep problems</b></p> <p>Not getting enough sleep is hard on your heart. One cause of poor sleep is a condition called sleep apnea, which is when you briefly stop breathing during sleep.</p>	<ul style="list-style-type: none"> <li>▪ When you sleep, your body is busy repairing your heart and blood vessels. Too little sleep increases your risk of heart disease, high blood pressure, diabetes, and stroke.</li> <li>▪ Sleep apnea can increase your risk for a heart condition called atrial fibrillation.</li> <li>▪ One cause of sleep apnea is obesity.</li> </ul>	<ul style="list-style-type: none"> <li>▪ If you think you have sleep apnea or if you have other sleep problems, talk with your health care provider. It’s important to get treatment. Having a healthy lifestyle will help you sleep better.</li> </ul>
<p><b>Stress</b></p> <p>Stress and anxiety play a role in heart disease. They can trigger your arteries to tighten, which can raise your blood pressure and your risk of a heart attack.</p>	<p>Stress may also raise your risk of heart disease if it makes you more likely to overeat or smoke.</p>	<ul style="list-style-type: none"> <li>▪ Join a stress management program.</li> <li>▪ Try meditation or relaxation therapy.</li> <li>▪ Be physically active.</li> <li>▪ Talk with your family, friends, a qualified mental health care provider, clergy, or doctor.</li> </ul>

## 5. Family Health History Activity



**SAY** Your family’s health history can give you information about your own health. Let’s begin by looking at an example of a family health history.

**DO** **Give** each participant the “Harris Family Health History” handout (page 1.24).



**SAY** Earlier, we met the members of the Harris family. Their family history shows health problems that family members have in common.

**DO** **Show** picture card 1.1 of the Harris family while you review the handout.



**Ask** a volunteer to read out loud the health conditions of the Harris family members.

**ASK** What can we learn about the Harris family by looking at their health history?

Is there anything the family needs to be concerned about? If so, what?

### NOTE



Allow 2 or 3 minutes for participants to respond.

**DO** **Add** these answers if they aren’t mentioned:

- The Harris family has a history of high blood pressure.
- Darnell should see a health care provider to get screened for heart disease.
- Two family members smoke and need to take steps now to quit.

**SAY** Knowing your own family health history will help you take action to control your risk for heart disease and stroke.

If you don't know many (or any) of your blood relatives or they have died, you can still learn about your risk factors for heart disease.

**DO** **Give** each participant the “My Family Health History” handout (page 1.25-1.26).



**SAY** Please take this handout home with you. Fill it out as best you can. Ask your family members about other members who aren't available to talk to, and about those who have died.

**NOTE**

As you explain how to fill out the family health history, **point** to the area of the handout that you're talking about.

**SAY** Let's talk about how to fill out the “My Family Health History” handout.

- Fill in each family member's name, age, and health conditions—such as high blood pressure, high cholesterol, diabetes, heart attack, or stroke.
- For family members who have died, write down their cause of death and age when they died.
- Be sure to complete the health information for yourself as well.

**ASK** How will you find out about the health history of your family?

**NOTE**

Allow 2 or 3 minutes for participants to respond.

**DO** **Add** these answers if they're not mentioned:

- Ask your relatives whether they have any of the heart disease risk factors we've talked about. Ask family members what they know about relatives who have died, including their health and cause of death.
- If you have adult children, ask them about their heart health. If you have younger children, talk to their health care provider on their next visit.

---

**SAY** Some family members may feel embarrassed or uncomfortable sharing information about their health. Here are some tips to get the conversation going:

- Show them the handout and ask them to help you fill it out.
- Talk about your own risk factors, and ask family members if they have the same or others.
- Tell them about this course and what you're learning.

---

**SAY** In later sessions, I'll ask for volunteers to share what they learned by completing their family history.

---

**DO** *(Optional)*

**Give** a prize to participants who have completed the family health history.

## Review of Today's Key Points

**ASK** What are the risk factors for heart disease that we can prevent or control?

**NOTE**



Allow 2 or 3 minutes for participants to respond.

**DO** **Add** these answers if they aren't mentioned:

- Overweight
- Physical inactivity
- High blood pressure
- High cholesterol
- Diabetes
- Smoking
- Unhealthy diet
- Stress
- Sleep apnea
- Not getting enough sleep

---

**SAY** You can't control your family history, but knowing your family's risk factors can help you protect your and your family's heart health.

It can be hard to change old, unhealthy habits and learn new healthy ones. As President Obama said, "Change will not come if we wait for some other person or if we wait for some other time. We are the ones we've been waiting for."

This course will teach you what you need to know to make healthy changes. Seeing you improve your health may inspire others to do the same.

## Closing

**ASK** Do you have any questions?

**NOTE**



**Give** participants a moment to respond.

**ASK** *(Optional)*

How many of you want to go on a grocery store tour? During week 8 or 9, a registered dietitian can lead us through a grocery store and help us learn how to shop for our hearts.

**NOTE**



If enough participants are interested, **call** the grocery store in your area and **set up** a time for a tour.

**SAY** Thank you for coming. What did you think of today's session?

**NOTE**



Allow a moment for participants to respond.

**SAY** In the next session, we're going to discuss the warning signs of a heart attack.

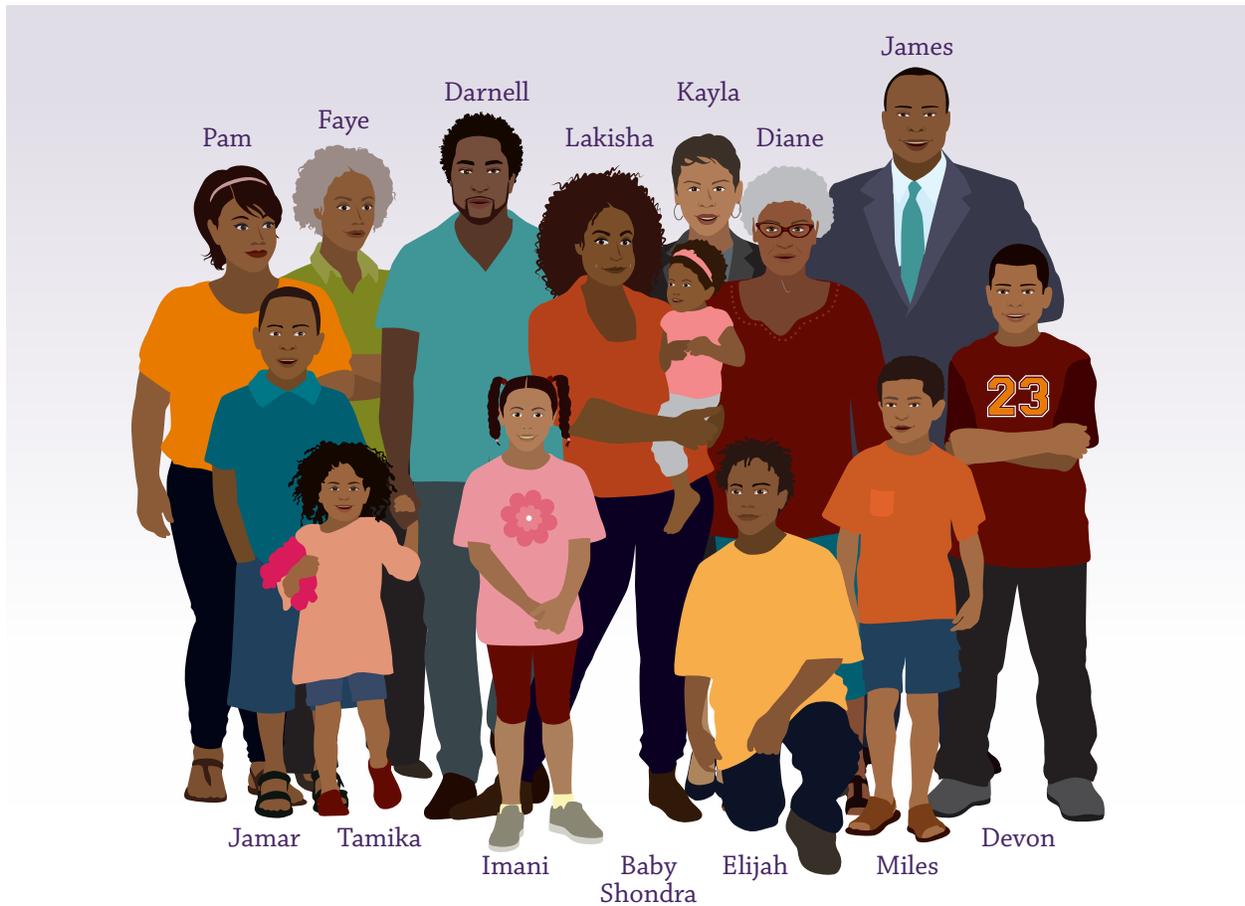
**NOTE**



**Think** about today's session. What worked and what didn't? Has the session helped you learn about your risk for heart disease?

# Introducing the Harris Family and Friends of the *With Every Heartbeat Is Life* manual

## An African American Family's Triumph



**The Harris family and friends together beat heart disease and live heart healthy. This family knows the toll that heart disease can have on families. They support and encourage each other to overcome challenges and learn new ways to be healthy.**

- Ms. Diane Harris (Grandma Harris) is determined to be there for her family. Her resolve and spirit to improve her family's heart health is a beacon of light that the family follows.
- The Harris family and friends show you how you can achieve a heart healthy lifestyle, too. Let's learn from their examples!
- By choosing a heart healthy lifestyle, you can embrace the best that life has to offer—for yourself, your family, and future generations.



# Are You at Risk for Heart Disease?

Name:

**Risk factors are traits or habits that make a person more likely to get heart disease. Read this list of risk factors for heart disease. Check the ones you have.**

## Heart disease risk factors you can do something about:

✓ Check the ones that you have:

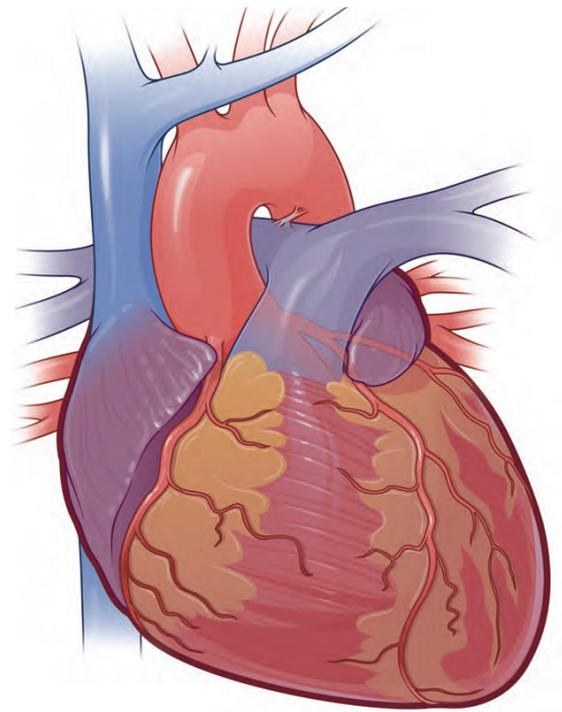
- |  |  |
|--|--|
| <input type="checkbox"/> Overweight          | <input type="checkbox"/> Physical inactivity |
| <input type="checkbox"/> High blood pressure | <input type="checkbox"/> Unhealthy diet      |
| <input type="checkbox"/> High cholesterol    | <input type="checkbox"/> Smoking             |
| <input type="checkbox"/> Diabetes            |  |

## Heart disease risk factors you can't control:

✓ Check the ones that you have:

- Age (45 years or older for men and 55 or older for women)
- Family history:
  - Father or brother with heart disease before age 55
  - Mother or sister with heart disease before age 65

**The more risk factors you have checked, the greater your risk for heart disease. Talk to your doctor about your risk.**





# Harris Family Health History

<p><b>Name:</b> Ms. Diane  <b>Age:</b> 63  <b>Relationship:</b> Mother  <b>Health Conditions:</b>                      Diabetes, high blood pressure  <b>Cause of Death (if applicable):</b>  <b>Age at Death:</b></p>	<p><b>Name:</b> Bill  <b>Age:</b> Deceased  <b>Relationship:</b> Father  <b>Health Conditions:</b>                      High blood pressure, smoked  <b>Cause of Death (if applicable):</b>                      Heart attack  <b>Age at Death:</b> 55</p>	<p><b>Name:</b> Harold  <b>Age:</b> 65  <b>Relationship:</b> Uncle  <b>Health Conditions:</b>                      Diabetes, high blood pressure  <b>Cause of Death (if applicable):</b>  <b>Age at Death:</b></p>	<p><b>Name:</b> Faith  <b>Age:</b> 56  <b>Relationship:</b> Aunt  <b>Health Conditions:</b>                      Smokes  <b>Cause of Death (if applicable):</b>  <b>Age at Death:</b></p>
<p><b>Name:</b> Kayla  <b>Age:</b> 37  <b>Relationship:</b> Self  <b>Health Conditions:</b>                      Prediabetes, high blood pressure, overweight  <b>Cause of Death (if applicable):</b>  <b>Age at Death:</b></p>	<p><b>Name:</b> Darnell  <b>Age:</b> 27  <b>Relationship:</b> Brother  <b>Health Conditions:</b>                      High blood pressure, smokes  <b>Cause of Death (if applicable):</b>  <b>Age at Death:</b></p>	<p><b>Name:</b> Pam  <b>Age:</b> 40  <b>Relationship:</b> Sister  <b>Health Conditions:</b>                      Overweight, high blood pressure, heart attack  <b>Cause of Death (if applicable):</b>  <b>Age at Death:</b></p>	<p><b>Name:</b> Ronnie  <b>Age:</b> 57  <b>Relationship:</b> Uncle  <b>Health Conditions:</b>                      High blood pressure  <b>Cause of Death (if applicable):</b>  <b>Age at Death:</b></p>
<p><b>Name:</b> Miles  <b>Age:</b> 8  <b>Relationship:</b> Son  <b>Health Conditions:</b>  <b>Cause of Death (if applicable):</b>  <b>Age at Death:</b></p>	<p><b>Name:</b> Imani  <b>Age:</b> 10  <b>Relationship:</b> Daughter  <b>Health Conditions:</b>                      Overweight  <b>Cause of Death (if applicable):</b>  <b>Age at Death:</b></p>	<p><b>Name:</b> Elijah  <b>Age:</b> 13  <b>Relationship:</b> Son  <b>Health Conditions:</b>  <b>Cause of Death (if applicable):</b>  <b>Age at Death:</b></p>	<p><b>Name:</b> Jamar  <b>Age:</b> 10  <b>Relationship:</b> Nephew  <b>Health Conditions:</b>  <b>Cause of Death (if applicable):</b>  <b>Age at Death:</b></p>



# My Family Health History

Fill in the following information for each family member:

- Name
- Age
- Relationship to you
- Health conditions (such as heart attack, high blood pressure, diabetes, etc.)
- Cause of death and age (if deceased)

**Name:** \_\_\_\_\_  
**Age:** \_\_\_\_\_  
**Relationship:** \_\_\_\_\_  
**Health Conditions:** \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

**Cause of Death (if applicable):** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Age at Death:** \_\_\_\_\_

**Name:** \_\_\_\_\_  
**Age:** \_\_\_\_\_  
**Relationship:** \_\_\_\_\_  
**Health Conditions:** \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

**Cause of Death (if applicable):** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Age at Death:** \_\_\_\_\_

**Name:** \_\_\_\_\_  
**Age:** \_\_\_\_\_  
**Relationship:** \_\_\_\_\_  
**Health Conditions:** \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

**Cause of Death (if applicable):** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Age at Death:** \_\_\_\_\_

**Name:** \_\_\_\_\_  
**Age:** \_\_\_\_\_  
**Relationship:** \_\_\_\_\_  
**Health Conditions:** \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

**Cause of Death (if applicable):** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Age at Death:** \_\_\_\_\_

**Name:** \_\_\_\_\_  
**Age:** \_\_\_\_\_  
**Relationship:** \_\_\_\_\_  
**Health Conditions:** \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

**Cause of Death (if applicable):** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Age at Death:** \_\_\_\_\_

**Name:** \_\_\_\_\_  
**Age:** \_\_\_\_\_  
**Relationship:** \_\_\_\_\_  
**Health Conditions:** \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

**Cause of Death (if applicable):** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Age at Death:** \_\_\_\_\_



# My Family Health History (Continued)

Name: \_\_\_\_\_  
Age: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Health Conditions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Cause of Death *(if applicable)*: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Age at Death: \_\_\_\_\_

Name: \_\_\_\_\_  
Age: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Health Conditions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Cause of Death *(if applicable)*: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Age at Death: \_\_\_\_\_

Name: \_\_\_\_\_  
Age: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Health Conditions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Cause of Death *(if applicable)*: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Age at Death: \_\_\_\_\_

Name: \_\_\_\_\_  
Age: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Health Conditions: \_\_\_\_\_  
\_\_\_\_\_  
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Cause of Death *(if applicable)*: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Age at Death: \_\_\_\_\_

Name: \_\_\_\_\_  
Age: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Health Conditions: \_\_\_\_\_  
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Cause of Death *(if applicable)*: \_\_\_\_\_  
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Age at Death: \_\_\_\_\_

Name: \_\_\_\_\_  
Age: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Health Conditions: \_\_\_\_\_  
\_\_\_\_\_  
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Cause of Death *(if applicable)*: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Age at Death: \_\_\_\_\_

Name: \_\_\_\_\_  
Age: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Health Conditions: \_\_\_\_\_  
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Cause of Death *(if applicable)*: \_\_\_\_\_  
\_\_\_\_\_  
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Age at Death: \_\_\_\_\_

Name: \_\_\_\_\_  
Age: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Health Conditions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Cause of Death *(if applicable)*: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Age at Death: \_\_\_\_\_

Name: \_\_\_\_\_  
Age: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Health Conditions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Cause of Death *(if applicable)*: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Age at Death: \_\_\_\_\_

# React in Time to Heart Attack Signs

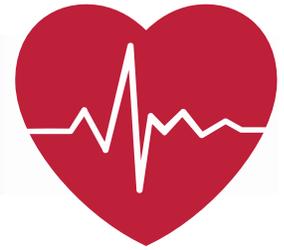
Session 2



“There’s time enough, but none  
to spare.”

– *Charles W. Chestnutt*

# Session 2



## React in Time to Heart Attack Signs

### Objectives

#### By the end of this session, participants will learn:

- What a heart attack is and how to recognize its warning signs (symptoms)
- The importance of seeking treatment quickly if someone has symptoms
- Why people may delay calling 9-1-1
- The benefits of calling 9-1-1
- How to plan ahead

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### Materials and Supplies

#### To conduct this session, you'll need:

- *With Every Heartbeat Is Life* manual and picture cards
- Blackboard and chalk, dry erase board, or several large pieces of paper, a marker, and tape

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### Handouts

#### Give each participant these handouts during this session:

- Fast Action Saves Lives (page 2.17)
- Learn What a Heart Attack Feels Like (page 2.18)
- Fast Action Saves Lives: Role Plays (pages 2.19-2.20)
- My Emergency Card (page 2.21)

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### Before This Session

*(Optional)*

Arrange for a health professional to come to the session to discuss cardiopulmonary resuscitation (CPR).

## **Session Outline**

### **Introducing the Session**

1. Welcome
2. Review of Last Week's Session
3. About This Session

### **Conducting the Session**

1. The Facts Don't Lie
2. What Is a Heart Attack?
3. Get Rapid Treatment for a Heart Attack: Delay Can Be Deadly
4. What Are the Warning Signs of a Heart Attack?
5. What To Do After Calling 9-1-1
6. The Role of Emergency Medical Services
7. How To Plan Ahead

### **Review of Today's Key Points**

### **Weekly Pledge**

### **Closing**

# Introducing the Session

## 1. Welcome

**DO**      **Welcome** participants to the session.

## 2. Review of Last Week's Session

**SAY**      At the last session, we talked about the risk factors for heart disease. Who remembers the risk factors we can control?

### NOTE



Allow 2 or 3 minutes for participants to respond.

**DO**      **Add** the following if participants don't mention them:

- Diabetes
- Heavy drinking
- High blood pressure
- High cholesterol
- Physical inactivity
- Not getting enough sleep
- Sleep apnea
- Overweight
- Smoking
- Stress

**ASK** Would any of you like to share what you're doing or plan to do to improve your heart health?

**NOTE**



Allow about 2 minutes for participants to respond.

**ASK** Has anyone completed the family health history?

**NOTE**



(Optional) **Give** a prize to participants who have completed the family health history.

**ASK** Does anyone want to share what you've learned about your family health history?

**NOTE**



Allow about 5 minutes for participants to respond.

### 3. About This Session

**SAY** If you have symptoms of a heart attack, the sooner you get help, the better. Heart attacks can seriously damage the heart and can even be fatal. That's why it's important to know the warning signs of a heart attack and what to do if you or someone near you has symptoms.

**SAY** Charles W. Chestnutt, an African American writer from the late 1800s and early 1900s, said, "There's time enough, but none to spare."

**ASK** What does this quote mean to you?

**NOTE**



Allow about 5 minutes for participants to respond.

**SAY** In today's session, we'll talk about the warning signs of a heart attack and the importance of acting quickly if you or someone else has warning signs. By the end of this session, you'll also know:

- Some basics about how the heart functions
- What a heart attack is
- Why people may delay getting help for a heart attack
- The benefits of calling 9-1-1
- Steps you can take now to help you survive a heart attack
- How to prepare your emergency card

# Conducting the Session

## 1. The Facts Don't Lie

- SAY** In the United States, someone has a heart attack every 40 seconds. Of those who die, about half do so within an hour of their first symptoms and before they reach the hospital.
- African Americans are at higher risk of having a heart attack than other groups.

## 2. What Is a Heart Attack?

- SAY** Let's talk more about what a heart attack is.

**DO** **Show** picture card 2.1.



PICTURE

- SAY** Normally blood flows freely through arteries, carrying oxygen to your heart. When a blockage stops the blood from getting to your heart, you have a heart attack. Here's how that can happen:
- Certain risk factors for heart disease—like smoking—can damage blood vessels.
  - Plaque, a waxy substance, may build up where your arteries are damaged, reducing the flow of blood to your heart.
  - A blood clot may form on the plaque, blocking the arteries and closing off blood flow. This causes a heart attack.
  - If you don't get treatment to restore blood flow quickly, heart muscle begins to die.

**It's important to call 9-1-1 at the first symptoms of a heart attack.**

- ASK** Are there any questions about how heart attacks happen?

**NOTE**



Allow about 5 minutes for participants to respond.

### 3. Get Rapid Treatment for a Heart Attack – Delay Can Be Deadly

**SAY** Treatments for a heart attack have improved over the years. Now we have treatments that open up blood vessels and restore blood flow.

**DO** **Show** picture card 2.2.



PICTURE

**SAY** “Clot-busting” drugs dissolve the blood clots that block arteries. But you must get the drugs as soon as possible—within a few hours after symptoms start.

There’s also a treatment called angioplasty. To restore blood flow, doctors place a type of balloon in your blocked artery to open it up.

With angioplasty, you may also get a stent, a wire mesh tube that stays in the artery to keep it open.

**SAY** People, particularly African Americans, often wait too long before they seek medical help for the warning signs of a heart attack.

If you think that you or someone else has symptoms of a heart attack, don’t ignore it or feel embarrassed to get help. Call 9-1-1 for emergency medical care. Acting fast saves lives.

**DO** **Give** each participant the “Fast Action Saves Lives” handout (page 2.17).



HANDOUT

**SAY** Let’s go over how to act fast when someone has heart attack symptoms.

#### NOTE



**Ask** a volunteer to read the handout out loud.

**ASK** What might prevent you, your family, or your friends from calling 9-1-1 right away?

## NOTE



Allow about 5 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

## DO

**Add** the following reasons if participants don't mention them.

They may think that:

- Their symptoms aren't bad enough.
- Having a friend drive you is faster than going by ambulance.
- Emergency personnel won't respond fast enough.
- Having an ambulance show up at home or work is embarrassing, especially if it's a false alarm.
- An ambulance and medical care are too expensive.

## SAY

**Don't drive to the hospital or let someone else drive you. Call an ambulance! Medical personnel can begin lifesaving treatment on the way to the emergency room.**

## SAY

It's easy to talk about what to do when a heart attack happens. It's harder to take those actions during an emergency. So let's act out different scenarios to prepare for a real situation.

## NOTE



**Ask** participants to form teams of three or four. **Give** each team one of the three different role plays in the "Fast Action Saves Lives: Role Plays" handout (pages 2.19-2.20).



HANDOUT

## NOTE



**Ask** the teams to take a few minutes to read the role play and **decide** who will play which characters. Then **ask** each team to present their "drama" to the group.

## SAY

Thanks for volunteering. Remember: Calling 9-1-1 is the most important thing to do when you or someone else has symptoms of a heart attack. It's like bringing the hospital emergency department to your door.

## 4. What Are the Warning Signs of a Heart Attack?

**ASK** What warning signs would make you think someone is having a heart attack?

**NOTE**



**Write** participants' responses on the blackboard, dry erase board, or large piece of paper taped to the wall.

**DO** **Give** each participant the “Learn What a Heart Attack Feels Like” handout (page 2.18).



HANDOUT

**DO** **Show** picture card 2.3 and review the handout.



PICTURE

**SAY** Common warning signs of a heart attack are:

- Chest pain or an uncomfortable feeling of pressure, squeezing, or fullness that lasts more than a few minutes. It may even feel like heartburn or indigestion.
- Discomfort in one or both arms or shoulders, or in your neck, jaw, back, or stomach.
- Shortness of breath. It may be your only symptom!

Other symptoms include:

- Breaking out in a cold sweat
- Light-headedness or sudden dizziness
- Nausea or feeling sick to your stomach
- Feeling unusually tired for no reason, sometimes for days (especially if you're a woman)

**SAY**

The most common warning sign of a heart attack is chest pain or discomfort. However, some people have no chest pain.

Not all heart attacks happen the way you see them on TV or in the movies—where a person grabs their chest and falls to the floor.

- The symptoms of a heart attack are different for everyone.
- Symptoms of a heart attack can happen suddenly or develop slowly—over hours, days, or weeks.
- Some people have so few symptoms they don't know they're having a heart attack.

**ASK**

Why do you think someone might not realize they're having a heart attack?

**NOTE**

Allow about 5 minutes for participants to respond.

**Add** the following reasons if they aren't mentioned:

- You may confuse heart attack symptoms with other conditions, such as indigestion.
- Some people don't have symptoms at all. Heart attacks that occur without any symptoms or with very mild symptoms are called silent heart attacks.
- If you don't believe you're at risk for having a heart attack, it's easy to ignore the warning signs or wait to see if they get worse.

## 5. What To Do After Calling 9-1-1

**SAY** If you think someone is having a heart attack:

- Have the person sit down, rest, and try to keep calm.
- Loosen any tight clothing.

### **DON'T**

- Don't leave them alone except to call for help, if necessary.
- Don't allow them to deny the symptoms and convince you not to call for emergency help.
- Don't wait to see if the symptoms go away.
- Don't give the person anything by mouth unless they have a prescribed heart medicine (such as nitroglycerin).

## 6. The Role of Emergency Medical Services

**SAY** Our actors did a great job of showing us why it's important to call 9-1-1 right away.

**ASK** What are the benefits of calling 9-1-1?

### **NOTE**



Allow 3 minutes for participants to respond.

**Add** these answers if they don't mention them:

- Emergency personnel can arrive quickly and begin diagnosis and treatment even before you get to the hospital.
- On the way to the hospital, emergency personnel tell hospital staff to prepare for your arrival. That saves valuable time. Arriving by ambulance gets you faster treatment.
- Your heart may stop beating during a heart attack. Emergency personnel carry equipment to restart your heart if that happens.

## NOTE



Most communities have the 9-1-1 system. However, if your community doesn't, **say**:

The best way to get the care you need is to call the local emergency medical number. In our community, that number is \_\_\_\_\_ .

## SAY

Emergency medical personnel or hospital staff will usually ask for an emergency contact person. Plan now: Who will care for your family or pets in an emergency?

*(Optional)*

If you have arranged for a health professional to come to the session to discuss cardiopulmonary resuscitation (CPR): Ask the health professional to now discuss CPR (the benefits of CPR, what Bystander CPR is, where you can learn how to perform CPR, etc.) with participants.

## 7. How To Plan Ahead

DO **Show** picture card 2.4.



PICTURE

SAY Talk to your family and friends about the warning signs of a heart attack and the importance of calling 9-1-1 right away. Share what you've learned today with them, so they're prepared also.

DO **Show** picture card 2.5.



PICTURE

SAY You should also talk to your health care provider about your risk of a heart attack and how to lower it. Encourage your friends and family to do the same.

DO **Show** picture card 2.6, and **give** each participant the "My Emergency Card" handout (page 2.21).



PICTURE



HANDOUT

**SAY** Prepare an emergency card with the following information, and keep it in your wallet:

- Name, relationship, and phone number of people to call if you have to go to the hospital
- Emergency numbers in your area
- Name and phone number of your doctor or clinic
- Your health problems
- Medicine you take
- Allergies you have
- Any other important information

Give copies of a blank wallet card to all the adults in your family to fill out and carry.

**NOTE**

Allow 5 minutes for participants to complete the card.

**ASK** How will you make sure that your close family and friends know what to do in case of a heart attack and why it's important to have a plan of action?

**NOTE**

Allow 2 or 3 minutes for participants to respond.

**More Information****Aspirin: Take With Caution**

If you're thinking about taking aspirin to prevent heart problems, talk to your health care provider first. The provider can determine if you should take it and at what dose.

## Review of Today's Key Points

**SAY** Let's review the main points we learned today.

### **What is a heart attack?**

- A heart attack occurs usually because a clot blocks blood flow to the heart.
- When the blood flow stops, parts of the heart muscle start to die.

### **Why is it important to get treatment quickly?**

- Quick action and medical treatment can prevent the heart muscle from dying, and that can save lives.
- Heart attack patients need clot-busting drugs as soon as possible, within a few hours after symptoms start.
- Angioplasty opens the artery and restores blood flow.

### **What are the warning signs of a heart attack?**

- Your chest may hurt or feel squeezed.
- One or both of your arms, your back, or your stomach may hurt.
- You may feel pain in your neck or jaw.
- You may feel like you can't breathe.
- You may feel light-headed or break out in a cold sweat.
- You may feel sick to your stomach.
- You may feel unusually tired for no reason, sometimes for days (especially if you're a woman).

### **What should you do if you have these warning signs?**

- Call 9-1-1, even if you aren't sure you're having a heart attack. Emergency personnel can provide treatment as soon as they arrive. It's like bringing the hospital emergency department to your door.
- Don't drive yourself to the hospital.

## Weekly Pledge



**SAY** Our quote today is: “There’s time enough, but none to spare.” This is especially true if you or your family members have warning signs of a heart attack.

**SAY** How can you practice what you’ve learned? Please think of one change you can make. This will be your pledge for the week.

**SAY** Be specific about **what** you’ll do, **how** you’ll do it, and **when** you’ll start or complete it. Here are some examples:

- Within the next week, I’ll think about what to do if I or someone near me has a heart attack at home, at work, or in the middle of the night.
- I’ll talk with family and friends within the next week about the heart attack warning signs and calling 9-1-1 right away.
- I’ll make an appointment within the next month to talk to my health care provider about my heart attack risk.

### NOTE



Allow 5 minutes for participants to think of a pledge.

**SAY** Would anyone like to share your pledge with the group?

### NOTE



**Write** down pledge ideas on the blackboard, dry erase board, or large piece of paper taped to the wall.

**SAY** (*Optional*)

Let’s talk for a moment about personal values. A personal value is a quality that’s important to you. Personal values can help you make changes in your everyday life to improve your health.

**SAY** Today, the value is serenity. Serenity helps you stay calm, even when you face problems or worries. It helps you manage stress and protect your heart health.

How can serenity, or another personal value, help you keep your pledge?

**NOTE**

Allow 3 minutes for participants to share their ideas.

**SAY** We'll talk about how you did with your pledge at the next session.

## Closing

**SAY** Thank you for coming today. What did you think of today's session?

**NOTE**

Allow a moment for participants to respond.

**SAY** The next session is about physical activity. Please wear comfortable clothing and walking shoes.

**SAY** Please continue to work on your family health history.

**NOTE**

**Think** about today's class. What worked? What didn't work? Have you made any changes in your own life that we covered in today's session?



## Fast Action Saves Lives

### You May Not Be Sure It's a Heart Attack.

A heart attack is **not** always sudden or very painful. You may not be sure what's wrong—but if you think you're having a heart attack, act fast.

### ACT FAST. CALL 9-1-1.



### To Help Yourself Survive a Heart Attack, Take These Steps:

- Learn the warning signs of a heart attack, and act fast if you have them.
- Talk with family and friends about the warning signs and calling 9-1-1 right away.
- Ask your health care provider about what you can do to lower your risk for a heart attack.
- Complete the “My Emergency Card” handout (page 2.21).



## Learn What a Heart Attack Feels Like

**Act fast. Call 9-1-1. It could save your life.**

Clot-busting medicines and other treatments can stop a heart attack as it's happening. If you think you or someone else is having a heart attack, call 9-1-1 right away.

### Know the heart attack warning signs:

Your **chest** may hurt or feel squeezed.



You may feel discomfort in one or both **arms**, or your back or stomach.



You may feel discomfort in your **neck**, shoulders, or jaw.



You may feel like you **can't breathe**.



You may feel **light-headed** or dizzy, or break out in a cold sweat.



You may feel sick to your **stomach**.





# Fast Action Saves Lives: Role Plays

## Role Play 1: At Home

Two people are at home having breakfast.

### Actor 1

I don't feel well! I woke up feeling bad. I have pressure in my chest and I'm light-headed. It's hard to catch my breath. Plus my arm hurts.

### Actor 2

You don't look well. I just learned about the signs of a heart attack and I'm worried you're having one! Let's call 9-1-1.

### Actor 1

It's probably nothing. It's probably just indigestion. It'll pass.

### Actor 2

You need to get checked out. If it's a heart attack, fast treatment can stop the heart attack and prevent serious damage to your heart! I'm calling 9-1-1. They have medicine in the ambulance.

## Role Play 2: At Work

### Actor 1

Hey, is anything wrong? You don't look well.

### Actor 2

I haven't felt right all morning. I feel sick to my stomach and light-headed, and my chest and breathing feel tight.

### Actor 1

I heard those are signs of a possible heart attack. You should get checked right away at the hospital. I'll call 9-1-1.



## Fast Action Saves Lives: Role Plays (continued)

### Actor 2

No, it's probably just from eating a big lunch. Anyway, I don't want to make a scene and get everybody worried. I'll just wait and see if the pain goes away. Plus, I have to get my grandson from daycare today.

### Actor 1

We want you to be safe! If it's a heart attack, fast treatment can stop the heart attack and prevent serious damage to your heart! I'm calling 9-1-1.

## Role Play 3: At Night

You're at home one night watching TV when you suddenly start to feel very sick. You call your neighbor.

### Actor 1

Hey, I have a bad pain in the center of my chest, and I'm short of breath, and cold and sweaty! Will you drive me to the hospital?

### Actor 2

Those are symptoms of a possible heart attack! Let's call 9-1-1, so you'll get treatment right away.

### Actor 1

I don't want to wake up the neighborhood with the siren and all the lights. It's easier to drive.

### Actor 2

But the ambulance crew can treat you right away and even save your life if you get worse fast. Plus, the ER doctors will probably see you more quickly if you arrive by ambulance.

### Actor 1

Okay, you're right. Please call 9-1-1 and then come over to be with me.



# My Emergency Card

FOLD 2

<p style="text-align: center;"><b>My Emergency Card</b></p> <p>Name: _____</p> <p>Date of Birth: _____ Home Phone: _____</p> <p>Local Clinic/Hospital: _____</p> <p>Emergency Contacts: _____</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 40%;">Name</th> <th style="width: 20%;">Relationship</th> <th style="width: 40%;">Phone</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>	Name	Relationship	Phone										<p style="text-align: center;"><b>Do you have any of the following conditions?</b></p> <p>Heart Disease:            <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Previous Heart Attack:   <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>High blood pressure:     <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>High blood cholesterol:   <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Diabetes:                    <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Other: _____</p>
Name	Relationship	Phone											
<p style="text-align: center;"><b>Emergency Numbers</b></p> <p>Family Doctor: _____</p> <p>Phone: _____</p> <p>Local Clinic/Hospital: _____</p> <p>Phone: _____</p> <p>Fire Department: _____</p> <p>Local Police Department: _____</p>	<p style="text-align: center;"><b>List current medications, known allergies, and any other information</b></p> <p>Current Medications: _____</p> <p>Known Allergies: _____</p> <p>Other Information: _____</p> <p>_____</p> <p>_____</p>												

FRONT

BACK

FOLD 1

Cut along dotted lines. Fold card in half and paste with a glue stick. (FOLD 1)  
 Fold in half again to make your own personal wallet card (FOLD 2)

# Get Energized!

## Say YES to Physical Activity

An illustration of two hands, one on the left and one on the right, holding a heart. The hands are rendered in a dark brown color with a slight shadow effect. The heart is a vibrant red color. The background is a solid red color at the top, transitioning to a dark purple color at the bottom.

“We need to do a better job of  
putting ourselves higher on  
our own ‘to-do’ list.”

*– Michelle Obama*

# Session 3



## Get Energized! Say YES to Physical Activity

### Objectives

#### By the end of this session, participants will learn:

- Why physical activity is good for their heart and overall health
- About different types of physical activity, including brisk walking
- How much physical activity adults and children need
- Ways to fit physical activity into their schedule

---

### Materials and Supplies

#### To conduct this session, you'll need:

- *With Every Heartbeat Is Life* manual and picture cards
- Blackboard and chalk, dry erase board, or several large pieces of paper, a marker, and tape
- Drinking water and cups
- (Optional) Music for walking activity

---

### Handouts

#### Give each participant these handouts during this session:

- (Optional) Community Fun Run/Walk Role Play (page 3.22)
- Getting Started With Physical Activity: Should I Talk to My Health Care Provider? (page 3.23)
- Getting Started With Physical Activity: The Answers (page 3.24)
- Take Heart: Say Yes to Physical Activity (pages 3.25-3.26)
- Walking and Stretching Handout (page 3.27)
- Make Physical Activity a Habit: My Personal Record (page 3.28)
- For more handouts to share on physical activity, go to [www.hearttruth.gov](http://www.hearttruth.gov)

## Before This Session

- Read “Tips for Preparing for the Walking Activity” (page 3.17).
- Practice the stretching exercises in the “Walking and Stretching” handout (page 3.27).
- Practice taking a brisk walk.

## Session Outline

### Introducing the Session

1. Welcome
2. Review of Last Week’s Session
3. About This Session

### Conducting the Session

1. Facts About Physical Activity
2. *(Optional)* Community Fun Run/Walk Role Play
3. Benefits of Physical Activity
4. Types of Physical Activity
5. Getting Started: Important Things To Know
6. Finding Time To Be Physically Active
7. Let’s Walk!

### Review of Today’s Key Points

### Weekly Pledge

### Closing

#### NOTE



If you have time, **include** a 30-minute activity such as walking at the beginning or end of each remaining session.

# Introducing the Session

## 1. Welcome

DO **Welcome** participants to the session

## 2. Review of Last Week's Session

SAY At the last session, we talked about the warning signs of a heart attack. Who remembers them?

### NOTE



Allow about 3 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

DO **Add** these signs if they aren't mentioned:

- Chest pain or an uncomfortable feeling of pressure, squeezing, or fullness that lasts more than a few minutes. It may feel like heartburn or indigestion.
- Discomfort in one or both arms or shoulders, or in your neck, jaw, back, or stomach.
- Shortness of breath may be your only symptom!

Other symptoms include:

- Breaking out in a cold sweat
- Light-headedness or sudden dizziness
- Nausea or feeling sick to your stomach
- Feeling unusually tired for no reason, sometimes for days (especially if you're a woman)

**ASK** Who remembers what to do if you or someone else has these symptoms?

**SAY** Call 9-1-1 right away, even if you aren't sure it's a heart attack. Calling 9-1-1 gets you treated more quickly than driving to the hospital. Don't drive yourself to the hospital.

**SAY** At the end of the session, we pledged to do one thing to prepare for a heart attack. Please share with the group what you did.

**NOTE**

Allow 2 or 3 minutes for participants to respond.

**ASK** Has anyone completed the family health history?

**NOTE**

(Optional) **Give** a prize to participants who've completed the history.

**ASK** Does anyone want to share what you've learned about your family health history?

**NOTE**

Allow about 5 minutes for participants to respond.

### 3. About This Session

**SAY** Former First Lady Michelle Obama said, “We need to do a better job of putting ourselves higher on our own ‘to do’ list.”

**ASK** What does this quote mean to you?

**NOTE**



Allow 2 to 3 minutes for participants to respond.

**SAY** During today’s session, we’ll talk about:

- Physical activity and why it’s important for your heart and overall health
- How much physical activity you need every day for health benefits
- Easy ways to be physically active

**NOTE**



**Say** by “physical activity” we also mean “exercise.”

# Conducting the Session

## 1. Facts About Physical Activity

**SAY** Many Americans aren't active enough, which puts them at risk for heart disease and many other health problems.

Less than 25 percent of African American adults are doing the recommended amount of aerobics and muscle-strengthening activity.

But the good news is that increasing your activity even a little bit helps. And the more active you are, the more you'll benefit.

## 2. (Optional) Community Fun Run/Walk Role Play

**DO** **Ask** two volunteers to be actors in a role play. **Give** them the "Community Fun Run/Walk Role Play" handout (page 3.22).

---

**DO** **Read** the introduction out loud. After the activity is completed, allow 5 minutes for discussion.

---

**ASK** What did you learn from this story?  
What, if anything, is preventing you and your family or friends from being more physically active?

### 3. Benefits of Physical Activity

**ASK** How do you think physical activity can help you?

**NOTE**



Allow about 5 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

**DO** **Show** picture card 3.1.



PICTURE

**SAY** Physical activity can help you:

- Strengthen your heart and lungs
- Build and maintain healthy bones, muscles, and joints
- Control your weight
- Have more energy
- Improve your mental health and mood
- Feel better about yourself
- Manage stress
- Sleep better

**DO** **Show** picture card 3.2.



PICTURE

**SAY** Physical activity can also help:

- Lower your blood pressure
- Raise the level of your HDL (the good) cholesterol
- Control your blood sugar
- Lower your risk of getting heart disease, diabetes, and cancer

## 4. Types of Physical Activity

**ASK** What do you do to be physically active?

**NOTE**



Allow about 5 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

**DO** **Show** picture card 3.3.



PICTURE

**SAY** Aerobic activity, like walking fast, is the best type of activity for your heart and lungs. During aerobic activity, your heart beats faster and you breathe harder than usual.

**ASK** Can you think of some other examples of aerobic activity?

**NOTE**



Allow 2 to 3 minutes for participants to respond. **Say** the following if they're not mentioned.

**SAY** Here are more examples:

- Running
- Swimming
- Biking
- Dancing
- Jumping jacks

**SAY** Physical activity can also strengthen your muscles and bones.

- Doing push-ups and sit-ups, lifting weights, heavy gardening, and yoga are some examples of muscle-strengthening activities. At least twice a week, try to do activities that strengthen your legs, hips, back, chest, stomach, shoulders, and arms.
- Running, walking, jumping rope, and lifting weights are some examples of activities that also strengthen your bones.

**DO** Show picture card 3.4.



**SAY** Intensity is how hard your body is working during your physical activity. Light-intensity activities, like cooking or picking up the house, don't require much effort.

During a moderate-intensity activity, like taking a brisk walk, you should notice you're breathing harder and your heart is beating faster. You can still talk but singing would be hard.

During vigorous-intensity activity, like playing a game of basketball or jogging, you're working even harder and you can't say more than a few words without stopping for a breath.

Moderate and vigorous intensity is better for your heart than light intensity. But even light is better than doing nothing.

**DO** Show picture card 3.5.



**SAY** When you decide to become more physically active, increase your intensity gradually. For example, when you're comfortable walking slowly on flat ground, pick up the pace, then try some hills. You'll start to feel great!

**ASK** How much physical activity do you think you need to do each day to take care of your health?

**SAY** All adults should aim for at least 150 minutes (2 hours and 30 minutes) of moderate activity or 75 minutes (1 hour and 15 minutes) of vigorous activity every week.

- Children need more—at least 60 minutes of mostly moderate to vigorous activity every day.

### More Information

Physical activity is good for a woman's health, mood, and weight before, during, and after her pregnancy. Women should talk to their health care provider about what physical activities are safe during pregnancy and soon after delivery.

DO **Show** picture card 3.6.



SAY If you can't set aside a chunk of time during your day to be active, try shorter periods several times a day. It's the total time that's important.

SAY For example, if you're aiming for **30 minutes** a day:

<b>Walk or ride your stationary bike</b> , if you have one, before going to work	10 min
<b>Walk</b> during a break at work	10 min
<b>Jog in place and do jumping jacks</b> later in the day, maybe while watching TV	10 min
Total: 30 min	

DO **Show** picture card 3.7.



SAY If you have more time, you can build up to **60 minutes** a day:

<b>Jog</b> early in the morning	10 min
<b>Dance</b> before you shower and go to work	10 min
Take a brisk <b>walk</b> with coworkers during your lunch break	15 min
Play <b>basketball</b> with your friends or kids before dinner	15 min
Use your <b>stationary bike</b> while watching TV in the evening	10 min
Total: 60 min	

**More Information****How many calories do you burn?**

- Physical activity helps with weight control.
- Try to be physically active most days.

**Here are examples of how many calories you can burn in 30 minutes:**

<b>Activity</b>	<b>Calories burned per 30 minutes*</b>
Weightlifting	175
Walking (briskly), 3½ miles per hour	151
Gardening	133
Raking leaves	133
Dancing	273
Biking, 10–11 miles per hour	238
Playing basketball	228
Running, 5 miles per hour	291

\*These calories are for a healthy 154-pound person. A lighter person burns fewer calories; a heavier person burns more.  
Source: *The Compendium of Physical Activities Tracking Guide*, Arizona State University, 2011.

## 5. Getting Started: Important Things To Know

**NOTE**

This session has information for people who are just beginning to be physically active or who want to be more active.

**SAY**

Here are a few things to know before you start.

**ASK**

Have you heard that you should check with your health care provider before you start an exercise program?

**NOTE**

Allow a couple of minutes for participants to respond.

**SAY**

Healthy people who don't have heart problems don't need to check with their provider before beginning moderate-intensity activities, like brisk walking.

But if you have a heart problem or chronic disease, such as heart disease, diabetes, or high blood pressure, you do need to talk to your provider. Ask them what types of physical activity are safe for you.

You also should talk to your provider about safe physical activities if you have symptoms such as chest pain or dizziness when you're active.

**DO**

**Give** each participant the "Getting Started With Physical Activity: Should I Talk to My Health Care Provider?" handout (page 3.23).



HANDOUT

**SAY**

It's important to know who needs to see a health care provider before they get more active. On your handout, check who should see a provider.

- DO **Read** the following information while participants check the boxes.
- Charles is 65 years old and had a heart attack 10 years ago, but he's fully recovered.
  - Lauren is 32 and had a healthy baby 3 months ago.
  - Darius is 38 and has diabetes, but he controls his condition very well with medication.
  - Vicky is 35 and wants to be more physically active to help lower her blood pressure and quit smoking.
  - Alicia is 27, in good health, and she wants to start running.
  - Terrance is 57 and broke his leg 2 years ago, but it healed well. He wants to start walking every day.

## NOTE



Allow a few minutes for participants to discuss.

## DO

**Give** each participant the “Getting Started With Physical Activity: The Answers” handout (page 3.24).



HANDOUT

## NOTE



**Go** over the answers with the group.

## SAY

Let's take a look at the answers:

- Charles **doesn't need** to see a health care provider. After a heart attack, most people who don't have chest pain or other problems can safely return to most of their normal activities within a few weeks.
- Lauren **should** ask her provider what activities are safe so soon after having a baby.
- Darius **should** see a health care provider. Anyone with an ongoing condition such as heart disease, lung disease, or diabetes needs to talk to their health care provider first.
- Vicky **should** see a health care provider because she has high blood pressure and can ask for help to quit smoking.

- Alicia **doesn't need to**. She's young and in good health.
- Terrance **doesn't need to**. His broken leg isn't a problem.

Healthy people who don't have heart problems don't usually need to check with a health care provider before beginning moderate-intensity activities.

---

**SAY**

Here are some other things to know before becoming more physically active:

- Start slowly. Gradually increase the time and effort that you put into any activity.
- Drink enough water before, during, and after physical activity so you don't get dehydrated.
- Wear comfortable, supportive shoes. Use safety gear, such as a bike helmet, when needed.
- When exercising outdoors, use sunscreen or wear protective clothing. Stay in well-lit and well-maintained places. Keep an eye on the weather and the air quality, especially if you have asthma.

---

**SAY**

Being physically active may feel harder if you're overweight or obese. You may run out of breath or get tired more quickly.

Start with these activities:

- Walking, dancing, or (if you have access to a pool) water activities. Exercising in water lets you move in ways you can't on land, and it protects your joints.
- Everyday activities, like taking the stairs instead of the elevator, walking your dog, playing with the kids, or getting off your bus one stop early and walking the rest of the way, can help your health.
- Try different activities, find what you enjoy, and do what works for you.

---

**ASK**

Do you think about what will happen to your hair when you're active and sweating?

**NOTE**

Allow about 2 minutes for participants to respond.

- SAY** The fear that sweat will ruin a nice hairstyle discourages some people from being more physically active. Here are a few tips to protect your hair:
- Keep loose hair in a ponytail or bun.
  - Wear a headband or hair wrap to absorb moisture and prevent frizz.
  - Put some dry shampoo on your roots to absorb moisture.
  - Braid or twist your hair. It may be easier to maintain while you're active, or braid your hair just for your workout.
  - Remove the salt buildup from sweating by washing your hair once a week with a mild, pH-balanced shampoo.

**ASK** Does anyone have other suggestions?

**NOTE**

Allow 2 or 3 minutes for participants to respond.

## 6. Finding Time To Be Physically Active

**SAY** You may be wondering how you'll find time to be more active. Let's look at some ways.

**DO** **Give** each group member the "Take Heart: Say Yes to Physical Activity" handout (pages 3.25-3.26). **Read** the handout out loud.



**ASK** What are some other ways to be active even when time is limited?

**NOTE**

Allow about 5 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

**DO** **Add** the following if they weren't mentioned:

- Take a 15- to 20-minute walk during your lunch break at work or after dinner with a friend or family member. If you have a dog, you probably have an enthusiastic walking companion who might like to get out more!
- Jump rope, jog in place, do jumping jacks, or dance for a few minutes each day. Work up to 10 minutes without stopping. You can even dance sitting down, if needed!
- Play an active game such as basketball with your children or grandchildren. You'll burn calories and have fun together.
- Reduce screen time or be active while you watch or listen to a show.

---

**SAY** If you don't feel safe walking in your neighborhood, try a school track or a local shopping mall. Some malls have walking clubs that meet every day, and the malls let the walkers in before the stores open.

---

**SAY** Warm up your muscles before you exercise, and cool down gradually afterward to let your heart rate return to normal. A warmup and cooldown usually involve doing the activity at a slower speed or lower intensity.

## 7. Let's Walk!

### Tips for Preparing for the Walking Activity

#### When leading this activity, remember:

- Use a lively song for the warmup, a faster song for the walking, and a relaxing song for the cooldown. (Make sure no one objects to the music.)
- Be enthusiastic. Participants will pick up on your enthusiasm and feel good about being active.
- Lead the walk in a circle if you have to do the walking indoors or if space is limited.
- Have drinking cups and a pitcher of water available before and after the activity.

**SAY** Spending time warming up before you exercise can help get your muscles ready to work. Cooling down after you exercise will let your heart rate return to normal.

**DO** **Ask** the participants to stand at least 3 feet apart from each other.

**DO** **Start** the music.

**SAY** Let's walk in place slowly for 3 minutes.

**DO** **Give** each participant the "Walking and Stretching Activity" handout (page 3.27).



HANDOUT

**SAY** Now, I'll show you some stretches. Watch me and then try them yourselves. They get easier with practice.

#### NOTE



After stretching, **lead** the group on a 15- to 20-minute walk. **Walk** slowly for the first 5 minutes, then briskly for 5 to 10 minutes, then slowly for the last 5 minutes.

**ASK** How do you feel? Is brisk walking an activity you may do more often?

**NOTE**

Allow 3 to 5 minutes for participants to respond.

**SAY** If you already walk three or more times a week—good for you! Now try walking more often or making your walks more vigorous.

**SAY** We all need motivation to get and keep moving. Invite a friend or family member to walk with you on a regular basis, and put it on your calendars. Join an exercise class or a group, like the YMCA or a hiking club. Plan social or family activities that get everyone moving.

**SAY** Walking clubs are a great way to get out and make new friends.

**NOTE**

See pages A.12-A.13 in the Appendix for tips on how to organize a walking club, so you can share these tips with the group.

**ASK** What would help you to stay motivated?  
Where are some safe places in your neighborhood where you could walk?

**NOTE**

Allow about 5 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

**DO** **Give** each participant the “Make Physical Activity a Habit: My Personal Record” handout (page 3.28).



**SAY** Use this handout to track your daily progress.

## Review of Today's Key Points

**SAY** Let's review what we've learned today.

### **What are some of the benefits of regular physical activity?**

It can:

- Strengthen your heart and lungs
- Build and maintain healthy bones, muscles, and joints
- Help you control your weight, cholesterol, blood pressure, and blood sugar
- Help you sleep better and have more energy
- Improve your mental health and mood
- Lower your risk for heart disease, diabetes, and cancer

### **What's an activity that many people enjoy?**

- Brisk walking. Get a walking buddy to motivate you.
- Playing basketball. Join a team or play a pick-up game.
- Taking a dance or yoga class. Bring a friend or make a new one.
- Going for a bike ride. Bike to the store or just for fun.
- Gardening. You'll grow stronger!

### **What are simple ways to become more active throughout the day?**

- Take a walk.
- Get off the bus one stop early and walk or park your car further away in the parking lot.
- Dance to your favorite music (even if you're sitting!).
- Take the stairs instead of the elevator.

### **How much physical activity should you aim for each week?**

- Adults need at least 150 minutes (2½ hours) of moderate physical activity each week.
- Children need at least 60 minutes daily.

## Weekly Pledge



PLEDGE

**SAY** You've learned a lot today about physical activity. Please think of one change you'll make to be more active. This will be your pledge for the week.

**SAY** Be specific about **what** you'll do, **how** you'll do it, and **when** you'll start. Here are a couple of examples:

- I'll talk to family members and friends this weekend about taking regular walks together.
- Tomorrow, I'll walk for at least 20 minutes during my lunch break.

**SAY** Write your pledge on the "Take Heart: Say Yes to Physical Activity" handout (page 3.25-3.26). Keep this handout in a special place so you can see your pledge and keep your goal in mind.

### NOTE



Allow 5 minutes for participants to think of a pledge and write it down.

**ASK** Would anyone like to share your pledge with the group?

**DO** **Write** down pledge ideas on the blackboard, dry erase board, or large piece of paper taped to the wall.

**SAY** (*Optional*)

Keeping a personal value in mind can help you become more physically active. Remember that a personal value is a quality that's important to you.

Think about today's quote from Michelle Obama: "We need to do a better job of putting ourselves higher on our own 'to-do' list."

Today's value is determination. Having determination means you're willing to work hard to achieve a goal, even if it seems out of reach. It requires putting yourself a little higher up on your to-do list.

**ASK** How could you use determination or another value to help you keep your pledge?

**NOTE**



Allow 3 minutes for participants to share their thoughts.

**SAY** We'll talk about how you did with your pledge at the next session. Remember to keep working on your pledge to be prepared if a heart attack happens.

## Closing

**SAY** Thank you for coming today. What did you think of today's session?

**NOTE**



Allow a moment for participants to respond.

**SAY** I'm looking forward to seeing you at the next session. You'll learn ways to help control your blood pressure. Please continue to work on your family health history.

**NOTE**



**Think** about today's class. What worked? What didn't? Have you made any changes in your own life that were covered in today's session?



## Community Fun Run/Walk Role Play

The Harris family is walking in an annual charity 5K Fun Run/Walk. Kayla Harris, her husband James, Elijah (age 13), Imani (age 10), and Miles (age 8), are walking together.



### Kayla

I'm so glad we could do the walk this year. Remember how we skipped it last year because we thought we couldn't make it to the end?

### James

That was before we started walking together every other day after dinner.

### Kayla

Look at us now! We're together as a family and doing something that gets us all moving.

### James

At first, Elijah and Imani didn't want to put down their phones. Now, they can't wait to choose the family weekend activity.

### Kayla

They've come a long way!

### James

We've all made a lot of progress. Remember how we used to feel after walking for just 10 minutes? But each day, we walked a little farther. Now I enjoy walking for 30 minutes without stopping.

### Kayla

I like walking too, especially when I have someone to talk to or I'm listening to music.

### James

Yep. Maybe we could try working up to jogging some of the route next year!



## Getting Started With Physical Activity: Should I Talk to My Health Care Provider?

It's very important to know when to talk with a health care provider before starting a physical activity program.

**In the list below, check which people should see a health care provider.**

- Charles is 65 years old and had a heart attack 10 years ago, but he's fully recovered.
- Lauren is 32 and had a healthy baby 3 months ago.
- Darius is 38 and has diabetes, but he controls his condition very well with medication.
- Vicky is 35 and wants to be more physically active to help lower her blood pressure and quit smoking.
- Alicia is 27, in good health, and she wants to start running.
- Terrance is 57 and broke his leg 2 years ago, but it healed very well. He wants to start walking every day.

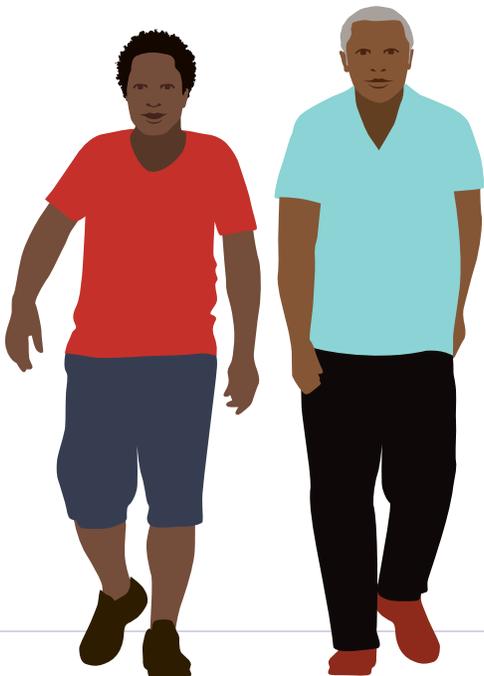




## Getting Started With Physical Activity: The Answers

- Charles **doesn't need to** see a health care provider. After a heart attack, most people who don't have chest pain or other problems can safely return to most of their normal activities within a few weeks.
- Lauren **should ask her provider** what activities are safe so soon after having a baby.
- Darius **should check with his health care provider**. Anyone with an ongoing condition such as heart disease, lung disease, or diabetes needs to talk to a doctor first.
- Vicky **should see a health care provider** because she has high blood pressure and can get help to quit smoking.
- Alicia **doesn't need to**. She's young and in good health.
- Terrance **doesn't need to**. His broken leg isn't a problem.

Healthy people who don't have heart problems don't usually need to check with a health care provider before beginning moderate-intensity activities.





## Take Heart: Say Yes to Physical Activity

Regular physical activity can help your heart and lungs work better, lower your blood pressure, and help you control your weight and cholesterol. It can help you manage stress, sleep better, have more energy, and feel better about yourself. It can also reduce your risk for diabetes, heart disease, and some types of cancer.



### Make Staying Active a Lifelong Habit.

Ms. Diane has learned that the more physical activity she does, the easier it gets.

**I don't wait until the end of the day to be active. I'm active throughout the day. I take the stairs instead of the elevators and take walking breaks during the day. Between this and walking with a friend in the evenings, I now walk 60 minutes a day.**





# Take Heart: Say Yes to Physical Activity (continued)

## Keep moving. Start slowly and work your way up!

Short on time? Be active for just 10 minutes at a time a few times a day. You can do activities at the intensity that’s right for you: light, moderate, or vigorous intensity. Your goal: at least 150 minutes of moderate-intensity activity each week.

### Activities that you can do at low or moderate intensity:

- Walking
- Gardening (mowing, raking)
- Dancing
- Home repairs
- Washing a car
- Washing windows or floors
- Weightlifting



### Activities that require more effort:

- Playing soccer or basketball
- Running or jogging
- Biking fast or uphill
- Swimming laps
- Jumping rope
- Skating at a fast pace



## Set yourself up for success:

- Set an alarm that encourages you to take a walking break during the work day.
- Leave a pair of walking shoes in your car.

### Morning

Park your car farther away from the entrance than you normally do or get off the bus one stop early and walk the rest of the way to work.

### Noon

During lunch, take a walk with a coworker or go up and down a flight of stairs a few times.

### Evening

After dinner, take a walk with your family or a friend.

**Three ways I will be more active this week:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Your health and your family’s health are priceless. Make an investment in both!**



# Walking and Stretching

## A Sample Daily Walking Program

This program is only a guide. Your walking sessions may be longer or shorter based on your ability and the advice of your health care provider. If you're walking fewer than three times per week, give yourself more than 2 weeks before adding more.

Warm Up Time	Brisk Walk Time	Cool Down Time	Total Time
Walk Slowly		Walk Slowly and Stretch	
<b>Week 1</b>			
5 minutes	5 minutes	10 minutes	20 minutes
<b>Week 2</b>			
5 minutes	5 minutes	10 minutes	20 minutes
<b>Week 3</b>			
10 minutes	20 minutes	10 minutes	40 minutes
<b>Week 4</b>			
5 minutes	15 minutes	10 minutes	30 minutes

## A Sample Stretching Program

Most experts advise stretching only after you have warmed up. To warm up, walk slowly for a few minutes before picking up the pace. Stretching gently at the end of your walk may help build flexibility. Don't bounce or hold your breath when you stretch. Do each stretch slowly and move only as far as you feel comfortable.

### Side Reach

Reach one arm over your head and to the side. Keep your hips steady and your shoulders straight to the side. Hold for 10 seconds and repeat on the other side.



### Wall Push

Lean your hands on a wall and place your feet about 3 to 4 feet away from the wall. Bend one knee and point it toward the wall. Keep your back leg straight with your foot flat and your toes pointed straight ahead. Hold for 10 seconds and repeat with the other leg.



### Knee Pull

Lean your back against a wall. Keep your head, hips, and feet in a straight line. Pull one knee toward your chest, hold for 10 seconds, and then repeat with the other leg.



### Leg Curl

Pull your right foot toward your buttocks with your right hand. Stand straight and keep your bent knee pointing straight down. Hold for 10 seconds and repeat with your other foot and hand.



### Hamstring Stretch

Sit on a sturdy bench or hard surface so that one leg is stretched out on the bench with your toes pointing up. Keep your other foot flat on the surface below. Straighten your back, and if you feel a stretch in the back of your thigh, hold for 10 seconds and then change sides and repeat. If you don't feel a stretch, slowly lean forward from your hips until you feel a stretch.





# Make Physical Activity a Habit: My Personal Record

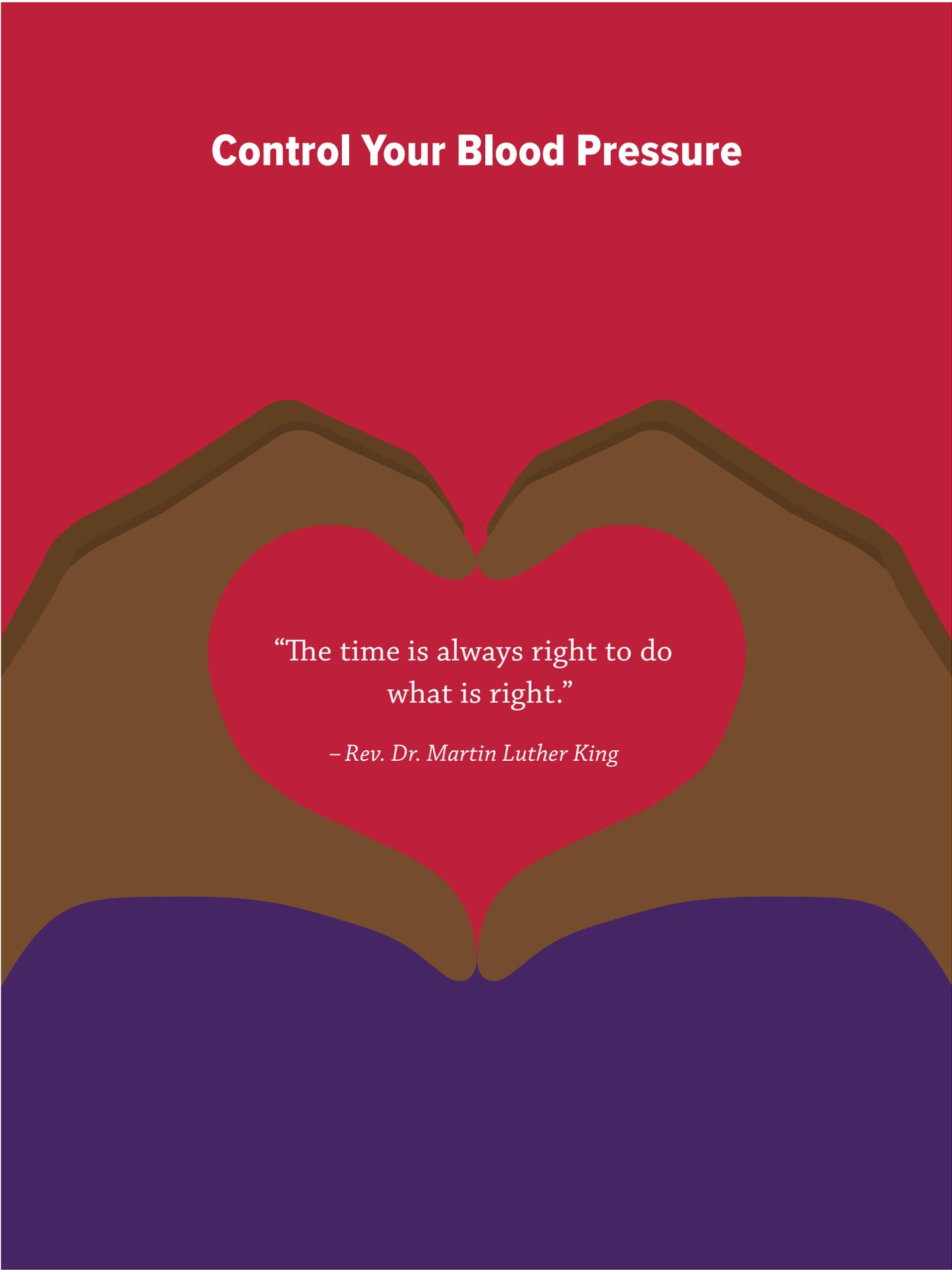
Name: \_\_\_\_\_

- Track your progress every day.
- Start out slowly.
- Aim to reach at least 150 minutes (2½ hours total) per week!



Write down the number of minutes you're active each day								
Week #	Sunday Minutes	Monday Minutes	Tuesday Minutes	Wednesday Minutes	Thursday Minutes	Friday Minutes	Saturday Minutes	Total Minutes
Example	5	5	10	10	15	15	15	75
Week 1								
Week 2								
Week 3								
Week 4								
Week 5								
Week 6								
Week 7								
Week 8								

# Control Your Blood Pressure



“The time is always right to do  
what is right.”

*– Rev. Dr. Martin Luther King*

# Session 4



## Control Your Blood Pressure

### Objectives

#### By the end of this session, participants will learn:

- What blood pressure is and what level to aim for
- What a stroke is and what the warning signs are
- The dangers of eating too much salt and sodium
- Steps to eat less salt and sodium

### Materials and Supplies

#### To conduct this session, you'll need:

- *With Every Heartbeat Is Life* manual and picture cards
- Blackboard and chalk, dry erase board, or several large pieces of paper, a marker, and tape
- Small amount of salt
- Ms. Diane's seasoning mixture (page 4.37). Prepare enough to give a small sample to each participant in a little bag or cup.

#### NOTE



(Optional) **Arrange** for a health professional to come to take blood pressure readings at the conclusion of the session.

### Handouts

#### Give each participant these handouts during this session:

- If Stroke Happens, Act F.A.S.T. (page 4.26)
- List of places to get blood pressure checked
- My Healthy Heart Wallet Card (page 4.27)
- Pregnancy and Your Heart Health (page 4.28-4.30)
- Healthy Habits To Control Your Blood Pressure (page 4.31)
- Check the Food Label for Sodium (page 4.32)
- Darnell's Food Choices (pages 4.33-4.35)

- Sodium in Foods (page 4.36)
  - Eat Less Salt and Sodium (pages 4.37-4.38)
  - Use Herbs and Spices Instead of Salt (page 4.39)
  - Tips for Taking High Blood Pressure Medicine (page 4.40-4.41)
  - Soul Food Makeover: Vegetable Stew Recipe (pages 4.42)
- 

## **Before This Session**

Prepare a list of places where people can get their blood pressure checked. You may find the information at your local health department, hospital, or clinic.

## **Session Outline**

### **Introducing the Session**

1. Welcome
2. Review of Last Week's Session
3. About This Session

### **Conducting the Session**

1. The Facts Don't Lie
2. Understanding Blood Pressure and Stroke
3. Lowering High Blood Pressure
4. Salt and Sodium: How Much Do We Need?
5. Food Label Activity: Sodium
6. Shake the Salt and Sodium Habit
7. Easy on the Alcohol
8. Manage Your Blood Pressure With Medicine
9. Soul Food Makeover: Vegetable Stew Recipe

### **Review of Today's Key Points**

### **Weekly Pledge**

### **Blood Pressure Check (Optional)**

### **Closing**

# Introducing the Session

## 1. Welcome

**DO**      **Welcome** participants to the session

## 2. Review of Last Week's Session

**SAY**      Last week, we talked about why you should be physically active. What benefits do you remember?

### NOTE



Allow about 3 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

**DO**      **Add** the following benefits if the participants don't mention them.

Physical activity can:

- Strengthen your heart and lungs
- Build and maintain healthy bones, muscles, and joints
- Help you feel better about yourself
- Help you control your weight
- Help you control your blood pressure, cholesterol, and blood sugar
- Help you sleep and manage stress better
- Improve your mental health and mood
- Improve your ability to do daily activities
- Lower your risk for diabetes, heart disease, and cancer

---

**ASK**      Would any of you like to share what you did to be more active?

What problems did you face (like too little time or not getting family support)?

How did you solve them?

NOTE



Allow about 5 minutes for participants to respond and share with the group what they did and what barriers they faced.

ASK

Has anyone completed the family health history?

DO

*(Optional)*

**Give** a prize to participants who've completed the history.

ASK

Does anyone want to share what you've learned about your family health history?

NOTE



Allow about 5 minutes for participants to respond.

### 3. About This Session

SAY

Rev. Dr. Martin Luther King, Jr., said, "The time is always right to do what is right."

ASK

What does this quote mean to you?

NOTE



Allow 5 minutes for participants to respond.

SAY

Today's session is about the steps you can take to control your blood pressure.

# Conducting the Session

## 1. The Facts Don't Lie

**SAY** High blood pressure increases your risk of getting heart disease and of having a stroke.

The likelihood of having high blood pressure increases with age.

About 1 in 5 adults with high blood pressure don't know they have it.

A type of high blood pressure, called preeclampsia, happens only during pregnancy. It doubles a woman's risk of getting heart disease later in life.

For most of us, high blood pressure and strokes are preventable.

---

**SAY** Let's take a closer look at high blood pressure in the African American community:

- About 40 percent of African American adults have high blood pressure.
- Less than half of all African Americans with high blood pressure have it under control, such as by taking blood pressure medicine.
- African American women are more likely to develop preeclampsia, compared to white women, and three times more likely to die from it.
- African Americans are twice as likely to have a stroke as whites. We're also more likely to have strokes at younger ages and to have more severe strokes.

## 2. Understanding Blood Pressure and Stroke

**DO** **Show** picture card 4.1.



PICTURE

**SAY** Blood pressure is the force of blood against the walls of your arteries.

High blood pressure is also called “hypertension.”

If you have high blood pressure, your heart has to pump harder than it should to get blood to all parts of your body.

### NOTE



We measure blood pressure in millimeters of mercury, which we write as mmHg. When you see mmHg, say “millimeters of mercury.”

**DO** **Show** picture card 4.2.



PICTURE

**SAY** A blood pressure reading has two numbers, such as “120 over 80.” The first or top number is your systolic (sis-TOL-ik) pressure. That’s your pressure during a heartbeat. The other number, called diastolic (di-a-STOL-ik), is the pressure between beats, when your heart is resting.

**SAY** It’s important to keep track of your blood pressure numbers. Write down your numbers every time you have your blood pressure checked.

**ASK** Do you know your blood pressure numbers?

### NOTE



Allow about 2 minutes for participants to respond.

- SAY** For most adults, a healthy blood pressure is usually below 120/80 mmHg.
- If your numbers are consistently higher, you may have elevated or high blood pressure and may need to go on medication.
- Talk to your health care provider about what your numbers are and write them down.
- If your health care provider says that you have high blood pressure, ask about how you can lower it or keep it in control.

---

**DO** **Show** picture card 4.3.



- SAY** High blood pressure can lead to a stroke, heart attack, kidney problems, blindness, heart failure, and dying at a young age.
- High blood pressure increases your risk of developing a serious condition called congestive heart failure. Heart failure doesn't mean your heart has stopped working—it means it can't pump enough blood to keep your body working normally.
- African Americans are more likely than other racial or ethnic groups to have heart failure, to have symptoms of it at a younger age, and to die from heart failure.
- 
- SAY** We call high blood pressure the “silent killer” because it often has no symptoms but can still kill you.

**SAY** High blood pressure is the main risk factor for stroke. Others are diabetes, heart disease, smoking, alcohol and illegal drug use, and sickle cell disease.

Having pregnancy-related high blood pressure increases women's risk of having a stroke, even decades after being pregnant.

African Americans are twice as likely to have a stroke as whites.

We're also more likely to have a stroke at a younger age and to have a more severe stroke.

But we can all lower our risk of having a stroke!

**ASK** Do you know anyone who has had a stroke?

**NOTE**

Allow a few minutes for participants to respond.

**DO** **Show** picture card 4.4.



**SAY** A stroke, also called a brain attack, can happen when a blood vessel bursts or when a clot blocks your arteries and damages brain cells.

A stroke is very serious and can disable or even kill you.

The warning signs of a stroke can develop over hours or days, or can happen suddenly.

The warning signs of a stroke include:

- Numbness of the face, arm, or leg (especially on one side of the body)
- Confusion, trouble talking, and difficulty understanding others
- Trouble seeing in one or both eyes
- Trouble walking, dizziness, and loss of balance or coordination
- Severe headache

**DO** **Give** participants the handout "If Stroke Happens, Act F.A.S.T." (page 4.26).



**SAY** When someone is having a stroke, every minute counts. It's like putting out a fire quickly to stop it from spreading—treating a stroke quickly reduces brain damage. Recognizing the signs of a stroke means you can act fast to save a life—maybe even your own.

Stroke treatments that work best are available only if the stroke is recognized and diagnosed within 3 hours of the first symptoms. Stroke patients who don't get to the hospital in time may not receive those treatments because it's too late for the treatments to help.

---

**SAY** If someone is having a stroke, think F.A.S.T:

F—Face: Ask the person to smile. Does one side of the face droop?

A—Arms: Ask the person to raise both arms. Does one arm drift downward?

S—Speech: Ask the person to repeat a simple phrase. Is the speech slurred or strange?

T—Time: If you see any of these signs, call 9-1-1 right away.

---

**SAY** Ministrokes, called “transient ischemic attacks or “TIAs,” have the same symptoms as a stroke, but they don't last as long and usually don't cause brain damage. A ministroke is a warning that a stroke may happen in the future.

Ministrokes may last a few minutes or an entire day and then go away. Don't ignore the signs. As with a heart attack, act immediately if you or someone you know has stroke symptoms. Call 9-1-1 right away to help prevent serious problems.

---

**DO** **Show** picture card 4.5.



---

**SAY** Measuring blood pressure is easy and doesn't hurt. Have yours checked at least once a year, or more often if you have high blood pressure.

Your health care provider may ask you to check your blood pressure at home if you have a home blood pressure monitor. You may be able to send readings to your doctor's office electronically.

DO

**Give** participants:

- A list of places (such as clinics and hospitals) to get their blood pressure checked.
- The “My Healthy Heart Wallet Card” handout (page 4.27)



SAY

Ask for your numbers each time you have your blood pressure checked. Keep a record of each reading on the wallet card.

Anyone who’s pregnant or planning a pregnancy needs to take some extra steps to make sure they have a heart healthy pregnancy. It’s very important for the health of the baby and the mom!

DO

**Give** each participant the “Pregnancy and Your Heart Health” handout (page 4.28-4.30).



ASK

May I have a volunteer to read the first section on blood pressure?

SAY

Please read the rest of the handout when you get home.

ASK

Do you know anyone you can share this handout with, to help them have a heart healthy pregnancy?

NOTE



Allow a few minutes for participants to respond.

### 3. Lowering High Blood Pressure

DO

**Ask** participants to raise their hand if someone in their family has high blood pressure.

SAY

If a member of your family has high blood pressure, you’re at greater risk of getting it, too. Even if you don’t have it now, you could still get it in the future.

But the good news is that you can take steps now to lower your blood pressure or keep it from rising. Let’s find out how.

**DO** **Give** each participant the “Healthy Habits To Control Your Blood Pressure” handout (page 4.31).



**SAY** I'll read part of the handout now but please read the rest when you get home.

**DO** **Read** the text in bold in the handout out loud.

**ASK** What could you and your family or friends do to control your blood pressure, or what do you do already?

**NOTE**



Allow 3 minutes for participants to respond.

## 4. Salt and Sodium: How Much Do We Need?

**SAY** Eating food with less salt and sodium can help control your blood pressure. Sodium is the part of salt that affects our health. Almost all of the sodium we eat is in the form of salt.

We often use the words salt and sodium to mean the same thing. For example, a nutrition label on a package will list “sodium,” while the front of the package may say “no salt added” or “unsalted.”

**SAY** Some people, including many African Americans, are more sensitive to sodium and may need to be especially careful about how much of it they eat.

African Americans should have no more than 1,500 mg of sodium a day, including the sodium from processed foods.

If your health care provider has told you to have even less sodium, follow their advice.

Most people in the United States get about 3,400 milligrams of sodium each day. That's about 1½ teaspoons of salt.

DO Now **show** 1½ teaspoons of salt.

DO **Show** picture card 4.6.



PICTURE

**SAY** Let's talk about what foods are high in sodium. More than two-thirds of the sodium we eat comes from processed and restaurant foods.

Some foods that are often high in sodium are:

- Prepared meats
- Prepackaged rice and pasta dishes
- Pizza
- Frozen dinners
- Salad dressings, seasonings, sauces
- Soups

**SAY** I'm going to read some tips for avoiding sodium. How many of these do you do already?

**NOTE**

**Give** participants a few minutes to respond after you **read** the following list.

1. Read food labels and choose low-sodium, reduced-sodium, or no-salt-added foods.
2. Eat fresh, frozen, or no-salt-added foods instead of preseasoned or processed meats, poultry, and vegetables.
3. Try not to use premade sauces, mixes, and “instant” products, such as rice, noodles, and ready-made pasta.
4. Rinse canned foods such as tuna and beans to remove some of the sodium.
5. Eat at home often so you can cook from scratch.
6. Don't use salt when you cook pasta, rice, or hot cereal.
7. Use herbs and spices instead of salt.
8. Eat a lot of fresh fruits and vegetables.

9. Eat foods that are high in potassium to help reduce the effects of sodium on your blood pressure. A wide variety of foods are rich in potassium, including dried apricots, orange juice, acorn squash, potatoes, spinach, tomatoes, broccoli, lentils, kidney beans, soybeans, and nuts.
10. Use a salt substitute, which often has potassium chloride or magnesium chloride instead of sodium chloride (salt). (If you have diabetes, kidney disease, or heart disease, check with your health care provider before using salt substitutes.)

## 5. Food Label Activity: Sodium



ACTIVITY

DO **Show** picture card 4.7.



PICTURE

**SAY** Checking the label on packaged foods is one of the best ways to make healthy choices. In this session, we'll learn how to use the food label to choose foods that are lower in sodium.

DO **Give** participants the “Check the Food Label for Sodium” handout (page 4.32).



HANDOUT

**SAY** The food label has the serving size and number of servings in the container.

It also gives the amount of calories, sodium, saturated fat, and cholesterol in one serving. We'll talk about calories, saturated fat, and cholesterol in the next two sessions.

DO **Point** out where the Percent Daily Value is located on the food label.

**SAY** The Percent Daily Value helps you compare products. It tells you if a food is high or low in various nutrients. Remember—it's easier than you might think to have too much sodium in a day. Choose foods with a lower Percent Daily Value for sodium. A Percent Daily Value of **5 or less is low**, and a Percent Daily Value of **20 or more is high**. Once you get into the habit of looking at food labels, it will be easy.

**SAY** Let's take a close look at the Nutrition Facts on an actual label to find the amount of sodium. Let's go back to the "Check the Food Label for Sodium" handout.

**DO** **Point** again to picture card 4.7.



**SAY** The Percent Daily Value for sodium in packaged noodle soup is circled on the food label.

The sodium content of the same type of food can vary, depending on how the food is packaged or its brand. Compare food labels to choose foods that are lower in sodium.

**SAY** Look at the bottom of the handout. See the Percent Daily Value for low-sodium soup and for packaged noodle soup? Which is lower sodium?

One serving of low-sodium soup has only 9 percent of the Daily Value for sodium.

One serving of packaged noodle soup has 34 percent of the Daily Value for sodium—almost four times more sodium!



**SAY** Think of the Percent Daily Value like a budget. You have a daily budget of \$100 for all of your sodium needs for one day. When you spend \$34 (Percent Daily Value) on one serving, that serving has cost you more than one-third of your daily budget. That's okay for a whole meal, but it's not okay for just one serving. You now have only \$66 left and could easily go over your sodium budget for the day.

**More Information****The DASH Eating Plan To Lower Your Blood Pressure**

One eating plan that can help you control your blood pressure is Dietary Approaches To Stop Hypertension (DASH).

It recommends having:

- More fruits and vegetables
- Fat-free or low-fat milk products
- Whole-grain foods
- Fish, poultry, lean meats, or beans
- Nuts and seeds

It also recommends limiting salt, sodium, sweets, sweetened drinks, fats, and oils.

DASH menus and recipes are lower in sodium than people eat normally. They provide 2,300 milligrams of sodium a day. But the recipes also come with options for people who are trying to limit their sodium even more, to 1,500 milligrams per day.

For more information: [www.nhlbi.nih.gov/DASH](http://www.nhlbi.nih.gov/DASH).

**SAY** Choosing and preparing foods that are lower in salt and sodium may help prevent or lower high blood pressure. Eating fruits and vegetables, using fat-free or low-fat milk products, and avoiding fatty foods may also help lower blood pressure.

Some people don't like milk products or have a problem digesting lactose. There are lactose-free products and nondairy products that are low in fat, such as low-fat soy or oat milk.

---

**SAY** Let's try an activity that will help us choose foods that are low in salt and sodium. First, I'm going to describe a situation that may apply to you or to family members. Then, using food labels, we're going to learn how to choose lower-sodium foods.

**DO** **Give** participants the “Darnell’s Food Choices” handout (pages 4.33-4.35).



**SAY** During a recent visit to his health care provider, Darnell learned that he has high blood pressure. The provider told him to cut back on the amount of sodium he eats.  
Let’s use the food labels in the handout to help Darnell choose food that is lower in sodium.

**DO** **Ask** these questions. **Give** the correct answer after participants guess.

<b>Question</b>	<b>Correct Answers</b>
When buying juice, should Darnell choose tomato juice or orange juice?	<b>Orange juice</b>
At a neighbor’s picnic, should Darnell choose barbecued chicken or roasted chicken (skinless and with no added salt)?	<b>Herb-seasoned roasted chicken (skinless and with no added salt)</b>
Should Darnell buy frozen peas or canned peas?	<b>Frozen peas</b>
Should Darnell eat a buttermilk biscuit or an English muffin?	<b>English muffin</b>
Should Darnell snack on a handful of salted mixed nuts or a handful of unsalted, dry-roasted mixed nuts?	<b>Unsalted, dry-roasted mixed nuts</b>

## 6. Shake the Salt and Sodium Habit

**DO** **Give** participants the “Sodium in Foods” handout (page 4.36).



HANDOUT

**ASK** Does anyone often eat foods from the right side of the page?

**DO** **Ask** the person to name a lower sodium food from the left side that they could eat instead.

**SAY** Let’s review tips to help you cut back on salt and sodium.

**DO** **Give** participants the “Eat Less Salt and Sodium” handout (pages 4.37-4.38) and **review** the tips on how to cut back on salt and sodium when shopping, cooking, and eating.



HANDOUT

**SAY** Here’s a sample of Ms. Diane’s secret recipe from the bottom of the “Eat Less Salt and Sodium” handout. Fill an empty salt shaker with this seasoning mixture, and put it on your table. Tell your family to try it instead of salt.

**DO** **Give** each group member a sample of Ms. Diane’s seasoning mixture.

**ASK** Why is it hard for you to cut back on salt and sodium?

### NOTE



Allow 3 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall. Then **write** down some possible solutions. See the “Salt Solutions Examples”

## Salt Solution Examples

### Problems and Solutions

Problems	Solutions
The food has no flavor.	<b>Use herbs or spices to add flavor. See the “Use Herbs and Spices Instead of Salt” handout (page 4.39).</b>
Family members will get upset.	<b>Cut back on salt slowly. Use less salt each time you cook so everyone can get used to the taste.</b>
Adding salt is a habit that’s hard to break.	<b>Give yourself time to get used to using less salt. Choose brands that are lower in salt. Take the salt shaker off the table.</b>

## 7. Easy on the Alcohol

### SAY

Drinking too much alcohol can raise your blood pressure.

It can also harm your liver, brain, and heart. Alcoholic drinks also contain extra calories that make controlling your weight difficult.

If you don’t drink alcohol, don’t start. Pregnant women shouldn’t drink any alcohol.

If you drink alcohol, drink only a moderate amount.

That means:

- Men should have no more than two drinks a day.
- Women should have no more than one drink a day.

**ASK** What do you think counts as one drink?

**NOTE**

Allow 2 minutes for participants to respond.

**SAY**

One drink is:

- 12 ounces of beer. This is about 5 percent alcohol. (Some beers and malt liquor have more alcohol than that.) Regular beer is 150 calories; light is 100 calories.
- 5 ounces of wine. This is about 12 percent alcohol and 100 calories.
- 1½ ounces of liquor. This is about 40 percent alcohol and has 100 calories.



## 8. Manage Your Blood Pressure With Medicine

**SAY** If you have high blood pressure, making the lifestyle changes we just discussed may not be enough to lower your blood pressure. You may also need medications.

**DO** **Give** participants the “Tips for Taking High Blood Pressure Medicine” handout (page 4.40-4.41).



HANDOUT

**ASK** Do any of you take medicines for high blood pressure?

**DO** **Read** the handout out loud.

**ASK** If you’re taking medication for high blood pressure, how can you help your medicine work better?

### NOTE



Allow a few minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or paper taped to the wall.

**DO** **Add** the following if they’re not mentioned:

- Ask your health care provider the name of your medicine and how to take it.
- Take your medicine the way your provider tells you.
- Tell your health care provider the names of all other medicines, home remedies, herbs, and supplements you take.
- Tell your provider if the medicine makes you feel strange or sick.
- Refill your prescription before you run out.
- Have your blood pressure checked to see if the medicine is working for you.
- Keep taking the medicine as your health care provider tells you, even if your blood pressure is okay.

**More Information**

- Many people, especially African Americans, may need to take more than one medicine to control their blood pressure.
- African Americans are more likely than others to get side effects from taking a blood pressure medicine called ACE inhibitors, such as captopril, lisinopril, or enalapril.

## 9. Soul Food Makeover: Vegetable Stew Recipe



RECIPE

DO **Give** participants the “Use Herbs and Spices Instead of Salt” handout (page 4.39). **Ask** them to use some of the herbs and spices in place of salt when they cook this week.



HANDOUT

DO **Give** participants the “Soul Food Makeover: Vegetable Stew Recipe” handout (pages 4.42). **Ask** them to prepare the recipe during the coming week. **Tell** them that using this recipe will give them a chance to practice some of the ideas from the session.



HANDOUT

## Review of Today's Key Points

**SAY** Let's review what we learned today.

### **What is blood pressure?**

Blood pressure is the force of blood against the walls of your arteries.

### **What is a normal blood pressure?**

A normal blood pressure is usually below 120/80 mmHg.

### **What is high blood pressure?**

If your numbers are consistently higher, you may have elevated or high blood pressure. Talk with your health care provider about what your numbers mean for you.

### **Why is high blood pressure dangerous?**

High blood pressure can lead to heart attack, stroke, kidney problems, eye problems, and dying at a young age.

### **What can you do to help make your blood pressure medicine work better?**

Eat more fruits and vegetables, cut back on salt and sodium, lose weight, and be more physically active. Take your medicine as your health care provider tells you. Talk to your provider about side effects.

### **What is a stroke?**

A stroke can happen when a blood vessel bursts or when a clot blocks your arteries and brain cells die. Strokes are also called brain attacks. They're very serious and can disable or kill you.

### **How can you prevent high blood pressure?**

Be physically active, eat healthy, don't smoke, watch your weight, limit your alcohol, control stress, and check your blood pressure. If your health care provider has prescribed medicine for high blood pressure, take the medicine the way your provider has told you to.

## Weekly Pledge



**SAY** You've learned a lot today about how to control your blood pressure. Please think of one change you'll make in your everyday life for your blood pressure. This will be your pledge for the week.

**SAY** Be specific about **what** you'll do, **how** you'll do it, and **when** you'll start.

Here are some examples:

- I'll get my blood pressure checked within the next month at my health care provider's office.
- I'll join a walking group or take an exercise class at my church next week.
- I'll read food labels the next time I shop and choose foods that are lower in sodium.
- I'll rinse canned foods with water before I cook or eat them, starting today.
- I'll take the salt shaker off the table, starting today.

**SAY** Write your pledges on the back of the "Eat Less Salt and Sodium" handout. Keep this handout in a special place so you can review your pledge and keep your goal in mind.

### NOTE



Allow 5 minutes for participants to think of a pledge and write it down.

**SAY** Would anyone like to share their pledge with the group?

### NOTE



**Write** down pledges so everyone can see them.

**SAY** (Optional)

Thinking about your values helps you make the changes needed to control your blood pressure. Remember that your values are qualities that you feel are important.

Today's value is openness. Being open means you're willing to consider making changes to improve your health, such as cutting back on foods high in salt and sodium, quitting smoking, and being more physically active.

---

**SAY** As today's quote says, "The time is always right to do what is right." I hope all of you will encourage your family and friends to be open to controlling their blood pressure.

---

**ASK** How can you use openness, or another value, to help you keep your pledge?

**NOTE**



Allow 3 minutes for participants to share their thoughts.

**SAY** We'll talk about how you did with your pledge at the next session. Remember to keep working on your pledge to be more physically active.

## Blood Pressure Check *(Optional)*

**DO** **Have** a health professional come to the session to check participants' blood pressure.

---

**SAY** A health professional will now check your blood pressure, if you'd like.

---

**DO** **Ask** participants to write their blood pressure numbers on their wallet card.

## Closing

**SAY** Thank you for coming today. What did you think of today's session?

### NOTE



**Wait** to see if participants respond.

**SAY** I'm looking forward to seeing you at the next session. It will be about how to prevent and control high cholesterol.

Please continue to fill out your family health histories.

### NOTE



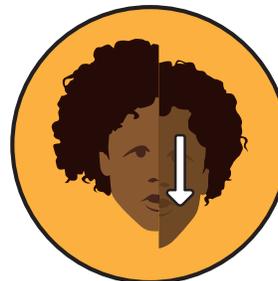
**Think** about today's session. What worked and what didn't work? Have you decided to make any changes in your own life based on what you covered in today's session?



# If a Stroke Happens, Act F.A.S.T.

## F – Face Drooping

Ask the person to smile.  
**Does one side droop?**



## A – Arm Weakness

Ask the person to raise both arms.  
**Does one arm drift downward?**



## S – Speech Difficulty

Ask the person to repeat a simple sentence.  
**Are the words slurred?**



## T – Time to Call 9-1-1

If the person shows any of these signs,  
**call 9-1-1 immediately.**





# My Healthy Heart Wallet Card

## Take Care of Your Heart



### Check your:

blood pressure,  
cholesterol, weight, waist  
measure, and blood glucose

Name: \_\_\_\_\_

## Try these tips for a healthy heart!

<b>More</b>	+ fruits, vegetables, whole grains, and fat-free or low-fat milk products + physical activity
<b>Less</b>	- calories and saturated fat, - weight and waist measure
<b>None</b>	0 cigarettes = A healthy heart

FRONT

### Talk to your health care provider about what these numbers mean!

**A1c**  
7% or less

Date					
Value					

**Blood glucose (fasting)**  
Less than 100

Date					
Value					

**Blood tests to check sugar in blood for diabetes**

Date					
Value					

**Waist measurements**  
Men: 40 inches or less  
Women: 35 inches or less

Date					
Value					

**Weight**

Date					
Value					

**Blood Pressure**  
Less than 120/80 mmHg

Date					
Value					

**Blood tests to measure fats in the blood**

**Total Cholesterol**  
Less than 200 mg/dL

Date					
Value					

**LDL**  
Less than 100 mg/dL—ideal

Date					
Value					

**HDL**  
More than 39 mg/dL

Date					
Value					

**Triglycerides**  
Less than 150 mg/dL

Date					
Value					

BACK

FOLD 1

FOLD 2

Cut along dotted lines. Fold card in half and paste with a glue stick. (FOLD 1)  
Fold in half again to make your own personal wallet card (FOLD 2)



# Pregnancy and Your Heart Health

Pregnancy can be a very exciting time—and a time to make your health a priority. Here we talk about pregnancy-related heart health issues that may be of particular concern to African American women.

## High blood pressure—even if you’ve had normal blood pressure

A type of high blood pressure that occurs only during pregnancy, generally in the second half, is called preeclampsia. More African American women develop it, compared to white women.

Having diabetes, being obese, and some other health problems make it more likely that you’ll get preeclampsia. But it’s important that your health care provider check you for preeclampsia even if you don’t have those problems. Although it’s rare, preeclampsia can quickly turn into a serious, even deadly condition, particularly for African American women.

## Symptoms of preeclampsia

**Women who have preeclampsia often don’t feel sick. However, some mild symptoms to watch for are:**

- Your hands, face, or eyes look swollen.
- You suddenly (over 1 to 2 days) gain weight, or you gain more than 2 pounds a week.

**Symptoms of severe preeclampsia include:**

- A headache that doesn’t go away
- Trouble breathing
- Belly pain on your right side below your ribs or pain in your right shoulder
- Peeing less than normal
- Nausea and vomiting
- Vision problems
- Feeling faint

**Treatment varies depending on how bad your preeclampsia is.**

- You may need to go to the hospital. If you get preeclampsia, you’re at a greater risk of having a miscarriage or of having a stillborn (born dead) baby.
- You’ll also need to take extra care of your heart after having your baby. Having preeclampsia increases the likelihood of having heart disease or a stroke later in life.





# Pregnancy and Your Heart Health (continued)

## Diabetes during pregnancy

A type of diabetes that occurs only during pregnancy, usually in the later weeks, is gestational diabetes. It causes your blood sugar (blood glucose) to get too high, even if you didn't have blood sugar problems before you became pregnant. Gestational diabetes goes away, but only after the baby is born.

Usually, gestational diabetes has no symptoms. If you do have symptoms, they may be mild, like being thirstier than normal or having to pee more often.

**You're at greater risk of having gestational diabetes as an African American woman, and also if you:**

- Are older than age 25
- Are overweight
- Have family members with type 2 diabetes
- Have a condition called polycystic ovary syndrome (PCOS)

## Get tested and treated

If you have gestational diabetes, controlling your blood sugar levels will help you protect yourself and your baby. If not treated, gestational diabetes increases your risk of having a miscarriage or of having a stillborn baby.

**It can also cause your baby to:**

- Be born too early
- Be born with blood sugar and breathing problems
- Become overweight

If you have gestational diabetes, you're more likely to develop preeclampsia and to have diabetes later in life.

## Protect yourself from gestational diabetes

You can do a lot to prevent gestational diabetes. It's particularly important before and during your pregnancy to eat healthy and be physically active. Talk to your doctor about programs that will help you do both. If you're overweight, try to lose weight before you get pregnant. (Pregnant women shouldn't try to lose weight.) Ask your health care provider how much weight you should gain during your pregnancy.



# Pregnancy and Your Heart Health (continued)

## Physical activity and pregnancy

Physical activity is good for your health, mood, and weight before, during, and after your pregnancy. If you're already active, stick with it as long as you're healthy. If you weren't active before you became pregnant, it's fine to begin now, gradually. But also ask your health care provider about what type of physical activities are safe during pregnancy and soon after delivery.

## Smoking and pregnancy

It's important to quit smoking before you get pregnant. Smoking during pregnancy increases the chance of the baby being born with birth defects, too early, or underweight, or even dying. Babies whose mothers smoked when pregnant have a greater risk of dying from SIDS (sudden infant death syndrome).

If the mother continues to smoke after the baby is born, the baby is more likely to get chest colds, ear infections, bronchitis, pneumonia, and asthma.

## Make your health a priority

Most women in the United States have healthy pregnancies. However, serious illness (and even death) are becoming more common among pregnant women, particularly among African Americans. Heart disease is the leading cause of death during pregnancy or childbirth. Take care of your heart health. Your family needs you.



# Healthy Habits To Control Your Blood Pressure

## To control your blood pressure:

- 1. Aim for a healthy weight.** Try not to gain extra weight. If you're overweight, try losing weight slowly, about 1 to 2 pounds each week.
- 2. Be active every day for at least 30 minutes.** You can walk, dance, play sports, or do any activity you enjoy. Being active for at least 10 minutes, 3 times a day, works when you're pressed for time.
- 3. Eat less salt and sodium.** Buy foods marked "sodium free," "low sodium," or "reduced sodium." Take the salt shaker off the table.
- 4. Eat heart healthy.** Eat more fruits, vegetables, and whole grains. Consider following the DASH eating plan.
- 5. Quit smoking.** Talk with your doctor about programs and products that can help you quit smoking. Also, try to avoid secondhand smoke (the smoke you inhale when others are smoking).
- 6. Manage stress.** To help manage stress, be more physically active; meditate; or talk with your friends, family, a mental health counselor, or your religious leader about how you're feeling.
- 7. Cut back on alcohol.** If you drink, have no more than two drinks a day if you're a man and one if you're a woman. Pregnant women shouldn't drink alcohol.
- 8. Take your medication.** If your health care provider has prescribed medicine for high blood pressure, be sure to take it as directed.
- 9. Get checked.** Get your blood pressure checked regularly. Write down and keep track of your blood pressure numbers.





# Check the Food Label for Sodium

Food labels tell you what you need to know about choosing foods that are lower in sodium. Here's a food label for packaged noodle soup.



## 1. Serving Size and Number of Servings

The serving size is ½ of the block of noodles. The package contains two servings. Remember, the numbers on the label are for one serving, not the whole package.

## 2. Amount Per Serving

The nutrient amounts are for one serving. So, if you eat the whole block of noodles, you're eating two servings, and you need to double the nutrient amounts.

## 3. Percent Daily Value

The Percent Daily Value helps you compare products. It tells you if it has a lot of sodium. Choose products with the lowest Percent Daily Value for sodium: 5 percent or less is low, and 20 percent or more is high.

## 4. Nutrients

Here's the amount of sodium in one serving. It's listed in milligrams (mg).

### Packaged Noodle Soup

<b>Nutrition Facts</b>	
2 servings per container	
<b>Serving size</b>	1/2 block (247g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>160</b>
% Daily Value*	
<b>Total Fat</b> 7g	9%
Saturated Fat 3g	15%
Trans Fat 0g	
<b>Cholesterol</b> 0mg	0%
<b>Sodium</b> 710mg	31%
<b>Total Carbohydrate</b> 23g	8%
Dietary Fiber 1g	4%
Total Sugars < 1g	
Includes 0g Added Sugars	0%
<b>Protein</b> 4g	8%
Vitamin D 10mcg	50%
Calcium 20mg	2%
Iron 0mg	0%
Potassium 95mg	2%

\*The % Daily Value (DV) tells you how much a nutrient in a serving of food contributes to a daily diet. 2,000 calories a day is used for general nutrition advice.

## The Choice Is Yours – Compare!

### Which one would you choose?

Low-sodium soup is lower in sodium than packaged soup.

### Reduced-Sodium Soup

One serving (1 cup) of low-sodium soup has 430 mg of sodium and 19 percent of the Daily Value for sodium.

### Packaged Noodle Soup

One serving, ½ block of the packaged noodle soup, has 710 mg of sodium and 31 percent of the Daily Value for sodium. This is nearly four times the amount of sodium in a serving of low-sodium soup.

	% Daily Value*
<b>Total Fat</b> 1g	1%
Saturated Fat 0g	0%
Trans Fat 0g	
<b>Cholesterol</b> 0mg	0%
<b>Sodium</b> 430mg	19%

	% Daily Value*
<b>Total Fat</b> 7g	9%
Saturated Fat 3g	15%
Trans Fat 0g	
<b>Cholesterol</b> 0mg	0%
<b>Sodium</b> 710mg	31%

\*Percent Daily Values are based on a 2,000-calorie diet. Your Daily Values may be higher or lower depending on your calorie needs.



# Darnell's Food Choices

During a recent visit to the health care provider, Darnell learned that he has high blood pressure. The provider told him to cut back on the amount of sodium he eats. Use the food labels to help Darnell choose foods that will help him follow his provider's advice. **Mark the number of your choice for each pair in the space between the labels.**

## 1. Tomato Juice

Nutrition Facts	
8 servings per container	
<b>Serving size</b>	<b>8 fl oz (248g)</b>
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>40</b>
% Daily Value*	
<b>Total Fat</b> 1g	<b>1%</b>
Saturated Fat 0g	<b>0%</b>
Trans Fat 0g	
<b>Cholesterol</b> 0mg	<b>0%</b>
<b>Sodium</b> 630mg	<b>27%</b>
<b>Total Carbohydrate</b> 9g	<b>3%</b>
Dietary Fiber 1g	<b>4%</b>
Total Sugars 6g	
Includes 0g Added Sugars	<b>0%</b>
<b>Protein</b> 2g	<b>4%</b>
Vitamin D 0mcg	<b>0%</b>
Calcium 25mg	<b>2%</b>
Iron 1mg	<b>6%</b>
Potassium 538mg	<b>10%</b>

Lower sodium choice

## 2. Orange Juice

Nutrition Facts	
8 servings per container	
<b>Serving size</b>	<b>8 fl oz (248g)</b>
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>120</b>
% Daily Value*	
<b>Total Fat</b> 0g	<b>0%</b>
Saturated Fat 0g	<b>0%</b>
Trans Fat 0g	
<b>Cholesterol</b> 0mg	<b>0%</b>
<b>Sodium</b> 5mg	<b>0%</b>
<b>Total Carbohydrate</b> 29g	<b>11%</b>
Dietary Fiber 1g	<b>4%</b>
Total Sugars 21g	
Includes 0g Added Sugars	<b>0%</b>
<b>Protein</b> 2g	<b>4%</b>
Vitamin D 0mcg	<b>0%</b>
Calcium 27mg	<b>2%</b>
Iron 0mg	<b>0%</b>
Potassium 441mg	<b>10%</b>

## 3. Barbecued Chicken

Nutrition Facts	
1 servings per container	
<b>Serving size</b>	<b>3 oz (85g)</b>
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>150</b>
% Daily Value*	
<b>Total Fat</b> 5g	<b>6%</b>
Saturated Fat 1g	<b>5%</b>
Trans Fat 0g	
<b>Cholesterol</b> 80mg	<b>27%</b>
<b>Sodium</b> 450mg	<b>20%</b>
<b>Total Carbohydrate</b> 6g	<b>2%</b>
Dietary Fiber 0g	<b>0%</b>
Total Sugars 5g	
Includes 5g Added Sugars	<b>10%</b>
<b>Protein</b> 19g	<b>38%</b>
Vitamin D 0mcg	<b>0%</b>
Calcium 11mg	<b>0%</b>
Iron 1mg	<b>6%</b>
Potassium 247mg	<b>6%</b>

Lower sodium choice

## 4. Herb-Roasted Chicken

Nutrition Facts	
1 servings per container	
<b>Serving size</b>	<b>3 oz (85g)</b>
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>140</b>
% Daily Value*	
<b>Total Fat</b> 5g	<b>6%</b>
Saturated Fat 1g	<b>5%</b>
Trans Fat 0g	
<b>Cholesterol</b> 100mg	<b>33%</b>
<b>Sodium</b> 30mg	<b>1%</b>
<b>Total Carbohydrate</b> 0g	<b>0%</b>
Dietary Fiber 0g	<b>0%</b>
Total Sugars 0g	
Includes 0g Added Sugars	<b>0%</b>
<b>Protein</b> 23g	<b>46%</b>
Vitamin D 0mcg	<b>0%</b>
Calcium 7mg	<b>0%</b>
Iron 1mg	<b>6%</b>
Potassium 265mg	<b>6%</b>

\*Percent Daily Values are based on a 2,000-calorie diet. Your Daily Values may be higher or lower depending on your calorie needs.



# Darnell's Food Choices (continued)

## 5. Frozen Peas

Nutrition Facts	
3 servings per container	
<b>Serving size</b>	1/2 cup (80g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>60</b>
% Daily Value*	
Total Fat 0g	0%
Saturated Fat 0g	0%
Trans Fat 0g	
Cholesterol 0mg	0%
Sodium 45mg	2%
<b>Total Carbohydrate</b> 11g	<b>4%</b>
Dietary Fiber 4g	14%
Total Sugars 4g	
Includes 0g Added Sugars	0%
<b>Protein</b> 4g	<b>8%</b>
Vitamin D 0mcg	0%
Calcium 19mg	2%
Iron 1mg	6%
Potassium 87mg	2%

Lower sodium choice

## 6. Canned Peas

Nutrition Facts	
3 servings per container	
<b>Serving size</b>	1/2 cup (85g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>60</b>
% Daily Value*	
Total Fat 0g	0%
Saturated Fat 0g	0%
Trans Fat 0g	
Cholesterol 0mg	0%
Sodium 310mg	13%
<b>Total Carbohydrate</b> 10g	<b>4%</b>
Dietary Fiber 4g	14%
Total Sugars 3g	
Includes 0g Added Sugars	0%
<b>Protein</b> 4g	<b>8%</b>
Vitamin D 0mcg	0%
Calcium 20mg	2%
Iron 1mg	6%
Potassium 90mg	2%

## 7. Buttermilk Biscuit

Nutrition Facts	
5 servings per container	
<b>Serving size</b>	1 biscuit (63g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>210</b>
% Daily Value*	
Total Fat 7g	9%
Saturated Fat 1g	5%
Trans Fat 0g	
Cholesterol 0mg	0%
Sodium 590mg	26%
<b>Total Carbohydrate</b> 34g	<b>12%</b>
Dietary Fiber 1g	4%
Total Sugars 2g	
Includes 2g Added Sugars	4%
<b>Protein</b> 4g	<b>8%</b>
Vitamin D 0mcg	0%
Calcium 31mg	2%
Iron 2mg	10%
Potassium 141mg	4%

Lower sodium choice

## 8. English Muffin

Nutrition Facts	
6 servings per container	
<b>Serving size</b>	1 muffin (58g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>130</b>
% Daily Value*	
Total Fat 1g	1%
Saturated Fat 0g	0%
Trans Fat 0g	
Cholesterol 0mg	0%
Sodium 250mg	11%
<b>Total Carbohydrate</b> 26g	<b>9%</b>
Dietary Fiber 2g	7%
Total Sugars 2g	
Includes 2g Added Sugars	4%
<b>Protein</b> 5g	<b>10%</b>
Vitamin D 0mcg	0%
Calcium 95mg	8%
Iron 2mg	10%
Potassium 63mg	2%

\*Percent Daily Values are based on a 2,000-calorie diet. Your Daily Values may be higher or lower depending on your calorie needs.



# Darnell's Food Choices (continued)

## 9. Mixed Nuts

Nutrition Facts	
12 servings per container	
<b>Serving size</b>	1 oz (28g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>170</b>
	% Daily Value*
<b>Total Fat</b> 15g	19%
Saturated Fat 2g	10%
Trans Fat 0g	
<b>Cholesterol</b> 0mg	0%
<b>Sodium</b> 90mg	4%
<b>Total Carbohydrate</b> 6g	2%
Dietary Fiber 2g	7%
Total Sugars 1g	
Includes 0g Added Sugars	0%
<b>Protein</b> 6g	12%
Vitamin D 0mcg	0%
Calcium 26mg	2%
Iron 1mg	6%
Potassium 169mg	4%

Lower sodium choice

## 10. Unsalted, Dry-Roasted Mixed Nuts

Nutrition Facts	
12 servings per container	
<b>Serving size</b>	1 oz (28g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>170</b>
	% Daily Value*
<b>Total Fat</b> 15g	19%
Saturated Fat 2g	10%
Trans Fat 0g	
<b>Cholesterol</b> 0mg	0%
<b>Sodium</b> 0mg	0%
<b>Total Carbohydrate</b> 6g	2%
Dietary Fiber 2g	7%
Total Sugars 1g	
Includes 0g Added Sugars	0%
<b>Protein</b> 6g	12%
Vitamin D 0mcg	0%
Calcium 26mg	2%
Iron 1mg	6%
Potassium 170mg	4%

\*Percent Daily Values are based on a 2,000-calorie diet. Your Daily Values may be higher or lower depending on your calorie needs.



## Sodium in Foods



### Choose **MORE** Often

#### Foods **LOWER** in Sodium

- Chicken and turkey (with skin removed)
- Fresh fish or rinsed canned fish, such as tuna\* or sardines
- Canned foods packed in water
- Reduced-sodium cheeses
- Low-salt or salt-free chips, nuts, and pretzels
- Plain rice, noodles, or pasta
- Homemade, low-sodium, or reduced-sodium soups
- Fresh, frozen, no-salt-added, or rinsed canned vegetables
- Spices, herbs, and flavorings such as cilantro, parsley, garlic powder, onion powder, vinegar, and chili powder



### Choose **LESS** Often

#### Foods **HIGHER** in Sodium

- Smoked and cured meats such as bacon, ham, sausage, hotdogs, bologna, fatback, ham hocks, scrapple, and liver pudding
- Canned fish (not rinsed)<sup>†</sup> such as tuna and sardines, and salted/dried codfish\*
- Frozen meals
- Canned foods packed in broth or salt<sup>†</sup>
- Most cheeses
- Salty chips, crackers, nuts, popcorn, and pretzels
- Quick-cooking rice or rice pilaf, potatoes, noodles, or macaroni and cheese
- Regular canned and instant soups
- Regular canned vegetables, pickles, olives, and pickled vegetables<sup>†</sup>
- Condiments and seasonings such as soy sauce, ketchup, garlic salt, seasoning salt, bouillon cubes, meat tenderizer, monosodium glutamate (MSG), and commercial Cajun or seafood seasonings

\*Pregnant women and nursing mothers: Some types of fish may contain unsafe levels of mercury. Talk to your health care provider to find out the types of fish you can eat safely.

<sup>†</sup>Rinse canned foods to reduce the sodium.



## Eat Less Salt and Sodium

### Spice it up!

**Discover how much flavor you can add by using spices and herbs.**

To break your family's habit of using the salt shaker at the table, try Ms. Diane's secret recipe!

Look for other salt-free seasonings in the grocery store.

**To make food taste good without salt, use cilantro, cumin, fresh garlic, parsley, onion, green pepper, oregano, and a dash of hot pepper. Everyone in my family now likes the taste of foods with less salt.**





# Eat Less Salt and Sodium (continued)

## Take the Lead and Try These Simple Changes:

### When Shopping

1. Buy fresh, frozen, or no-salt-added canned vegetables. Choose food packed in water instead of broth or salt.
2. Buy fresh garlic or garlic powder instead of garlic salt.
3. Choose foods labeled “low sodium,” “sodium free,” or “no salt added.”

### When Cooking

1. Slowly cut back on the amount of salt added when cooking until you don’t use any.
2. Don’t add salt to the water when cooking beans, rice, pasta, or vegetables.
3. Cut back on meats high in sodium, such as bologna, ham, hotdogs, and sausage.
4. Rinse all canned products to reduce the amount of sodium.

### When Eating

1. Fill the salt shaker with a mixture of herbs and spices.
2. Slowly cut back on the amount of salt added at the table until you don’t use any.
3. Choose fruits and vegetables instead of salty snacks.

Darnell has learned to control his high blood pressure. He takes his blood pressure pills with breakfast every morning, so he won’t forget to take them. He walks daily, has stopped smoking, and has found that food tastes good with less salt and sodium.



**Make your personal pledge to do what Darnell has done! Look at these examples:**

#### Breakfast

Cook oatmeal with fat-free or low-fat (1%) milk, raisins, cinnamon, and no salt.

#### Lunch

Use leftover roasted chicken to make a sandwich, instead of using luncheon meats.

#### Dinner

Make your own soup with vegetables and half the usual amount of salt.

#### Snack

Eat an orange instead of salty chips.

**Your health and your family’s health are priceless. Make an investment!**

**Write the changes you’ll try to make this week:**

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## Use Herbs and Spices Instead of Salt

**Allspice:** For meats, fish, poultry, soups, stews, and desserts

**Basil:** For soups, salads, vegetables, fish, and meats

**Cayenne Pepper:** For meats, poultry, stews, and sauces

**Celery Seed:** For fish, salads, dressings, and vegetables

**Chili Powder:** For meats, poultry, and stews

**Cilantro:** For meats, sauces, stews, and rice

**Cinnamon:** For salads, vegetables, breads, and snacks

**Clove:** For soups, salads, and vegetables

**Cumin:** For meats and poultry

**Curry Powder:** For meats, shellfish, and vegetables

**Dill Weed and Dill Seed:** For fish, soups, salads, and vegetables

**Garlic Powder:** For meats, poultry, fish, vegetables, salads, soups, and stews

**Ginger:** For soups, salads, vegetables, and meats

**Marjoram:** For soups, salads, vegetables, beef, fish, and chicken



**Nutmeg:** For vegetables and meats

**Onion Powder:** For meats, poultry, soups, and salads

**Oregano:** For soups, salads, vegetables, meats, and chicken

**Paprika:** For meats, fish, poultry, and vegetables

**Parsley:** For salads, vegetables, fish, and meats

**Rosemary:** For salads, vegetables, fish, and meats

**Sage:** For soups, salads, vegetables, meats, and chicken

**Thyme:** For salads, vegetables, fish, and chicken



## Tips for Taking High Blood Pressure Medicine

1. **Take** the medicine exactly as your health care provider tells you to, even if you feel well.
2. **Tell** your health care provider the names of all the medicines you take, including prescription medicine from other providers, nonprescription (over-the-counter) medicines you get at the drugstore, home remedies, herbs, supplements, and vitamins. Bring all of them with you when you have an appointment with your provider.
3. **Tell** the provider right away if the medicine makes you feel strange or sick. Ask about changing the dosage or switching to another type.
4. **Refill** your prescription before you run out of medicine.
5. Have your blood pressure **checked** often to see if the medicine is working for you.
6. **Don't stop taking** your medicine if your blood pressure is okay. That means the medicine is working.

### Do you know your blood pressure numbers?

- For most adults, a healthy blood pressure is usually below 120/80 mmHg.
- If your numbers are consistently higher, you may have elevated or high blood pressure and may need to go on medication.
- Talk to your health care provider about what your numbers are and write them down.
- If your health care provider says that you have high blood pressure, ask about how you can lower it or keep it in control.

**Write down your blood pressure reading here:** \_\_\_\_\_



# Tips for Taking High Blood Pressure Medicine

(continued)



## Questions to ask your health care provider

**When your provider gives you medicine for high blood pressure, ask:**

Name of medicine(s) \_\_\_\_\_

How much to take \_\_\_\_\_

When to take it \_\_\_\_\_

What to eat or drink with it \_\_\_\_\_

If your other medicines can be taken safely at the same time \_\_\_\_\_

If problems occur, call this number immediately \_\_\_\_\_



## Soul Food Makeover: Vegetable Stew Recipe

<b>3 cups</b>	water
<b>1 cube</b>	vegetable bouillon, low sodium
<b>2 cups</b>	white potatoes cut in 2-inch strips
<b>2 cups</b>	carrots, sliced
<b>4 cups</b>	summer squash, cut in 1-inch squares
<b>1 cup</b>	summer squash, cut in four chunks
<b>2 ears</b>	fresh corn (1½ cups)
<b>1 teaspoon</b>	thyme, ground
<b>2 cloves</b>	garlic, minced
<b>1 stalk</b>	scallion, chopped
<b>½ small</b>	hot red pepper, chopped
<b>1 cup</b>	onion, coarsely chopped
<b>1 cup</b>	tomatoes, diced



### Make It a Meal

To make this dish a meal, serve it with a green salad that includes lettuce (romaine) or spinach, cucumber, and other fresh vegetables. Use a light dressing, such as a vinaigrette, or a low-fat or fat-free dressing. Serve with whole-grain bread or rolls.

**You can add your other favorite vegetables such as broccoli, cauliflower, or string beans.**

1. Heat water and bouillon in a large pot, and bring to a boil.
2. Add potatoes and carrots to the broth, and simmer for 5 minutes.
3. Cut the corn off the cob.
4. Add the remaining ingredients, except for the tomatoes, and continue cooking for 15 minutes over medium heat.
5. Remove the four chunks of squash, and puree in a blender.
6. Return pureed mixture to the pot, and let it cook for 10 minutes more.
7. Add tomatoes, and cook for another 5 minutes.
8. Remove from heat, and let it sit for 10 minutes to allow stew to thicken.

### Makes 8 servings

<b>Serving size:</b> 1¼ cups	<b>Sodium:</b> 37 mg
<b>Calories:</b> 100	<b>Total Fiber:</b> 5 g
<b>Fat:</b> 1 g	<b>Protein:</b> 3 g
<b>Saturated fat:</b> 0 g	<b>Carbohydrates:</b> 23 g
<b>Cholesterol:</b> 0 mg	<b>Potassium:</b> 607 mg

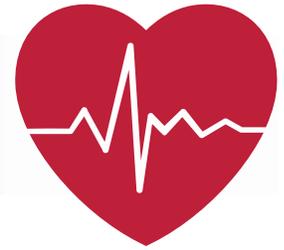
# Keep Your Cholesterol in Check

An illustration of two hands, one in brown and one in purple, holding a red heart. The hands are positioned as if they are gently cradling the heart. The background is a solid red color.

“Just don’t give up what you’re trying to do. Where there is love and inspiration, I don’t think you can go wrong.”

– Ella Fitzgerald

# Session 5



## Keep Your Cholesterol in Check

### Objectives

#### By the end of this session, participants will learn:

- What cholesterol is and how it affects the body
- The importance of heart healthy eating
- What healthy cholesterol levels are
- The steps they can take to lower their cholesterol levels

---

### Materials and Supplies

#### To conduct this session, you'll need:

- *With Every Heartbeat Is Life* manual and picture cards
- Blackboard and chalk, dry erase board, or several large pieces of paper, a marker, and tape
- 1 empty paper towel roll
- Scissors
- Red construction paper and tape or red felt with sticky backing
- Red and yellow modeling clay
- 6 paper plates
- Set of measuring spoons
- 1 stick of shortening or lard
- Bottle of vegetable oil
- Choice of at least three of the following foods—or pictures of them:
  - 1 cup cooked beans
  - 1 beef hotdog
  - 1 orange
  - 2 tablespoons regular mayonnaise
  - 2 ounces American cheese
  - Fried chicken (wing and thigh)
  - 1 package snack cakes (packaged cupcakes)

## Handouts

### Give each participant these handouts during this session:

- Take Action To Control Your Cholesterol (pages 5.30-5.31)
  - List of places to get cholesterol levels checked
  - *(Optional)* Make Your Health a Regular Appointment: A Role Play at Ms. Faye's Hair Salon (page 5.32-5.33)
  - Healthier Fats and Oils (page 5.34)
  - Read the Food Label To Choose Foods Lower in Saturated Fat (page 5.35-5.36)
  - Pam's Breakfast Choices (pages 5.37-5.39)
  - Guess the Fat Activity (pages 5.40)
  - Cooking With Less Saturated Fat (pages 5.41-5.42)
  - Recipe Substitutes (page 5.43)
  - Soul Food Makeover: Chicken Gumbo Recipe (pages 5.44)
- 

## Before This Session

- Prepare a list of places to get cholesterol levels checked. You may find information at your local health department, hospital, or clinic.
- Create the display Fat Matters—But Calories Count, shown on page A.15 in the Appendix.
- For the Guess the Fat Activity on page 5.23:
  1. Buy a stick of shortening or lard. Also buy paper plates and at least three foods from the list above (or use pictures of the foods). Choose foods you think participants eat.
  2. Write the name of each food you're using on a separate plate.
  3. Using the chart on the next page, to find the amount of fat in your foods.

**Session 5**    **Keep Your Cholesterol in Check**

<b>Foods</b>	<b>Teaspoons of Fat (Grams of Fat) (Approximate)</b>
2 ounces American cheese	3¼ teaspoons (13 grams)
2 tablespoons regular mayonnaise	5¼ teaspoons (21 grams)
2 pieces fried chicken (wing and thigh)	9½ teaspoons (38 grams)
1 beef hotdog (2 ounces)	4¼ teaspoons (17 grams)
1 cup cooked beans	¼ teaspoon (1 gram)
1 orange	None
2 snack cakes (1 package)	4½ teaspoons (18 grams)

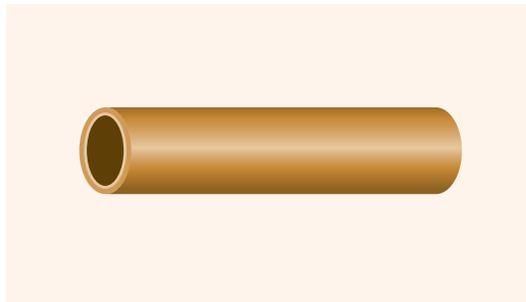
4. Measure the amount of fat (the lard or shortening) listed above for each food you're using. Put that amount of fat on the plate labeled for that food. The lard or shortening represents the amount of fat in the food.
5. Put the foods on three other plates.
6. Put the six plates away until you're ready to do the activity.

## Make an Artery Model

For the “Healthy Arteries” Activity on page 5.15

### What you’ll need:

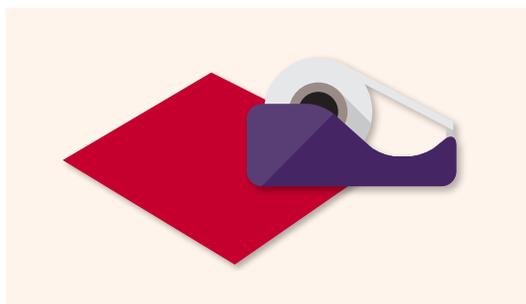
1. One empty paper towel roll



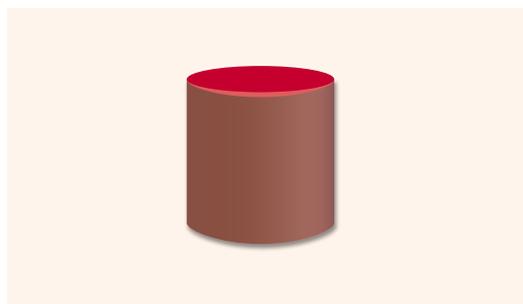
2. Scissors



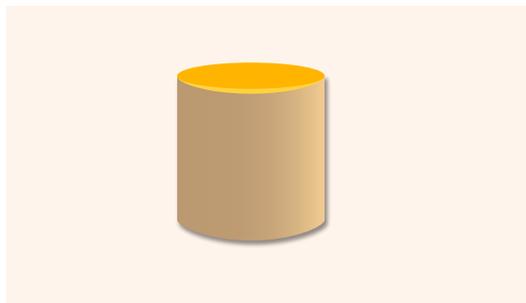
3. Red construction paper and tape or red felt with sticky backing



4. Red modeling clay

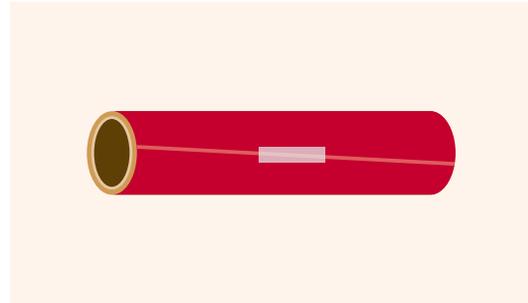
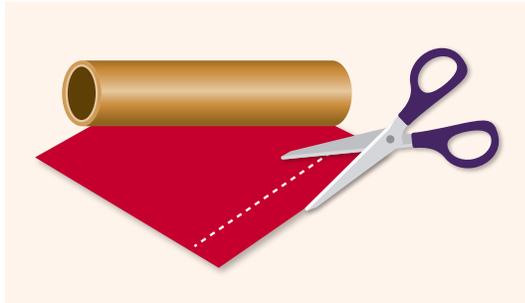


5. Yellow modeling clay

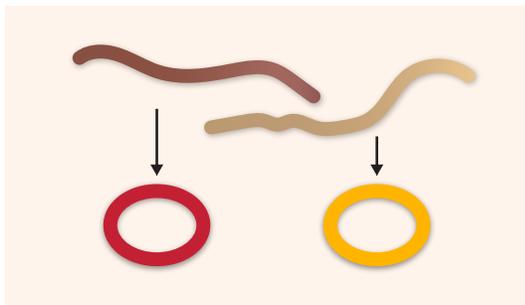


**What you need to do:**

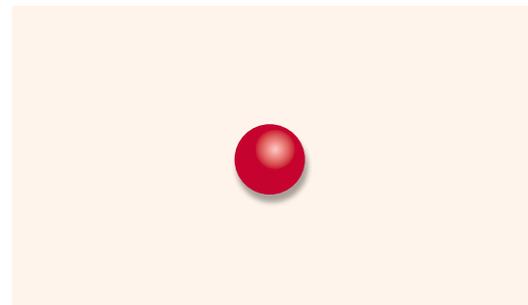
1. Cut enough construction paper or felt to cover the empty paper towel roll.
2. Tape the paper or attach the felt so it covers the roll.



3. Shape thin pieces of yellow and red clay into donuts, about the size of the opening of the roll.



4. Make one small ball of the red clay.



## Session Outline

### Introducing the Session

1. Welcome
2. Review of Last Week's Session
3. About This Session

### Conducting the Session

1. Facts About Cholesterol
2. Cholesterol Levels and Heart Disease
3. What Are Your Numbers?
  - A. What Are Triglycerides?
  - B. Metabolic Syndrome and Your Health
4. Healthy Arteries Activity
5. *(Optional)* Make Your Health a Regular Appointment:  
A Role Play at Ms. Faye's Hair Salon
6. Facts About Fat
7. Food Label Activity: Fats
8. Guess the Fat Activity
9. Cooking With Less Saturated Fat
10. Making Your Favorite Family Recipes With Your Heart in Mind:  
Recipe Substitutions
11. Soul Food Makeover: Chicken Gumbo Recipe

### Review of Today's Key Points

### Weekly Pledge

### Closing

# Introducing the Session

## 1. Welcome

DO **Welcome** participants to the session.

## 2. Review of Last Week's Session

SAY Last week, we talked about salt and sodium.

DO **Ask** the questions below and give the correct answers if participants don't.

**Q: Who remembers why you should limit the amount of salt and sodium in your diet?**

A: You should cut back on salt and sodium to help prevent or to lower high blood pressure.

**Q: What are some ways to cut back on salt and sodium?**

A: To cut back on salt and sodium, you can:

- Check the food label and choose low- or no-sodium foods.
- Use herbs and spices instead of salt to season foods.
- Eat fresh, frozen, and other foods without salt.
- Avoid preseasoned or processed meats, poultry, and vegetables.
- Try not to use premade sauces, mixes, and “instant” products like rice, noodles, and ready-made pasta.
- Eat at home more often so you can cook from scratch.

SAY At the end of our last session, you pledged to control your blood pressure better and choose foods lower in salt and sodium. What problems did you have? How did you solve them?

### NOTE



Allow 5 minutes for participants to respond.

**ASK** Has anyone completed the family health history?

**NOTE**



(Optional) **Give** a prize to participants who've completed the history.

**ASK** Does anyone want to share what you've learned about your family health history?

**NOTE**



Allow 5 minutes for participants to respond.

### 3. About This Session

**SAY** Ella Fitzgerald said, "Just don't give up what you're trying to do. Where there is love and inspiration, I don't think you can go wrong."

**ASK** What does this quote mean to you?

**NOTE**



Allow 5 minutes for participants to respond.

**SAY** Today we're going to talk about the cholesterol in your blood and what it has to do with heart disease. You'll learn what you can do to keep your cholesterol levels in the healthy range. We'll also do group activities that show how much saturated fat is in some foods and how to cook with less saturated fat.

# Conducting the Session

## 1. Facts About Cholesterol

**SAY** If you have unhealthy levels of cholesterol in your blood, you're more likely to get heart disease, including heart attack, or a stroke. Here are some facts about our cholesterol levels:

- About one-fourth (24 percent) of African American adults have high cholesterol, compared to 27 percent of all adults in the United States.
- About half (55 percent) of all adults with high cholesterol in the United States take a drug to control their cholesterol levels. But only 44 percent of African Americans do.

## 2. Cholesterol Levels and Heart Disease

### NOTE



This section explains what cholesterol is, why the body needs cholesterol, how much cholesterol the body needs, and where cholesterol comes from.

**SAY** The cholesterol in your body is a soft, waxy, fat-like substance. Your body needs it to make hormones, vitamin D, and substances (like bile) that help you digest foods. Your body makes all the cholesterol it needs.

**DO** **Show** picture card 5.1.



PICTURE

**SAY** Small packages, called lipoproteins, carry cholesterol through your bloodstream. Two kinds of lipoproteins carry the cholesterol. One is LDL or “low-density lipoprotein.” The other is HDL or “high-density lipoprotein.”

**SAY** LDL deposits cholesterol inside the arteries that carry blood to your heart and other parts of your body. Over time, cholesterol, along with other substances, form plaque inside your arteries and can prevent blood flow. That can cause chest pain or even a heart attack.

HDL helps your body get rid of cholesterol, so it doesn't build up inside your arteries.

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**DO** **Show** picture card 5.2.



**SAY** What affects your cholesterol levels? Some things you can't change, like your genes, age, some medical conditions, and also some medicines you may need to treat a serious condition.

Here's what raises our cholesterol levels that we can work on:

- Eating foods that are high in saturated fat, which increases your LDL.
- Not getting enough physical activity (inactivity has been linked to low HDL).
- Smoking is a double whammy. It lowers your HDL, particularly in women, and increases your LDL.
- Being overweight. Losing weight may lower your LDL.
- Having constant stress in your life may raise your LDL and lower your HDL.

---

**SAY** If you make healthy lifestyle changes and your cholesterol levels are still too high, you may need to take medicine. But continue to work on having a healthy lifestyle, even if you're on medicine.

### 3. What Are Your Numbers?

DO **Show** picture card 5.3.



**SAY** You can get a blood test to measure your cholesterol levels at a clinic or your health care provider's office, or a cholesterol screening event (such as a health fair).

The blood test done at the doctor's office is called a lipid profile. It tells you the levels of each type of fat in your blood, including your total cholesterol, LDL cholesterol, HDL cholesterol, and triglycerides. (We'll talk about triglycerides later.) Ask your doctor how to prepare for the test, including if you should fast (not eat) before the test.

Screening sites may measure only total cholesterol and sometimes HDL cholesterol. You may need to follow up with the doctor for a complete lipid profile.

**ASK** Have you ever had your cholesterol checked? Do you remember your levels?

NOTE



Allow a moment for participants to respond.

DO **Give** participants the "Take Action To Control Your Cholesterol" handout (pages 5.30-5.31). **Review** the cholesterol levels.



NOTE



If participants ask, **explain** that cholesterol is measured in milligrams per deciliter (mg/dL).

**DO** Show picture card 5.4.



**SAY** The goal for LDL cholesterol level is different for everyone. It depends on the risk factors you have.

The number of risk factors—such as high blood pressure, low HDL, family history of heart disease, age, gender, and smoking—affects your LDL goal.

The higher your LDL level and the more risk factors you have, the greater your chances of developing heart disease or having a heart attack. Your health care provider can help you set a goal for your LDL level.

Cholesterol is measured in milligrams per deciliter (mg/dL). A healthy total cholesterol is less than 200 mg/dL. This number is for a person who doesn't have any risk factors for heart disease. Talk with your health care provider about what your cholesterol numbers should be. High cholesterol puts you at a higher risk for clogged arteries and heart attack.

### A. What Are Triglycerides?

**ASK** Can anyone tell us what triglycerides are?

#### NOTE



Allow a minute for participants to respond.

**SAY** Triglycerides are another type of fat in your blood that increases your risk for heart disease. Certain health problems and medications can increase your triglyceride levels. But eating too many calories and foods high in fat and sugar, drinking too much alcohol, and smoking also cause your body to make more triglycerides.

A fasting triglycerides level above 150 mg/dL is high. Normal is less than 75 mg/dL.

People with high triglycerides often have low HDL cholesterol. People with diabetes can also have high triglycerides and low HDL cholesterol.

Here's what helps us keep triglycerides at healthy levels:

- Maintain a healthy weight.
- Get regular physical activity (aim for at least 30 minutes a day).
- Eat a heart healthy diet that's low in saturated fat.
- Limit sugar, such as candy and other sweets; regular soda, juice, and other drinks high in sugar; and foods that are highly processed.
- Don't smoke. If you do smoke, quit.
- Limit your alcohol.

**ASK** Do you know what your triglyceride level is?

**NOTE**

Allow a few minutes for participants to respond.

**DO** **Hand out** your list of clinics and hospitals that provide low-cost or free cholesterol testing.

**SAY** Here's a list of places where you can get low-cost or free cholesterol testing. I want you to try to get your HDL, LDL, and triglycerides checked. When you go to get tested, ask what's included in the test. Also, ask for your results and write them on your wallet card.

## B. Metabolic Syndrome and Your Health

**SAY** Now, let's talk about metabolic syndrome. Many people have metabolic syndrome but don't know it.

Having metabolic syndrome means you have at least three out of five specific health problems, which I'll list.

---

**DO** **Show** picture card 5.5.



---

**SAY** If you have three of the following, even if you're on medicine to treat them, you have metabolic syndrome:

1. A large waistline. Being overweight can be unhealthy, but excess fat in the stomach area is a particular risk factor for heart disease.

This means:

- Greater than 35 inches for women
  - Greater than 40 inches for men
2. A triglyceride level of 150 mg/dL or more
  3. A low HDL (good) cholesterol level:
    - Less than 50 mg/dL for women
    - Less than 40 mg/dL for men
  4. A blood pressure of 130/85 mmHg or higher
  5. High blood sugar (above 100 mg/dL) when you have a fasting blood test. (Fasting means having nothing to eat or drink except sips of water.)

---

**SAY** People with metabolic syndrome should try to eat a heart healthy diet, lose weight, manage stress, quit smoking, and be more physically active. If these changes don't help enough, you may also need to take medicine.

---

**SAY** If you think you might have metabolic syndrome, talk to your health care provider. A physical exam and blood tests can help diagnose it.

## 4. Healthy Arteries Activity



ACTIVITY

**NOTE**

This section uses the picture cards and an artery model to show how cholesterol can collect on the walls of the arteries and slow down or block blood flow. Blocked arteries can cause a heart attack or stroke.

**DO**

**Show** picture card 5.6.



PICTURE

**SAY**

Blood flows freely to all cells of the body when arteries are healthy.

When your LDL cholesterol is too high, cholesterol and other substances, called plaque, may become trapped in the walls of the arteries, causing them to harden. The opening of the arteries can become clogged and narrowed.

**DO**

**Show** the artery model.

**NOTE**

The next two pages help you explain the artery model.

**DO**

**Pass** the artery model around so participants can look at it closely.

**ASK**

Do you know why we shouldn't put melted grease, such as lard or butter from cooking, down the sink?

**NOTE**

Allow a moment for participants to respond.

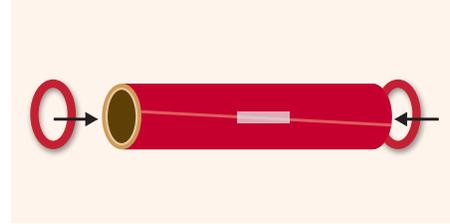
**SAY**

The fat clogs pipes, just like saturated fat clogs your arteries!

## How To Explain the Artery Model

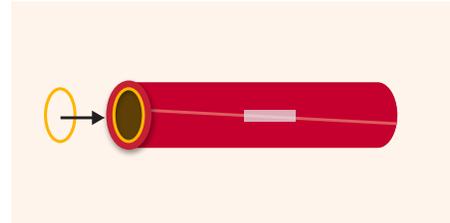
- 1. Place** the donut-shaped pieces of red clay on the outside edge of both ends of the roll.

**SAY** This is a healthy artery. The blood can flow through the opening easily.



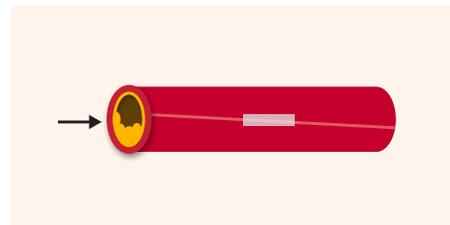
- 2. Add** pieces of the yellow clay to the inside edge of the red clay on one end of the roll.

**SAY** This is the beginning of a clogged artery. Plaque is starting to build up.



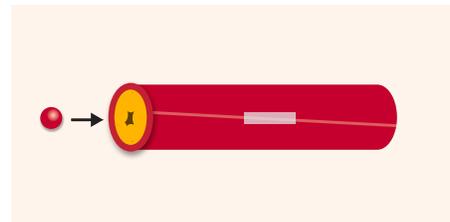
- 3. Continue to add** pieces of yellow clay to this end of the roll. Add pieces until you almost fill in the opening.

**SAY** The opening of the clogged artery is getting smaller. Blood can't flow through easily.



- 4. Put** a red ball in the small opening at the end of the roll.

**SAY** The red ball here is a blood clot. The plaque buildup makes it more likely that blood clots will form inside your arteries, further blocking blood flow. Clogged arteries can cause a stroke, a heart attack, angina (chest pain), and poor blood circulation.



## 5. (Optional) Make Your Health a Regular Appointment: A Role Play at Ms. Faye’s Hair Salon

DO **Ask** for two volunteers to be the actors in the role play.

DO **Give** the volunteers the “Make Your Health a Regular Appointment: A Role Play at Ms. Faye’s Hair Salon” handout (pages 5.32-5.33) for them to read out loud.



HANDOUT

DO You **read** the introduction and the volunteers do the role play

**ASK** What are some of the lessons you learned from this role play?  
Is there any part of the role play that you can use in your own life?

### NOTE



Allow 5 minutes for participants to respond.

## 6. Facts About Fat

**SAY** There are two main types of fat—saturated and unsaturated. Most foods contain some of both. The total fat in a food is its saturated fat plus its unsaturated fat.

Saturated fat is mainly in foods that come from animals. Those foods are high-fat meat, cheese, milk, and butter, among others.

**SAY** You need to eat some fat to be healthy. Fat has substances that your body can’t make on its own or live without.

Your body uses fat to:

- Store and provide energy
- Absorb vitamins A, D, E, and K

**ASK** What types of fat do you use when you cook?

## NOTE



Allow about 3 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

## SAY

Fats with some of the highest amounts of saturated fat are coconut oil, palm kernel oil, butter, beef fat, palm oil, pork fat (lard), chicken fat, and shortening.

Saturated fat is usually solid at room temperature.

## DO

**Show** picture card 5.7.



PICTURE

## SAY

Here are some foods that are **high in saturated fat**:

- Whole milk and full-fat dairy products (like regular cheeses, sour cream, and evaporated whole milk)
- Ice cream and whipped cream
- Fatty cuts of meat, such as chuck steak, regular ground beef, ribs, pork chops, bacon, pork sausage (kielbasa), and liverwurst
- Beef or pork hotdogs
- Foods fried in grease or lard (like chicken, fish, shrimp, and French fries)
- Butter
- Shortening
- Lard
- Skin from chicken, turkey, and pork
- Smothered meat and poultry dishes, such as smothered chicken or pork chops, made with animal fat or greasy gravies
- Oils such as coconut, palm, and palm kernel
- Some doughnuts, pastries, cakes, and cookies
- Cornbread, hushpuppies, spoonbread, and biscuits if made with lard, butter, or shortening

## DO

**Show** picture card 5.8.



PICTURE

**SAY** Here are foods that have **little or no saturated fat**:

- Lean meats such as loin, round, and extra lean ground beef
- Fish and seafood
- Turkey bacon
- Poultry without the skin
- Beans
- Rice
- Tub margarine
- Fat-free and low-fat milk and cheese, yogurt, and evaporated milk
- Vegetable oil
- Breads (made without butter or lard)
- Fruits and vegetables

**SAY** Unsaturated fats are usually liquid at room temperature. But a few oils (coconut, palm, and palm kernel) are high in saturated fat.

**SAY** (*Optional*)

Replacing saturated fat with polyunsaturated or monounsaturated fats may reduce your risk of having a heart attack. The evidence is particularly strong for polyunsaturated oils. Here are some foods that have them:

### More Information

#### **Polyunsaturated fat is in:**

- Vegetable oils
  - Cottonseed oil
  - Corn oil
  - Soybean oil
- Oil in salmon

#### **Monounsaturated fat is in:**

- Some animal fats
- Avocados
- Vegetable oils
  - Canola oil
  - Olive oil
  - Peanut oil
  - Safflower oil



**DO** **Give** participants the “Healthier Fats and Oils” handout (page 5.34).



---

**SAY** The graph shows which products have the least amount of saturated fat.

---

**ASK** What three oils have the least amount of saturated fat?

---

**DO** **Say** the following if they aren't mentioned:  
Canola, safflower, and sunflower oils have the least amount.

---

**SAY** Polyunsaturated and monounsaturated fats are better for your health than saturated fat. But most of us need to eat less of all types of fat. Fats are high in calories. Cutting back on calories helps you lose weight. We'll talk about calories at the next session.

---

**SAY** Plant foods are generally lower in saturated fat. They also contain a type of soluble dietary fiber that helps lower cholesterol. (This isn't true for palm and coconut oils.)

---

**DO** **Show** picture card 5.9.



---

**SAY** Soluble dietary fiber is in beans, peas, fruits, whole oats, oat bran, nuts, seeds, and vegetables.

For great sources of soluble fiber, cook your own dry beans or get low-sodium canned beans. Flavor with garlic and spices instead of salt.

## 7. Food Label Activity: Fats



ACTIVITY

- DO **Give** participants the “Read the Food Label To Choose Foods Lower in Saturated Fat” handout (page 5.35-5.36) and the “Pam’s Breakfast Choices” handout (pages 5.37-5.39).



HANDOUT

- DO **Point out** on the food label where to find saturated fat.

- DO **Show** picture card 5.10.



PICTURE

- SAY** You don’t have to give up a favorite food to eat a healthy diet. When a food you like is high in a nutrient you want to get less of, such as saturated fat or sodium, have a small portion, or balance it at other meals by eating foods that are low in that nutrient.

For a healthier heart, use nutrition facts labels to choose foods with less saturated fat. (But also avoid high-sodium and high-carbohydrate foods.)

- DO **Show** participants where the Percent Daily Value for total fat and saturated fat is on the food label for whole milk.

- SAY** The Daily Value (DV) is the amount of certain key nutrients that is recommended you get every day (based on a 2,000-calories-per-day diet). The Percent Daily Value is the amount of that nutrient in one serving. The Percent Daily Value can be used to compare food products.

Generally, 5 percent DV of a nutrient per serving means that the food is low in that nutrient. But 20 percent DV means that the food is high in the nutrient.

Look at the bottom of the “Read the Food Label To Choose Foods Lower in Saturated Fat” handout. Look at the labels for whole milk and fat-free milk. Which is lower in saturated fat?

- SAY** Fat-free milk is lower in saturated fat. One cup of fat-free milk has no saturated fat. One cup of whole milk has 23 percent (about one-fourth) of the Percent Daily Value of saturated fat.

## NOTE



If anyone asks, **explain** that people who have trouble digesting regular milk may want to try lactose-free milk products or nondairy “milks,” such as soy or almond milk. Note that the nutrients in nondairy products differ from those in dairy products.

## SAY

Now look at “Pam’s Breakfast Choices.” We’re going to use the food label to practice choosing foods that are lower in saturated fat.

**Pam’s Problem**

Pam is rushed in the morning, so she often has just a honey bun or doughnut before work. Look at the food labels. Help Pam select breakfast foods that are lower in saturated fat than her usual choices.



## NOTE



The correct answer is underlined.

- A honey bun or a plain bagel?
- A jelly doughnut or an English muffin?
- A banana muffin or a banana?
- Toast with butter or toast with a small amount of soft tub margarine?
- Canadian bacon or pork sausage links?
- Low-fat American cheese or regular American cheese?

- DO **Ask** for a volunteer to describe:
- What they usually eat for breakfast
  - Which of those foods are higher in fat
  - What they could eat instead, especially what would also be low in sodium.

## NOTE



**Write** the answers on the blackboard, dry erase board, or large piece of paper taped to the wall. Help the volunteer select some substitutes, if needed.

## 8. Guess the Fat Activity



ACTIVITY

- SAY** We're going to play a guessing game that will help you learn about the fat in some foods.

- DO **Give** group members the "Guess the Fat Activity" handout (page 5.40).



HANDOUT

- DO **Show** participants the three plates of foods (or pictures of food) you prepared ahead of time.

- SAY** Guess the number of teaspoons of fat in one serving of each of these foods. Does anyone have any guesses?

- DO **Write** the answers on the handout.

- DO **Bring out** the plates with the fat (lard or shortening) on them.

**SAY** This is the actual amount of fat.

**SAY** As you can see, it’s easy to go over the recommended amount of fat when we eat foods higher in fat, such as fried foods, some fast foods, hotdogs, chips, and ice cream.

To make it easier to cut back on fat, eat more foods that are lower in fat, such as fruits, vegetables, rice, whole-grain cereals and breads, beans, and fat-free or low-fat milk products. People who have trouble digesting the lactose in milk products should use lactose-free or nondairy products.

**ASK** How do you feel about your guesses of the true amount of fat in the food? Please write the true amount on your form also.

**NOTE**



Allow 3 to 5 minutes for participants to talk about their reactions.

**SAY** There are lower-fat substitutes for some high-fat foods. But they might have more sodium or sugar, so check the nutrition facts label.

**DO** **Show** the nutrition display, Fat Matters—But Calories Count.

**DO** **Review** the following list.

Foods	Lower-Fat Substitutions
Regular cheese	Fat-free or low-fat cheese
Whole milk	Fat-free or low-fat milk, or nut “milks”
Regular sour cream	Fat-free or low-fat sour cream or plain yogurt
Pork rinds	Low-salt crackers
Beef hotdog	Low-fat beef hotdog or soy hotdog

**SAY** You can also reduce the amount of fat you eat by having smaller portions and having high-fat foods less often.

## 9. Cooking With Less Saturated Fat

**NOTE**

This section helps participants understand that they can cut back on fat without giving up favorite foods.

**SAY**

What could you do to use less saturated fat in your cooking?

**NOTE**

Allow about 3 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

**DO**

**Give** participants the “Cooking With Less Saturated Fat” handout (pages 5.41-5.42). **Review** each of the dishes.



HANDOUT

**ASK**

What makes the recipes on the handout lower in saturated fat?

**NOTE**

Allow a few minutes for participants to respond.

**DO**

**Add** the following reasons if they aren’t mentioned:

- Beans and brown rice are both naturally low in fat.
- We make the potato salad with low-fat or fat-free mayonnaise.
- We use lean cuts of meat. Before cooking, we remove all visible fat, including the skin.
- Meat dishes aren’t fried or prepared with fat—like lard or grease.
- We drain the fat off cooked ground meat.
- The fruit shake uses fat-free milk instead of whole milk.

## 10. Making Your Favorite Family Recipes With Your Heart in Mind: Recipe Substitutions

**SAY** Some of us have favorite recipes that have been in our families for generations. Let's make them healthier!

**DO** **Give** each participant the "Recipe Substitutes" handout (page 5.43).



HANDOUT

**DO** **Ask** for a volunteer to read the handout out loud.

**SAY** Try these substitutions next time you're cooking a favorite dish.

## 11. Soul Food Makeover: Chicken Gumbo Recipe



RECIPE

**DO** **Give** participants the "Soul Food Makeover: Chicken Gumbo Recipe" handout (page 5.44).



HANDOUT

**ASK** How have we cut back on saturated fat in this recipe?

### NOTE



Allow a moment for participants to respond.

**DO** **Add** the following if they aren't mentioned:

- We took the skin off the chicken before cooking.
- We use chicken breasts, which are lower in fat than chicken thighs.

**SAY** Remember that even lower-fat food will make you gain weight if you eat large portions!

**DO** **Ask** if there are any questions. **Encourage** participants to try this recipe at home this week.

## Review of Today's Key Points

**SAY** Let's review what you've learned today.

### **What clogs arteries?**

Cholesterol buildup called plaque, and blood clots

### **What's a desirable total cholesterol level for a person who doesn't have any risk factors for developing heart disease?**

Less than 200 mg/dL

### **What helps keep cholesterol levels low?**

- Eating foods lower in saturated fat
- Eating a variety of whole grains, fruits, and vegetables
- Losing weight if you're overweight
- Being physically active
- Managing your stress
- Quitting smoking

### **What are some high-fat foods?**

Fatty meat, including fatback, beef oxtail, bacon, and chitterlings (also called chitlins); poultry with skin; whole milk and cheese, butter, lard, shortening, coconut oil, and palm kernel oil

### **What can you do to make foods lower in fat?**

- Trim the fat from meat before cooking.
- Take the skin off poultry and throw it away.
- Bake, broil, braise, roast, or grill food instead of frying it.
- Skim the fat off before serving.

### **Can you name some foods that are high in soluble fiber?**

- Oats, beans, and peas
- Fruits and vegetables

## Weekly Pledge



**SAY** You've learned a lot today about cholesterol levels and how to eat less saturated fat. Please think of one change you can make in your everyday life to keep your cholesterol in check. This will be your pledge for the week.

**SAY** Be specific about **what** you'll do, **how** you'll do it, and **when** you'll start. Here are some examples:

- I'll take the skin off chicken and throw the skin away.
- I'll bake fish instead of frying it.
- I'll try low-fat milk this week.

### NOTE



Allow 5 minutes for participants to think of a pledge.

**SAY** Write your pledges on the "Take Action To Control Your Cholesterol" handout on pages 5.30-5.31. Keep this handout where you can see it and review your pledges.

**SAY** Would anyone like to share your pledge with the group?

### NOTE



**Write** their pledge ideas on the blackboard, dry erase board, or large piece of paper taped to the wall.

**SAY** (*Optional*)

Today, I want you to think about what inspires you. Before making lifestyle changes, it helps to get inspired! Like Ella Fitzgerald said, "Just don't give up what you're trying to do. Where there is love and inspiration, I don't think you can go wrong." Find what inspires you to make healthy choices.

**ASK** What gives you inspiration and how could you use inspiration to help you keep your pledge?

**NOTE**

Allow 3 minutes for participants to share their thoughts.

**SAY** We'll discuss the results of your pledge next week. Remember to continue to work on your pledges from our last sessions to be physically active and to control your blood pressure. Also, please continue working on your family health history.

## Closing

**SAY** Thank you for coming today. What did you think of today's session?

**NOTE**

**Wait** to see if participants have a response.

**SAY** I'm looking forward to seeing you at the next session. It's going to be about maintaining a healthy weight.

**NOTE**

**Think** about today's session. What worked and what didn't work? Have you decided to make any changes in your own life based on what was covered in today's session?



# Take Action To Control Your Cholesterol

## Do you know your cholesterol numbers?

### Get Checked

Get your cholesterol and triglyceride levels tested at your health care provider's office. The test is called a lipid panel. Ask your provider what your levels should be.

### Take Action

Choose healthy foods that will help you control your cholesterol levels, avoid being overweight, and protect your heart.

## How I switched my family from whole milk to fat-free milk

Ms. Diane has learned that it's not difficult to get her family to eat foods lower in saturated fat and cholesterol.

I slowly changed the milk my family drank from whole milk to fat-free milk. The first month I served reduced-fat (2%) milk. During the next month, I served low-fat (1%) milk. Finally, I made the switch to fat-free milk. The change was so slow that they couldn't even taste the difference.





# Take Action To Control Your Cholesterol (continued)

## Try These Simple Changes:

### When Shopping

1. Buy fat-free or low-fat (1%) milk, cheese, or low-fat products. Choose lean cuts of beef and lean ground beef.
2. Buy canola or sunflower oil instead of lard or shortening for cooking.
3. Use the food label to help you choose foods lower in saturated fat.

### When Cooking

1. Trim the fat from meat, and remove the skin from chicken and turkey before cooking.
2. Use vegetable oil on baking pans and skillets instead of butter or other types of grease.
3. Cook ground meat thoroughly, then drain the fat off into a cup (not down the sink). Throw the fat in the garbage when cool.
4. Cool soups or stews and skim off the layer of fat that rises to the top.

### When Eating

1. Use fat-free or low-fat salad dressing, mayonnaise, or sour cream.
2. Choose fruits and vegetables instead of high-fat foods like chips or fries.

Pam has learned that foods high in saturated fat increase her cholesterol level. So she improved her favorite cobbler recipe by using soft tub margarine and fat-free milk. Now the cobbler is lower in saturated fat and still tastes great.



### Make your personal pledge to do what Pam has done! Look at these examples:

#### Breakfast

Use fat-free or low-fat milk with your oatmeal.

#### Lunch

Use leftover roasted turkey with lettuce, tomato, and mustard to make a delicious sandwich. Have carrot sticks with low-fat dip instead of chips.

#### Dinner

Steam fish with allspice, garlic powder, cayenne pepper, lemon, and tomatoes. Serve with a side salad and a small portion of brown rice.

#### Snack

Have apple slices sprinkled with cinnamon instead of high-fat chips or pork skins.

**Your health and your family's health are priceless. Make an investment!**

**Write the changes you'll try to make this week:**

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# Make Your Health a Regular Appointment

## A Role Play at Ms. Faye's Hair Salon

**Ms. Faye is a community health worker and the owner of a hair salon.  
Pam is her friend and regular client.**

### Faye

Are you coming to my cholesterol screening next Sunday at the church's health fair? I'll be giving a talk about eating foods lower in fat.

### Pam

I don't know if I believe all the fuss about high cholesterol.

### Faye

I had my doubts too. Then I learned more about how having unhealthy cholesterol levels increases your risk of having a heart attack. I can't afford to have a heart attack!

### Pam

How do you know if you have unhealthy levels?

### Faye

You don't unless you get tested. That's what Sunday's screening is about. We do a simple blood test to measure your total cholesterol level. My blood test showed that my cholesterol was too high. That's when I started changing what I ate.

### Pam

I was wondering why you stopped asking me to pick up breakfast on the way to my appointments with you!





## A Role Play at Ms. Faye’s Hair Salon (continued)

### Faye

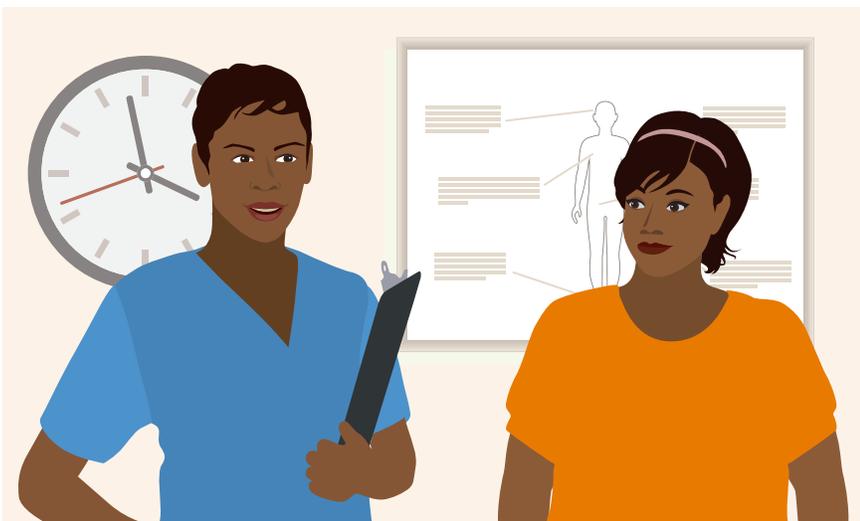
Now I have breakfast at home, and I’m walking more to keep my weight down. I’ve lowered my cholesterol enough that my doctor said I could stop taking the cholesterol medicine—as long as I keep up the healthy eating and walking.

### Pam

Okay—I’ll get my cholesterol checked!

### Faye

Now you can look good on the outside, and be healthy on the inside.





# Healthier Fats and Oils

**Choose common fats and oils with less saturated fat.**



Choose **MORE Often**

**Foods LOWER in Saturated Fat**

- Canola oil
- Safflower oil
- Sunflower oil
- Corn oil
- Olive oil
- Sesame oil
- Peanut oil
- Soft tub margarine

Choose **LESS Often**

**Foods HIGHER in Saturated Fat**

- Coconut oil
- Butter
- Beef fat
- Palm oil
- Pork fat (lard)
- Chicken fat
- Shortening



# Read the Food Label To Choose Foods Lower in Saturated Fat



Food labels tell you what you need to know about choosing healthier options. Here's a food label for a carton of whole milk.

## 1. Serving Size and Number of Servings

The serving size is 8 fluid ounces (1 cup). There are two servings in this carton.

## 2. Amount Per Serving

The nutrient amounts are for one serving. So, if you have more than one serving, you need to add nutrient amounts. For example, if you drink 2 cups of milk, you're drinking two servings. You would then double the amount of calories and saturated fat.

## 3. Percent Daily Value

The Percent Daily Value helps you compare products. Just make sure the serving sizes are the same. The goal is to consume no more than 100% of the nutrients in one day.

## 4. Nutrients

Here is the amount of saturated fat in one serving. This amount is in grams (g). Have no more than 16g in one day for a 2,000 calorie diet.

### Whole Milk

<b>Nutrition Facts</b>				
2 servings per container				
<b>Serving size</b>		<b>1 cup (244g)</b>		
	<b>Per serving</b>	<b>Per container</b>		
<b>Calories</b>	<b>150</b>	<b>300</b>		
	<b>% DV*</b>	<b>% DV*</b>		
<b>Total Fat</b>	8g	<b>10%</b>	16g	<b>21%</b>
<b>Saturated Fat</b>	4.5g	<b>23%</b>	9g	<b>45%</b>
<i>Trans Fat</i>	0g		0g	
<b>Cholesterol</b>	25mg	<b>8%</b>	50mg	<b>17%</b>
<b>Sodium</b>	105mg	<b>5%</b>	210mg	<b>9%</b>
<b>Total Carbs.</b>	12g	<b>4%</b>	24g	<b>9%</b>
Dietary Fiber	0g	<b>0%</b>	0g	<b>0%</b>
Total Sugars	12g		24g	
Incl. Added Sugars	0g	<b>0%</b>	0g	<b>0%</b>
<b>Protein</b>	8g	<b>16%</b>	16g	<b>32%</b>
Vitamin D	3.1mcg	15%	6.2mcg	30%
Calcium	276mg	20%	552mg	40%
Iron	0.07mg	0%	0.14mg	0%
Potassium	322mg	6%	644mg	15%

\*The % Daily Value (DV) tells you how much a nutrient in a serving of food contributes to a daily diet. 2,000 calories a day is used for general nutrition advice.

\* **Percent Daily Values** are based on a 2,000-calorie diet. Your Daily Values may be higher or lower depending on your calorie needs.



# Read the Food Label To Choose Foods Lower in Saturated Fat (continued)

## The Choice Is Yours — Compare!

### Which one would you choose?

Except for calories and saturated fat, fat-free milk has all the nutrients of whole milk, including the calcium. Read food labels, and choose products to keep your heart strong. Calcium-fortified alternatives such as soymilk have lower fat and provide calcium; however, they may not provide the other nutrients found in milk.

### Whole Milk

The goal is to consume no more than 16g of saturated fat in one day. One cup of whole milk contains 4.5g of saturated fat, so that one cup of whole milk contains about one-fourth of the total amount of saturated fat limit per day.

	% Daily Value*
<b>Total Fat</b> 8g	<b>10%</b>
Saturated Fat 4.5g	<b>23%</b>
<i>Trans Fat</i> 0g	
<b>Cholesterol</b> 25mg	<b>8%</b>
<b>Sodium</b> 105mg	<b>5%</b>

### Fat-Free Milk

One cup of fat-free milk has 0.1 gram of saturated fat. You can learn a lot from a food label.

	% Daily Value*
<b>Total Fat</b> 0g	<b>0%</b>
Saturated Fat 0.1g	<b>1%</b>
<i>Trans Fat</i> 0g	
<b>Cholesterol</b> < 5mg	<b>2%</b>
<b>Sodium</b> 100mg	<b>4%</b>



# Pam's Breakfast Choices

Pam has little time in the morning to prepare breakfast. She often has a honey bun or doughnut. Look at the food labels. Which breakfast foods are lower in saturated fat than her usual choices? **Write the number of your choice for each pair in the space between the labels.**

## 1. Honey Bun

Nutrition Facts	
1 servings per container	
<b>Serving size</b>	1 honey bun (85g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>370</b>
% Daily Value*	
<b>Total Fat</b> 21g	27%
Saturated Fat 10.3g	52%
<i>Trans Fat</i> 0g	
<b>Cholesterol</b> < 5mg	1%
<b>Sodium</b> 260mg	11%
<b>Total Carbohydrate</b> 42g	15%
Dietary Fiber 1g	4%
Total Sugars 21g	
Includes 19g Added Sugars	38%
<b>Protein</b> 4g	8%
Vitamin D 0mcg	0%
Calcium 139mg	10%
Iron 1.2mg	6%
Potassium 81.6mg	2%

## 2. Plain Bagel

Nutrition Facts	
6 servings per container	
<b>Serving size</b>	1 bagel (75g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>190</b>
% Daily Value*	
<b>Total Fat</b> 1g	1%
Saturated Fat 0.3g	2%
<i>Trans Fat</i> 0g	
<b>Cholesterol</b> 0mg	0%
<b>Sodium</b> 360mg	16%
<b>Total Carbohydrate</b> 38g	14%
Dietary Fiber 2g	7%
Total Sugars 4g	
Includes 4g Added Sugars	8%
<b>Protein</b> 8g	16%
Vitamin D 0mcg	0%
Calcium 67mg	6%
Iron 4.5mg	25%
Potassium 56mg	2%

Lower saturated fat choice

## 3. Jelly Doughnut

Nutrition Facts	
1 servings per container	
<b>Serving size</b>	1 doughnut (85g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>290</b>
% Daily Value*	
<b>Total Fat</b> 16g	21%
Saturated Fat 4g	20%
<i>Trans Fat</i> 0g	
<b>Cholesterol</b> 20mg	7%
<b>Sodium</b> 390mg	17%
<b>Total Carbohydrate</b> 33g	12%
Dietary Fiber < 1g	3%
Total Sugars 18g	
Includes 16g Added Sugars	32%
<b>Protein</b> 5g	10%
Vitamin D 0mcg	0%
Calcium 21mg	2%
Iron 1.5mg	8%
Potassium 67mg	2%

## 4. English Muffin

Nutrition Facts	
6 servings per container	
<b>Serving size</b>	1 muffin (57g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>130</b>
% Daily Value*	
<b>Total Fat</b> 1g	1%
Saturated Fat 0.4g	2%
<i>Trans Fat</i> 0g	
<b>Cholesterol</b> 0mg	0%
<b>Sodium</b> 240mg	10%
<b>Total Carbohydrate</b> 25g	9%
Dietary Fiber 2g	7%
Total Sugars 2g	
Includes 2g Added Sugars	4%
<b>Protein</b> 5g	10%
Vitamin D 0mcg	0%
Calcium 93mg	8%
Iron 2mg	10%
Potassium 62mg	2%

Lower saturated fat choice

\* **Percent Daily Values** are based on a 2,000-calorie diet. Your Daily Values may be higher or lower depending on your calorie needs.



# Pam's Breakfast Choices (continued)

## 5. Banana Muffin

Nutrition Facts	
1 servings per container	
<b>Serving size</b>	<b>1 muffin (128g)</b>
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>480</b>
% Daily Value*	
<b>Total Fat</b> 20g	<b>26%</b>
Saturated Fat 3.4g	<b>17%</b>
Trans Fat 0g	
<b>Cholesterol</b> 40mg	<b>13%</b>
<b>Sodium</b> 430mg	<b>19%</b>
<b>Total Carbohydrate</b> 69g	<b>25%</b>
Dietary Fiber 1g	<b>4%</b>
Total Sugars 42g	
Includes 37g Added Sugars	<b>74%</b>
<b>Protein</b> 6g	<b>12%</b>
Vitamin D 0.1mcg	0%
Calcium 59mg	4%
Iron 1.6mg	8%
Potassium 147mg	4%

Lower saturated fat choice

## 6. Banana

Nutrition Facts	
1 servings per container	
<b>Serving size</b>	<b>1 banana (126g)</b>
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>110</b>
% Daily Value*	
<b>Total Fat</b> 0g	<b>0%</b>
Saturated Fat 0.1g	<b>1%</b>
Trans Fat 0g	
<b>Cholesterol</b> 0mg	<b>0%</b>
<b>Sodium</b> 0mg	<b>0%</b>
<b>Total Carbohydrate</b> 29g	<b>11%</b>
Dietary Fiber 3g	<b>11%</b>
Total Sugars 15g	
Includes 0g Added Sugars	<b>0%</b>
<b>Protein</b> 1g	<b>2%</b>
Vitamin D 0mcg	0%
Calcium 6.3mg	0%
Iron 0.3mg	2%
Potassium 451mg	10%

## 7. Butter

Nutrition Facts	
32 servings per container	
<b>Serving size</b>	<b>1 Tbsp (14g)</b>
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>100</b>
% Daily Value*	
<b>Total Fat</b> 11g	<b>14%</b>
Saturated Fat 7g	<b>35%</b>
Trans Fat 0g	
<b>Cholesterol</b> 30mg	<b>10%</b>
<b>Sodium</b> 90mg	<b>4%</b>
<b>Total Carbohydrate</b> 0g	<b>0%</b>
Dietary Fiber 0g	<b>0%</b>
Total Sugars 0g	
Includes 0g Added Sugars	<b>0%</b>
<b>Protein</b> 0g	<b>0%</b>
Vitamin D 0.21mcg	2%
Calcium 3.4mg	0%
Iron 0mg	0%
Potassium 3.4mg	0%

Lower saturated fat choice

## 8. Light Margarine (Tub)

Nutrition Facts	
80 servings per container	
<b>Serving size</b>	<b>1 Tbsp (14g)</b>
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>45</b>
% Daily Value*	
<b>Total Fat</b> 5g	<b>6%</b>
Saturated Fat 1.2g	<b>6%</b>
Trans Fat 0g	
<b>Cholesterol</b> 0mg	<b>0%</b>
<b>Sodium</b> 80mg	<b>3%</b>
<b>Total Carbohydrate</b> 0g	<b>0%</b>
Dietary Fiber 0g	<b>0%</b>
Total Sugars 0g	
Includes 0g Added Sugars	<b>0%</b>
<b>Protein</b> 0g	<b>0%</b>
Vitamin D 0.2mcg	0%
Calcium 0mg	0%
Iron 0mg	0%
Potassium 5mg	0%

\* **Percent Daily Values** are based on a 2,000-calorie diet. Your Daily Values may be higher or lower depending on your calorie needs.



# Pam's Breakfast Choices (continued)

## 9. Canadian Bacon

Nutrition Facts	
6 servings per container	
<b>Serving size</b>	<b>2 slices (46g)</b>
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>80</b>
<b>% Daily Value*</b>	
<b>Total Fat</b> 4g	5%
Saturated Fat 1.3g	7%
Trans Fat 0g	
<b>Cholesterol</b> 25mg	8%
<b>Sodium</b> 710mg	31%
<b>Total Carbohydrate</b> < 1g	0%
Dietary Fiber 0g	0%
Total Sugars 0g	
Includes 0g Added Sugars	0%
<b>Protein</b> 11g	22%
Vitamin D 0.5mcg	2%
Calcium 4.6mg	0%
Iron 0.4mg	2%
Potassium 179mg	4%

Lower saturated fat choice

## 10. Pork Sausage Links

Nutrition Facts	
8 servings per container	
<b>Serving size</b>	<b>3 links (60g)</b>
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>200</b>
<b>% Daily Value*</b>	
<b>Total Fat</b> 16g	21%
Saturated Fat 5.3g	27%
Trans Fat 0g	
<b>Cholesterol</b> 50mg	17%
<b>Sodium</b> 490mg	21%
<b>Total Carbohydrate</b> < 1g	0%
Dietary Fiber 0g	0%
Total Sugars < 1g	
Includes 0g Added Sugars	0%
<b>Protein</b> 11g	22%
Vitamin D 0.8mcg	4%
Calcium 5.4mg	0%
Iron 0.7mg	4%
Potassium 205mg	4%

## 11. Low-Fat American Cheese

Nutrition Facts	
8 servings per container	
<b>Serving size</b>	<b>1 ounce (28.35g)</b>
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>70</b>
<b>% Daily Value*</b>	
<b>Total Fat</b> 4g	5%
Saturated Fat 2.5g	13%
Trans Fat 0g	
<b>Cholesterol</b> 15mg	5%
<b>Sodium</b> 340mg	15%
<b>Total Carbohydrate</b> 3g	1%
Dietary Fiber 0g	0%
Total Sugars 2g	
Includes 0g Added Sugars	0%
<b>Protein</b> 5g	10%
Vitamin D 1.5mcg	8%
Calcium 150mg	10%
Iron 0mg	0%
Potassium 94mg	2%

Lower saturated fat choice

## 12. Regular American Cheese

Nutrition Facts	
8 servings per container	
<b>Serving size</b>	<b>1 ounce (28.35g)</b>
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>90</b>
<b>% Daily Value*</b>	
<b>Total Fat</b> 6g	8%
Saturated Fat 3.8g	19%
Trans Fat 0g	
<b>Cholesterol</b> 25mg	8%
<b>Sodium</b> 360mg	16%
<b>Total Carbohydrate</b> 2g	1%
Dietary Fiber 0g	0%
Total Sugars 2g	
Includes 0g Added Sugars	0%
<b>Protein</b> 5g	10%
Vitamin D 1.9mcg	10%
Calcium 406mg	30%
Iron 0.3mg	2%
Potassium 77mg	2%

\* **Percent Daily Values** are based on a 2,000-calorie diet. Your Daily Values may be higher or lower depending on your calorie needs.



# Guess the Fat Activity

Try to guess the amount of fat (in teaspoons) in each food.  
Write your answers on the “My Guess” line.

Food	Teaspoons of Fat	
	My Guess	True Amount
 2 ounces American cheese	_____	_____
 2 tablespoons regular mayonnaise	_____	_____
 2 pieces fried chicken (wing and thigh)	_____	_____
 1 beef hotdog (2 ounces)	_____	_____
 1 cup cooked beans	_____	_____
 2 snack cakes (1 package)	_____	_____
 1 orange	_____	_____



## Cooking With Less Saturated Fat

### New Orleans Red Beans

1. In a 5-quart pot, combine red beans, water, onion, celery, and bay leaves. Bring to boiling, then reduce heat.
2. Cover and cook over low heat for 4½ hours or until beans are tender.
3. If desired, stir and mash beans against the side of the pan (New Orleans style). Add green pepper, garlic, parsley, thyme, and black pepper.
4. Cook uncovered over low heat until creamy, about 30 minutes.
5. Remove bay leaves before serving.



### Boiled Brown Rice

1. Bring 2 cups of water to a boil, and add 1 cup of brown rice.
2. Cover well, and cook over low heat for 20 minutes.



### Potato Salad

1. Wash 2 pounds of potatoes, cut in half, and place in cold water in a saucepan.
2. Cook covered over medium heat for 25 to 30 minutes or until tender.
3. Chop celery, scallion, and red and green bell peppers, if desired.
4. Chop one hard-boiled egg.
5. Drain and dice potatoes when cool.
6. Add vegetables and egg to potatoes, and toss.
7. Blend together low-fat or fat-free mayonnaise, mustard, pepper, and dried dill weed.
8. Pour blended mixture over potato mixture and stir gently to coat evenly.
9. Chill for at least 1 hour before serving.





## Cooking With Less Saturated Fat (continued)

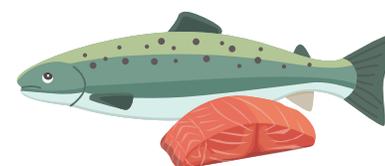
### Poultry and Meat

1. Remove the skin from chicken and turkey, and throw it away. Cut off the fat from beef and pork, and throw it away.
2. Add your favorite seasonings, such as garlic, onion powder, sage, or cracked black pepper.
3. Cook meat by baking, broiling, braising, roasting, stewing, or grilling—not frying.



### Fish and Seafood

1. If you eat canned seafood or fish, rinse it well to cut back on the amount of sodium.
2. Season with seafood spices such as basil, chili powder, dill, marjoram, parsley, rosemary, and thyme to taste. Also try some lemon juice or fresh lemon wedges.
3. Cook fish and seafood by baking, broiling, braising, roasting, stewing, or grilling—not frying. Use vegetable oil to grease pans.



### Spaghetti With Turkey Meat Sauce

1. Coat a large skillet with vegetable oil. Preheat over high heat. Add ground turkey (1 pound). Cook, stirring occasionally, for 5 minutes. Drain off fat.
2. Stir in a 28-ounce can of diced tomatoes (low- or no-sodium variety), chopped green peppers, onion, garlic, oregano, and black pepper. Bring to boiling, then reduce heat. Simmer covered for 15 minutes, stirring occasionally.
3. Remove cover, and simmer for an additional 15 minutes.
4. Meanwhile, cook spaghetti (or other whole-grain pasta) according to directions on the package. Serve sauce over spaghetti with a green salad.



### Fruit Shake

1. Cut your favorite fruit (such as bananas, oranges, or strawberries) into chunks.
2. Place in a blender along with fat-free milk, vanilla, and ice.
3. Blend until smooth.





# Recipe Substitutes

## When the recipe calls for:

## Use these heart-smart picks instead:

1 whole egg.....	2 egg whites or ¼ cup egg substitute
1 cup butter.....	1 cup soft tub margarine or ⅔ cup vegetable oil
1 cup shortening or lard.....	1 cup soft tub margarine or ⅔ cup vegetable oil
1 cup whole milk.....	1 cup fat-free milk
1 cup cream .....	1 cup evaporated fat-free milk
1 cup sour cream .....	1 cup fat-free sour cream





## Soul Food Makeover: Chicken Gumbo Recipe

<b>1 teaspoon</b>	vegetable oil
<b>¼ cup</b>	flour
<b>3 cups</b>	low-sodium chicken broth
<b>1½ pounds</b>	chicken breast, skinless and boneless, cut into 1-inch strips
<b>1 cup</b>	white potatoes, cubed
<b>1 cup</b>	onions, chopped
<b>1 cup</b>	carrots, coarsely chopped
<b>¼ cup</b>	celery, chopped
<b>½ medium</b>	carrot, grated
<b>4 cloves</b>	garlic, finely minced
<b>2 stalks</b>	scallions, chopped
<b>1 whole</b>	bay leaf
<b>½ teaspoon</b>	black pepper, ground
<b>2 teaspoons</b>	hot (or jalapeno) pepper
<b>1 cup (½ pound)</b>	okra, sliced into ½-inch pieces



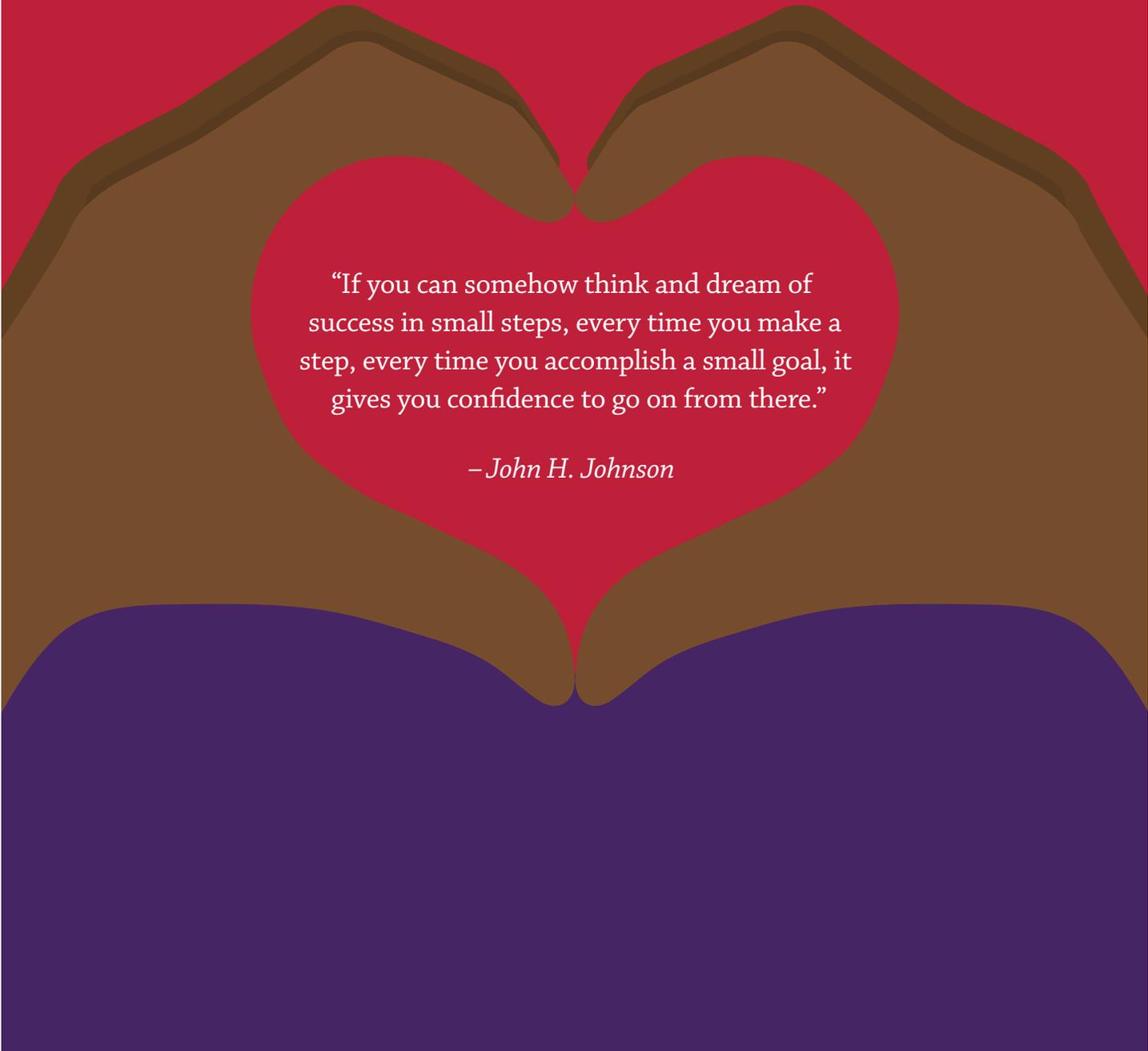
1. Add oil to a large pot.
2. Heat pot over medium heat.
3. Stir in flour.
4. Cook, stirring constantly, until flour begins to turn golden brown.
5. Slowly stir in broth using a wire whisk, and cook for 2 minutes. The mixture shouldn't be lumpy.
6. Add all ingredients except okra. Bring to a boil, then reduce heat and let simmer for 20 to 30 minutes.
7. Add okra and let cook for 15 minutes.
8. Remove bay leaf.
9. Serve hot in a bowl or over rice.

### Makes 8 servings

<b>Serving size:</b> ¾ cups	<b>Sodium:</b> 81 mg
<b>Calories:</b> 165	<b>Total Fiber:</b> 2 g
<b>Total Fat:</b> 4 g	<b>Protein:</b> 21 g
<b>Saturated fat:</b> 1 g	<b>Carbohydrates:</b> 11 g
<b>Cholesterol:</b> 51 mg	<b>Potassium:</b> 349 mg

# Embrace Your Health!

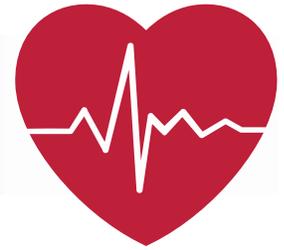
## Aim for a Healthy Weight

An illustration of two hands, one in a brownish-gold color and the other in a dark purple color, holding a red heart. The hands are positioned as if they are gently cradling the heart. The background is a solid red color.

“If you can somehow think and dream of success in small steps, every time you make a step, every time you accomplish a small goal, it gives you confidence to go on from there.”

– *John H. Johnson*

# Session 6



## Embrace Your Health! Aim for a Healthy Weight

### Objectives

#### By the end of this session, participants will learn that:

- Being overweight is a risk factor for serious health problems, including heart disease, stroke, high blood pressure, high cholesterol, diabetes, breathing problems, and certain cancers.
- Your body mass index (BMI) and waistline measurement indicate if you're overweight. There's a range of healthy weights.
- Losing weight means making changes that become lifelong habits.
- Fad diets usually don't work for the long term and can be harmful.

---

### Materials and Supplies

#### To conduct this session, you'll need:

- *With Every Heartbeat Is Life* manual and picture cards
- Blackboard and chalk, dry erase board, or several large pieces of paper, a marker, and tape
- 2 bathroom scales
- 1 tape measure you can attach to the wall to measure height
- 1 flexible (not metal) tape measure to measure participants' waists
- Ribbon or string (to measure waist size, in case some participants don't want to use a tape measure)
- A food label (from a can or package)
- 10 serving dishes
- 4 measuring cups
- 5 spoons
- 1 knife

- Food:
    - 16-ounce box of whole grain cereal
    - 15-ounce can of fruit (in juice) or vegetables (no salt added)
    - 1 block of reduced-fat cheddar cheese (about ½ pound)
    - 3 cups of cooked brown rice
    - 15-ounce can of reduced-sodium beans
- 

## Handouts

### Give each participant these handouts during this session:

- (Optional) Kayla’s Story About Losing Weight: Role Play (pages 6.23-6.24)
  - Body Mass Index (BMI) Chart (page 6.25)
  - Do You Need To Lose Weight? (page 6.26)
  - Ms. Diane’s Healthy Lifestyle (pages 6.27-6.28)
  - Tips To Help You Control Your Weight (page 6.29)
  - Committing to Change (pages 6.30-6.31)
  - Take Time for Sleep (pages 6.32-6.33)
  - Serving Sizes (page 6.34)
  - Read the Food Label (page 6.35)
  - Kayla’s Snack Choices (pages 6.36-6.37)
  - Soul Food Makeover: Smothered Greens Recipe (page 6.38)
- 

## Before This Session

1. Check the “Serving Sizes” handout (page 6.34) for the serving size of the foods listed above. Measure one serving of each food, and put it in a separate dish. Keep them out of sight until you’re ready to use them.
2. Place a box of cereal, a large bowl of cooked rice, a bowl of fruit or vegetables, a block of cheddar cheese, and a bowl of beans on a table with five dishes, four serving spoons, and a knife.
3. Cut one 35-inch piece of ribbon or string for women and one 40-inch piece for men.

## Session Outline

### Introducing the Session

1. Welcome
2. Review of Last Week's Session
3. About This Session

### Conducting the Session

1. Facts About Overweight and Obesity
2. *(Optional)* Kayla's Story About Losing Weight: Role Play
3. Your Weight, Your Health
4. What Is a Healthy Weight? Activity
5. The Healthy Way To Lose Weight
6. Beat Weight-Loss Barriers
7. Serving Size Activity
8. Food Label Activity
9. Soul Food Makeover: Smothered Greens Recipe

### Review of Today's Key Points

### Weekly Pledge

### Closing

# Introducing the Session

## 1. Welcome

**DO**      **Welcome** participants to the session.

## 2. Review of Last Week's Session

**SAY**      Last week, we talked about why it's important to cut back on saturated fat in our diets. Can you list three things you can do to make food lower in fat?

**Add** these answers if not mentioned:

- Trim and throw away the fat from meat before cooking.
- Remove and throw away the skin from poultry, such as chicken and turkey, before cooking.
- Bake, broil, or grill instead of frying your food.

---

**SAY**      At the end of the last session, you pledged to make one change to help keep your cholesterol levels in check. What went well? Did you have any problems?

### NOTE



Allow 5 minutes for participants to respond.

### ASK

Has anyone completed your family health history?

### NOTE



(Optional) **Give** a prize to participants who've completed the history.

**ASK** Does anyone want to share what you learned about your family health history?

**NOTE**



Allow about 5 minutes for participants to respond.

### 3. About This Session

**SAY** I want to start today's session with the words of the founder of *Ebony* and *Jet* magazines, John H. Johnson. He said, "If you can somehow think and dream of success in small steps, every time you make a step, every time you accomplish a small goal, it gives you confidence to go on from there."

---

**ASK** What does this quote mean to you?

**NOTE**



Allow about 5 minutes for participants to respond.

**SAY** Today, we'll talk about why keeping a healthy weight is important to your heart health.

# Conducting the Session

## 1. Facts About Overweight and Obesity

- If you're overweight, losing even just 10 pounds can make a difference to your health.
- Most African American adults are overweight or obese, as are many African American children.
  - Among African American adults, about 70 percent of men and 82 percent of women are overweight or obese.
  - Obesity starts young: About one in five African American children ages 6 to 11 are obese.

## 2. (Optional) Kayla's Story About Losing Weight: Role Play

### NOTE



**Ask** for two volunteers to be the actors in the role play.  
**Give** them the “Kayla’s Story About Losing Weight: Role Play” handout (pages 6.23-6.24). You read the one-line introduction.



### DO

When you complete the activity, **ask** the following questions:

- What are some of the small changes Kayla made that helped her lose weight?
- Have any of you made changes recently to your eating and exercise habits that are different from those mentioned in the role play?

### NOTE



Allow about 5 minutes for participants to respond.

### 3. Your Weight, Your Health

**SAY** Being overweight or obese increases your risk of having heart disease, a stroke, high cholesterol, high blood pressure, and diabetes.

**SAY** Being overweight can increase the risk of developing some types of cancer and can make other health problems worse, such as arthritis and sleep problems.

**SAY** Losing even a little weight can improve many health problems.

### 4. What Is a Healthy Weight? Activity



ACTIVITY

#### NOTE



Before beginning this activity, **place** the scales where participants can weigh themselves in private. **Write** down the following information on the blackboard, dry erase board, or large piece of paper taped to the wall.

James Harris weighs 180 pounds. He is 6 feet tall.

Kayla Harris weighs 170 pounds. She is 5 feet, 5 inches tall.

**DO** **Give** participants the “Body Mass Index (BMI) Chart” handout (page 6.25).



HANDOUT

**SAY** We’re going to do an activity to find out if you have a healthy weight or not.

**DO** **Show** picture card 6.1.



PICTURE

**SAY** First we're going to find out if James and Kayla have healthy weights, using the BMI (Body Mass Index) chart and the waist circumference.

BMI is a general measurement of body fat. Some adjustments are needed for muscular or very athletic people and older adults. The size of our waists can also show us if we need to lose weight.

**SAY** James is 6 feet, 180 pounds, with a 35-inch waist. First, look for his height on the left side of the chart and circle it. Put your finger on the circled number and move your finger to the right until you find the number that lines up with his weight. That's his BMI. The shade of the square tells you if his weight is healthy, overweight, or obese. His BMI is 24, so James is a healthy weight.

**NOTE**

Allow 2 or 3 minutes for participants to look for the answer on the chart.

**SAY** Now we'll find Kayla's BMI (following the same steps). Kayla is 5 feet, 5 inches, 170 pounds. Her BMI is 28, so she's overweight.

**NOTE**

Allow 2 or 3 minutes for participants to look for the answer on the chart.

**SAY** Now you're going to find your BMI and your waist circumference. First you'll need to know your height and weight. If you don't know your measurements, use our scale and wall measure.

**NOTE**

Allow 15 minutes for participants to weigh and measure themselves.

**DO** **Give** participants the "Do You Need To Lose Weight?" handout (page 6.26).



HANDOUT

**SAY** Now we're going to learn if we need to lose weight, and then we're going to find out what we should do.

**SAY** The first step is to find our BMI, using the handout that I gave you. We'll follow the same process that we used with James and Kayla.

**SAY** Find your height on the left side of the chart, and circle it. Put your finger on the circled number and move your finger to the right until you find the number that lines up with your weight. The shade of your square tells you if your weight is healthy, overweight, or obese. You don't have to share your BMI with the group.

**SAY** Please raise your hand if you're having trouble, and I'll help you.

**SAY** The second step is to measure your waist.

**DO** **Ask** participants to measure their waists using the measuring tape.

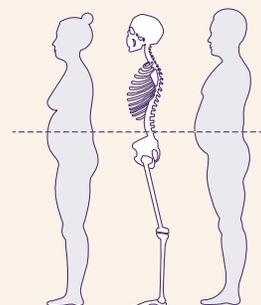
**DO** **Show** picture card 6.2.



PICTURE

**NOTE****Waist Measurement**

Have participants place a tape measure around their waist, just above their hipbone. Be sure the tape is snug but not too tight. Ask them to relax, exhale, and then measure their waists.



## NOTE



For participants who are sensitive about measuring their waists, **give** the 35-inch piece of ribbon or string to the women and the 40-inch piece to the men. If it doesn't fit around their waist, their waist measurement is high.

## SAY

Write down your waist measurement, and check off whether it's healthy or high. Greater than 35 inches for women and 40 inches for men is high and increases your risk for heart disease.

## SAY

If both your weight and waist measurement are healthy, good for you! Try not to gain weight.

- If your BMI shows you're overweight or obese, or your waist circumference is too large, you need to lose weight to protect your health. We talk in this course about how to lose weight safely, but you should also ask your health care provider or a registered dietitian if you need help.
- Other conditions that can increase your risk of having a heart attack or a stroke are the following:

**Risk Factors**

- High blood pressure
- High LDL (the "bad") cholesterol
- Low HDL (the "good") cholesterol
- High triglycerides
- High blood sugar
- Family history of heart disease
- Not being physically active
- Smoking

**DO** **Give** participants the “Ms. Diane’s Healthy Lifestyle” handout (pages 6.27-6.28).



**SAY** Please review the handout to find out how Ms. Diane manages her weight.

## 5. The Healthy Way To Lose Weight

**SAY** Safe ways to lose weight include making healthy lifestyle changes and, if your health care provider advises, joining a behavioral weight-loss treatment program. Some people may need to take medicine prescribed by their health care provider to help them lose weight, and some have surgery.

In this course, we focus on making healthy lifestyle changes.

**DO** **Show** picture card 6.3.



**SAY** Your plan for losing weight and keeping it off needs to include:

- Being more physically active
- Having smaller portions
- Eating foods that are lower in saturated fat, carbohydrates (“carbs”), and calories

**SAY** To lose weight, you’ll need to eat about 500 fewer calories a day than you do now.

Keeping track of how many calories you eat every day is an important strategy for losing weight.

This chart will give you a general idea of how many calories to eat:

Males				Females <sup>d</sup>			
Age	Sedentary <sup>a</sup>	Moderately Active <sup>b</sup>	Active <sup>c</sup>	Age	Sedentary	Moderately Active	Active
18	2,400	2,800	3,200	18	1,800	2,000	2,400
19-20	2,600	2,800	3,000	19-20	2,000	2,200	2,400
21-25	2,400	2,800	3,000	21-25	2,000	2,200	2,400
26-30	2,400	2,600	3,000	26-30	1,800	2,000	2,400
31-35	2,400	2,600	3,000	31-35	1,800	2,000	2,200
36-40	2,400	2,600	2,800	36-40	1,800	2,000	2,200
41-45	2,200	2,600	2,800	41-45	1,800	2,000	2,200
46-50	2,200	2,400	2,800	46-50	1,800	2,000	2,200
51-55	2,200	2,400	2,800	51-55	1,600	1,800	2,200
56-60	2,200	2,400	2,600	56-60	1,600	1,800	2,200
61-65	2,400	2,400	2,600	61-65	1,600	1,800	2,000
66-70	2,000	2,200	2,600	66-70	1,600	1,800	2,000
71-75	2,000	2,200	2,600	71-75	1,600	1,800	2,000
76+	2,000	2,200	2,600	76+	1,600	1,800	2,000

[a] Sedentary: You're only as active as needed to do your day-to-day activities (shopping, bathing, going to work, etc.).

[b] Moderately active: You walk about 1.5 to 3 miles per day at 3 to 4 miles per hour, or you do the equivalent level of other types of physical activity.

[c] Active: You walk more than 3 miles per day at 3 to 4 miles per hour, or you do the equivalent level of other types of physical activity.

[d] Estimates for women don't include women who are pregnant or breastfeeding.

**SAY** **Pregnant women should not try to lose weight.** Ask your health care provider how much weight you should gain during your pregnancy.

**DO** **Give** participants the “Tips To Help You Control Your Weight” handout (page 6.29). **Review** the tips.



## 6. Beat Weight-Loss Barriers

**SAY** Have any of you lost weight and kept it off? What got you motivated and kept you going?

**NOTE**



Allow participants a few minutes to respond.

**SAY** Let's talk about how to get started on a healthy weight-loss plan. We'll review tips for committing to change.

**DO** **Give** participants the “Committing to Change” handout (pages 6.30-6.31).



HANDOUT

**DO** **Ask** a volunteer to read the titles of the steps out loud.

**SAY** Please read the rest of the handout to yourselves.

**NOTE**



Allow participants several minutes to read the handout.

**ASK** Which of these tips would work for you?

**NOTE**



Allow participants a few minutes to respond.

**ASK** Why is it difficult to lose weight or keep it off? What has kept you from losing weight?

**NOTE**

**Write** participants' answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

**DO** **Add** some of the following if no one mentioned them.

We may have a hard time losing weight because:

- Our family or friends don't support our efforts.
- Our family and social activities center around food.
- We aren't comfortable following new recipes.
- Healthier foods cost more at our local store.
- We don't have enough time or energy.
- It's hard to change our behavior.
- We like our curves.
- Our neighborhood is too dangerous or poorly lit for walking.
- Exercise messes up our hair.

---

**ASK** Have you found ways to get around those barriers?

**NOTE**

Allow 3 to 5 minutes for participants to respond.  
**Write** down their answers.

- DO** **Add** some of the following if they weren't mentioned:
- Find someone who also wants to lose weight. Check in with them to stay motivated. Do activities together, like walking. Share healthy dishes.
  - Make your family or social time active time. Encourage everyone to think of fun things to do to get up and get moving.
  - Do free or low-cost activities offered by your church, community center, or local parks and recreation department.
  - Learn how to respond to stress. Stress affects your energy and hunger. Constant stress may make your body store more fat.

**SAY** Getting enough sleep helps you manage your weight. When you don't get enough quality sleep you feel hungrier. Lack of sleep increases a hormone in your body that makes you feel hungry and decreases a hormone that makes you feel full.

**DO** **Give** participants the "Take Time for Sleep" handout (pages 6.32-6.33).



HANDOUT

**SAY** We'll review some of the handout now, but please read the rest of it when you get home. It has helpful information about why you need sleep and also about sleep apnea.

**DO** **Ask** a volunteer to read the tips section out loud.

**DO** **Show** picture card 6.4.



PICTURE

**SAY** Weight loss is a moneymaking business. Miracle diets and certain dietary supplements claim to help you lose weight quickly and easily. But they make only one thing lighter—your wallet. They can also make you sick.

**SAY** Very-low-calorie diets or diets with only a few foods deprive you of needed nutrients and energy.

## 7. Serving Size Activity



ACTIVITY

- DO **Take out** the supplies that you prepared before the session for the serving size activity.
- 
- DO **Ask** for volunteers to put a “normal” serving of one of the following on a dish: cereal, cooked rice, cheese, fruit, vegetable, beans.
- 
- DO **Bring out** the foods you measured before the session. Compare the size of the participants’ servings with your measured amounts.
- 
- DO **Give** participants the “Serving Sizes” handout (page 6.34). **Ask** for volunteers to read out loud the serving sizes for each food. **Tell** them to use this handout at home.



HANDOUT

## 8. Food Label Activity



ACTIVITY

### NOTE



This activity will help participants choose foods that are lower in calories, saturated fats, and certain carbohydrates, such as sugar. Carbohydrates also include starches and dietary fiber. These are found in potatoes, pasta, baked goods, and rice.

### SAY

To lose weight we must eat fewer calories than our body uses. Today, we’re going to learn how to use the food label to choose foods that are lower in calories, sugars, and saturated fats.

### NOTE



The serving size isn’t a recommendation of how much you should eat or drink. It just shows how much people typically eat or drink.

DO **Show** picture card 6.5.



PICTURE

SAY Here's where you find the number of calories in one serving. This is a label for sweetened ice tea.

DO **Give** participants the "Read the Food Label" handout (page 6.35).



HANDOUT

SAY Compare the labels for sweetened and unsweetened tea, at the bottom of the handout. Which tea has fewer calories?

## NOTE



Allow 1 or 2 minutes for participants to respond.

SAY A bottle of unsweetened tea has zero calories. Sweetened tea has about 112 calories.

You can lose 10–15 pounds in a year just by replacing your daily sweetened tea or soda with an unsweetened drink, including tea, sparkling water, or regular water. (Soda has even more calories than sweetened tea.) Let's do another group activity about how reading food labels can help solve a common family problem.

DO **Give** participants the "Kayla's Snack Choices" handout (pages 6.36-6.37). **Read** "Kayla's Problem" (page 6.18). **Ask** participants which foods Kayla should buy.



HANDOUT

## Kayla's Problem

Kayla and her family like to have snacks when they watch TV or play computer games. But some family members have gained weight. Use the food labels to choose lower calorie snacks that Kayla could buy. Write the number of your choice for each pair on the line. Then write the number of calories per serving that your choice saves.



### NOTE



The underlined foods are lower in calories.

- 1 cup of potato chips or 1 cup of light microwave popcorn?  
*Popcorn saves 70 calories.*
- $\frac{1}{2}$  cup of canned peaches in fruit juice or canned peaches in heavy syrup?  
*Peaches in fruit juice saves 40 calories.*
- A chocolate candy bar with caramel and nuts or a cereal bar with fruit and nuts?  
*The cereal bar saves 120 calories.*

### ASK

What's an example of a high-calorie snack that you or your family eat?  
What snack could replace it?

### NOTE



Allow a few minutes for participants to respond.

## 9. Soul Food Makeover: Smothered Greens Recipe



**DO** Give participants the “Soul Food Makeover: Smothered Greens Recipe” handout (page 6.38).



**SAY** This recipe makes a good side dish with chicken or fish and baked potatoes.

## Review of Today’s Key Points

**SAY** Let’s review what we learned today.

### **Why is it important to maintain a healthy weight?**

Being overweight may increase your risk of heart disease, stroke, high blood pressure, high cholesterol levels, diabetes, and some types of cancer.

### **What’s a healthy way to lose weight?**

Eat smaller portions; choose food that’s low in saturated fat, carbs, and calories; and increase your physical activity.

### **How do food labels help?**

The food label tells you the serving size and the number of calories and amounts of saturated fats and carbohydrates per serving, so you can compare the nutrients in different foods using the Percent Daily Value.

## Weekly Pledge



**SAY** You've learned a lot today about losing weight the healthy way. Please think of one change you can make in your everyday life to lose weight or maintain a healthy weight. This will be your pledge for the week.

**SAY** Be specific about **what** you'll do, **how** you'll do it, and **when** you'll start.

Here are some examples:

- I'll call my friend who wants to lose weight and talk about how we can support each other.
- I'll write down the reasons I want to lose weight and put the list on my fridge.
- I'll buy vegetable oil spray and use it instead of butter when I make eggs for breakfast.
- Starting tomorrow I'll walk for 30 minutes, 3 days a week, during my lunch break.
- The next time I eat out I'll save half my entree for another meal.
- I'll begin to read food labels to select healthier foods when grocery shopping.

**SAY** Write your pledges on the "Ms. Diane's Healthy Lifestyle" handout (pages 6.27-6.28). Keep this handout where you can see it easily, so you keep your goals in mind.

### NOTE



Allow 5 minutes for participants to think of a pledge.

**SAY** Would anyone like to share your pledge with the group?

## NOTE



**Write** down pledge ideas on the blackboard, dry erase board, or large piece of paper taped to the wall.

## SAY

*(Optional)*

Keeping a personal value in mind can help you make changes in your life to reach and keep a healthy weight. Remember that a personal value is a quality that's important to you.

Today, the value is honesty. Honesty can help you think about what makes you overeat, such as boredom, stress, anger, or a lack of time or commitment.

Honesty frees you to talk about your struggles and successes with supportive friends and loved ones. Finally, honesty can guide you to choose goals that are realistic for you.

## SAY

Today's quote says, "If you can somehow think and dream of success in small steps, every time you make a step, every time you accomplish a small goal, it gives you confidence to go on from there."

## ASK

How can you use honesty, or another value, to help you keep your pledge?

## NOTE



Allow 3 minutes for participants to share their thoughts.

## SAY

Next week, we'll talk about how you did with your pledges. Keep working on your pledges to be more physically active and to cut back on sodium, saturated fat, and carbohydrates.

## Closing

**SAY** Thank you for coming today. What did you think of today's session?

**NOTE**



Allow a moment for participants to respond.

**SAY** I'm looking forward to seeing you at the next session. It's about lowering your risk for diabetes and controlling your diabetes if you already have it. Please continue to fill out your family health histories.

**NOTE**



**Think** about today's session. What worked and what didn't work? Have you made any changes in your own life that you covered in today's session?



## Kayla's Story About Losing Weight: Role Play

### Lakisha and Kayla are talking at their church picnic.

#### Lakisha

Have you lost weight? You look good!

#### Kayla

Yes! I knew I'd gained some weight over the years, but I never thought I was overweight. I realized after my last checkup that those extra pounds really add up! My doctor told me that being overweight raises my risk for heart disease, stroke, and diabetes.

#### Lakisha

I've tried a lot of different diets, but I always gain the weight back and more.

#### Kayla

I didn't diet. I just made some small changes in my eating habits, such as eating less saturated fats and carbohydrates, and kept track of my calories. I also started walking for a half hour every day.

#### Lakisha

I just don't have the energy right now to try and lose weight. Besides, everyone in my family is overweight. That's just the way we're built.

#### Kayla

At first, I wasn't sure I could do it. But my doctor gave me some tips and my husband said he'd change some of his habits too.

#### Lakisha

So what changes did you make?

#### Kayla

I started by taking smaller servings—and I stopped going back for seconds. I used to eat until I was too full.

#### Lakisha

Don't you feel hungry?



## Kayla's Story About Losing Weight: Role Play (continued)

### Kayla

After I eat, I give my body about 15 minutes to get the message that I'm full. If I'm still a little hungry, I eat a piece of fruit or have a cup of tea or coffee.

### Lakisha

Sometimes I eat when I'm not hungry, like when I'm bored or stressed.

### Kayla

I can relate. Whenever James worked late, I used to eat cookies or chips while watching TV. Now I try to do something other than eating, like calling a friend.

### Lakisha

How much have you lost so far?

### Kayla

Ten pounds, and I'm still trying to lose the rest. I have my hard days when I feel like giving up. But then I remember how much more energy I have now and how good I feel overall.

### Lakisha

I know I should lose some weight, too. Heart disease runs in my family, and I need to stick around for my kids.

### Kayla

How about joining me on a walk this weekend?

### Lakisha

Just tell me when and where!



# Body Mass Index (BMI) Chart

BMI	Healthy Weight										Overweight										Obese										Extreme Obesity																			
	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54														
<b>Height</b>	<b>Body Weight (pounds)</b>																																																	
4'10"	91	96	100	105	110	115	119	124	129	134	138	143	148	153	158	162	167	172	177	181	186	191	196	201	205	210	215	220	224	229	234	239	244	248	253	258														
4'11"	94	99	104	109	114	119	124	128	133	138	143	148	153	158	163	168	173	178	183	188	193	198	203	208	212	217	222	227	232	237	242	247	252	257	262	267														
5'0"	97	102	107	112	118	123	128	133	138	143	148	153	158	163	168	174	179	184	189	194	199	204	209	215	220	225	230	235	240	245	250	255	261	266	271	276														
5'1"	100	106	111	116	122	127	132	137	143	148	153	158	164	169	174	180	185	190	195	201	206	211	217	222	227	232	238	243	248	253	259	264	269	275	280	285														
5'2"	104	109	115	120	126	131	136	142	147	153	158	164	169	175	180	186	191	196	202	207	213	218	224	229	235	240	246	251	256	262	267	273	278	284	289	295														
5'3"	107	113	118	124	130	135	141	146	152	158	163	169	175	180	186	191	197	203	208	214	220	225	231	237	242	248	254	259	265	270	278	282	287	293	299	304														
5'4"	110	116	122	128	134	140	145	151	157	163	169	174	180	186	192	197	204	209	215	221	227	232	238	244	250	256	262	267	273	279	285	291	296	302	308	314														
5'5"	114	120	126	132	138	144	150	156	162	168	174	180	186	192	198	204	210	216	222	228	234	240	246	252	258	264	270	276	282	288	294	300	306	312	318	324														
5'6"	118	124	130	136	142	148	155	161	167	173	179	186	192	198	204	210	216	223	229	235	241	247	253	260	266	272	278	284	291	297	303	309	315	322	328	334														
5'7"	121	127	134	140	146	153	159	166	172	178	185	191	198	204	211	217	223	230	236	242	249	255	261	268	274	280	287	293	299	306	312	319	325	331	338	344														
5'8"	125	131	138	144	151	158	164	171	177	184	190	197	203	210	216	223	230	236	243	249	256	262	269	276	282	289	295	302	308	315	322	328	335	341	348	354														
5'9"	128	135	142	149	155	162	169	176	182	189	196	203	209	216	223	230	236	243	250	257	263	270	277	284	291	297	304	311	318	324	331	338	345	351	358	365														
5'10"	132	139	146	153	160	167	174	181	188	195	202	209	216	222	229	236	243	250	257	264	271	278	285	292	299	306	313	320	327	334	341	348	355	362	369	376														
5'11"	136	143	150	157	165	172	179	186	193	200	208	215	222	229	236	243	250	257	265	272	279	286	293	301	308	315	322	329	338	343	351	358	365	372	379	386														
6'0"	140	147	154	162	169	177	184	191	199	206	213	221	228	235	242	250	258	265	272	279	287	294	302	309	316	324	331	338	346	353	361	368	375	383	390	397														
6'1"	144	151	159	166	174	182	189	197	204	212	219	227	235	242	250	257	265	272	280	288	295	302	310	318	325	333	340	348	355	363	371	378	386	393	401	408														
6'2"	148	155	163	171	179	186	194	202	210	218	225	233	241	249	256	264	272	280	287	295	303	311	319	326	334	342	350	358	365	373	381	389	396	404	412	420														
6'3"	152	160	168	176	184	192	200	208	216	224	232	240	248	256	264	272	279	287	295	303	311	319	327	335	343	351	359	367	375	383	391	399	407	415	423	431														
6'4"	156	164	172	180	189	197	205	213	221	230	238	246	254	263	271	279	287	295	304	312	320	328	336	344	353	361	369	377	385	394	402	410	418	426	435	443														



## Do You Need To Lose Weight?

Let's follow these steps to find out if you need to lose weight.

### 1 Are you a healthy weight?

Weigh yourself. Use the BMI chart to find out whether your weight is in the healthy range for your height. Find your height on the left of the chart, and circle it. Put your finger on the circled number then move your finger to the right until you find the number that lines up with your weight. The shade of the square will show you if your weight is healthy, overweight, or obese.

#### Here are the BMI categories:

Underweight =  $<18.5$

Healthy = 19-24

Overweight = 25-29

Obese = 30-39

Extreme obesity = 40-54

#### My weight is:

- Healthy
- Overweight
- Obese



### 2 Measure your waist.

Measure your waist by placing the measuring tape snugly around your waist, just above your hipbone. Exhale, and then read the tape measure.

#### Write down your waist measurement:

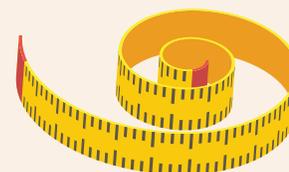
\_\_\_\_\_

Your measurement is high if:

- Women—it's greater than 35 inches
- Men—it's greater than 40 inches

#### My waist measurement is:

- Healthy
- High





## Ms. Diane's Healthy Lifestyle

**Losing weight means making long-term changes.**

**Here's how Ms. Diane found success.**

**I've had diabetes for 25 years. I used to weigh 200 pounds. I was able to lose weight by eating smaller portions of the foods I like. I also eat fewer fatty foods and carbohydrates and more fruits and vegetables. After I lost my first 25 pounds, my back and foot problems went away. Now I stay at a healthy weight and control my diabetes while still enjoying what I eat.**





## Ms. Diane's Healthy Lifestyle (continued)

### Try these tips to get started.

- ♥ Eat fewer foods that are high in saturated fat—such as fried chicken, pork rinds, and sausage.
- ♥ Cut down on bread, cakes, pastries, candy, potatoes, rice, and soft drinks.
- ♥ Eat more fruits, vegetables, and whole grains.
- ♥ Make stews with lean meat, fish, or beans and vegetables.
- ♥ Serve small portions, and eat more salad or other vegetables if you're still hungry. Don't skip meals.
- ♥ Get 2½ hours of physical activity each week. That's just 30 minutes a day or 10 minutes 3 times a day.

### Make your personal pledge to do what the Harris family is doing!

#### Look at these examples:

#### When shopping

Read labels to choose foods lower in fat, carbohydrates, and calories. Don't buy foods that will tempt you.

#### When cooking

Bake fish instead of frying it. Use a vegetable oil like corn, canola, safflower or olive oil (not palm or coconut) instead of butter or lard to grease the pan.

#### When eating

Have one cup of green beans and half a cup of rice with one piece of chicken instead of three pieces of chicken alone.

#### Get active

Walk for 10 minutes 3 times a day. Dance with your family for 20 minutes. Lift weights before work for 10 minutes.

#### Write the changes you'll try to make this week:

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**Your health and your family's health are priceless. Invest in good health!**



# Tips To Help You Control Your Weight

## 1. Choose foods low in fat, carbohydrates, and calories.

Try:

- ♥ Fat-free or low-fat (1%) milk
- ♥ Cheeses labeled “reduced fat”
- ♥ Fruits and vegetables without butter or sauce
- ♥ Unsweetened tea or sparkling water
- ♥ Small portions of brown rice, beans, cereals, corn or whole wheat tortillas, and whole-grain pasta and baked goods
- ♥ Lean cuts of meat, fish, and skinless turkey and chicken

## 2. Make foods the healthy way.

- ♥ Bake, broil, roast, or grill instead of frying foods.
- ♥ Cook beans and rice without lard, bacon, or fatty meats.
- ♥ Avoid cream, butter, lard, and high-fat cheese.
- ♥ Use a vegetable oil like corn, canola, safflower, or olive oil (not palm or coconut), and use only small amounts when cooking.
- ♥ Use fat-free or low-fat mayonnaise or salad dressing.

## 3. Limit your portion size.

- ♥ Eat smaller portions, and don't have second helpings. Have more salad or other vegetables if you're still hungry.
- ♥ To control your hunger, eat smaller meals or healthy snacks during the day, instead of one big meal.
- ♥ When eating out, watch your portion sizes. Many restaurant portions are too big. Share an entree, or bring half home.
- ♥ If you drink fruit juice, make sure it's a small portion of 100% fruit juice. The calories in beverages add up quickly.

## 4. Get active! Say goodbye to excuses!

Be physically active for at least 2½ hours a week—10 minutes of activity 3 times a day counts as 30 minutes.

- ♥ If you enjoy the outdoors, try biking or hiking.
- ♥ Play with the children in your life.
- ♥ Check out swimming options near you.
- ♥ Think of physical activity as a special time to refresh your body and mind.

## 5. Aim for a healthy weight.

Try not to gain extra weight. If you're overweight, try to lose about 1 to 2 pounds a week. Losing even 10 pounds reduces your risk of heart disease.



# Committing to Change

**Losing weight takes more than desire. It takes commitment and a well-thought-out plan. Here's a step-by-step guide to getting started.**

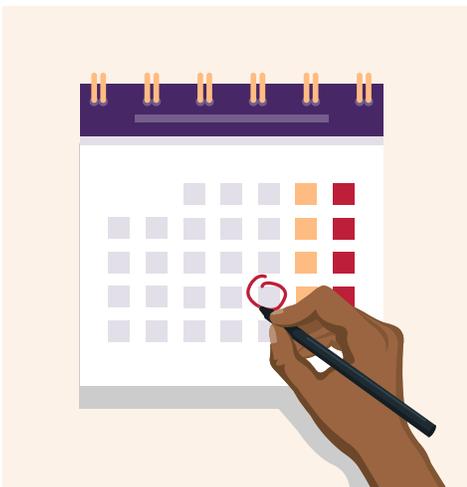
## Step 1: Make a commitment.

Making the decision to lose weight, change your lifestyle, and become healthier is a big step to take. Start by making a commitment to yourself.

### Write and sign a contract that includes:

- The amount of weight you want to lose
- The date you'd like to lose the weight by
- Changes you'll make to have healthy eating habits
- Your plan for getting regular physical activity

Also, write down why you want to lose weight and put the list where it will serve as a daily reminder.



## Step 2: Take stock of where you are.

Consider talking to your health care provider. They can check your height, weight, and any weight-related risk factors you may have. Get a followup appointment to monitor changes in your weight or any health conditions.

- 1 Keep a “food diary”** for a few days. Write down everything you eat. You'll become more aware of what you eat, which can help you avoid mindless eating.
- 2 Next, examine your lifestyle.** What might pose challenges to your weight loss efforts? For example, does your work or family obligations make getting enough physical activity difficult? Do you find yourself eating sugary or fatty foods because that's what you have for your kids? Do you pick up fast food because you're rushing? Think through things you can do to help overcome these challenges.

- 3 Finally, what can you change in your day-to-day routine** to help you lose weight? For example, can you and some coworkers or neighbors take a walk at lunchtime? Is there a place in your community, such as a recreation center, where you could exercise? Could you sometimes walk instead of driving your car or taking the bus?



## Committing to Change (continued)

### Step 3: Set realistic goals.

Set short-term goals and reward yourself along the way. If your long-term goal is to lose 40 pounds and control your blood pressure, short-term goals might be to every day eat a healthy breakfast, take a 15-minute walk, or have a salad or vegetable with dinner.

#### Focus on two or three goals at a time.

#### Effective goals are:

- Specific
- Realistic
- Forgiving (less than perfect)

For example, “exercise more” isn’t a specific goal. But “I’ll walk 15 minutes, 3 days a week for the first week,” is specific and realistic.

**Small changes every day can lead to big results.** Also, realistic goals are achievable goals. By achieving your short-term goals day-by-day, you’ll feel good about your progress and be motivated to continue. Setting unrealistic goals, such as losing 20 pounds in 2 weeks, can leave you feeling defeated and frustrated.

**Expect occasional setbacks.** They happen when you get away from your plan for whatever reason—maybe the holidays, longer work hours, or a life change. When setbacks happen, get back on track as quickly as possible. Also consider what you would do differently to prevent setbacks if a similar situation happens in the future.

Everyone is different—just because your neighbor lost weight by taking up running, doesn’t mean that’s the best option for you. Try a variety of activities, such as walking,

dancing for a set time in your living room, or group exercise classes, to see what you enjoy and can fit into your life. These activities will be easier to stick with over the long term.

### Step 4: Get information and support.

Find family members or friends who will support your efforts. Making lifestyle changes is easier when you have others to talk to and rely on for support. Do you have coworkers, members of your religious institution, or neighbors with similar goals? You can share healthful recipes and go for walks together.

Joining a weight loss group or talking to your health care provider can help.

### Step 5: Monitor your progress.

Revisit the goals you set for yourself (in Step 3) and regularly evaluate your progress. If you set a goal to walk each morning but are having trouble fitting it in before work, see if you can walk at lunchtime or after work. Evaluate which parts of your plan are working well and which ones need tweaking. Then rewrite your goals and plan accordingly.

If you’re consistently achieving a goal, tweak it or add a new one or so you continue improving.

#### Reward yourself for your successes!

Recognize when you’re meeting your goals and be proud of your progress. Use non-food rewards, such as a bouquet of flowers, an outing with friends, or a relaxing bath. Rewards help keep you motivated.



## Take Time for Sleep

**A common myth is that we can learn to get by on little sleep with no downside. In reality, getting enough quality sleep is vital for your health, including your heart health.**

When you sleep, your body is busy repairing your heart and blood vessels. Your brain is truly getting ready for the next day, forming new pathways to help you learn and remember information.

Getting too little sleep increases your risk of heart disease, high blood pressure, diabetes, stroke, and other conditions.

People may differ in how much sleep they need, but most adults need 7 to 8 hours each night. Children ages 6 to 12 need 9 to 12 hours, and teens need 8 to 10 hours. About 46 percent of African American adults get less than 7 hours of sleep most nights.

### When you don't get enough quality sleep:

- You feel hungrier! A hormone in your body that makes you feel hungry increases and a hormone that makes you feel full decreases.
- Your blood sugar levels increase, which can increase your risk for diabetes.
- Your body doesn't fight off germs as well.
- You don't do as well at work or school, but you may not even be aware of it.
- You're more likely to have an accident. Being sleepy harms your driving ability as much as, or more than, being drunk

It's not just the quantity but also the quality of your sleep that matters. If you can't sleep at regular times (for example, if you work different shifts), you may have the same problems as someone who gets too few hours of sleep. That's also true if you get woken up a lot when you're trying to sleep—a common problem for new parents and for caregivers.





## Take Time for Sleep (continued)

### Tips for Getting a Good Night's Sleep

- Plan your day so you make time for sleep. Skimping on sleep makes you less productive.
- Natural light helps with sleep, so try to go outside every day.
- Get physical activity every day, just not too late in the day.
- Limit naps or take them early in the afternoon. Nap for no more than 20 minutes.
- No screen time before bedtime! Try not to look at your computer, phone, or TV an hour or so before bed. The light from these devices makes your brain think it's time to be awake.
- Don't eat a heavy or large meal, drink alcohol, have caffeine, or smoke soon before bed. Caffeine in sodas and coffee can take 8 hours to leave your body.
- Try to go to bed and wake up at the same time each day, even on the weekends. Limit the difference to an hour or less.
- Keep your bedroom quiet, cool, and dark (a dim night light is fine, if needed).
- Relax before bed. A warm bath may help.

### Strategies for Shift Workers

If you're a shift worker, here are some tips just for you:

- Use bright lights at work.
- Talk to your employer about limiting shift changes as much as possible.
- Limit caffeine to the first part of your shift.

### If you need to sleep during the day, use light-blocking curtains.

- If you're still not able to fall asleep when you need to or have problems getting used to a shift-work schedule, talk with your health care provider about other options to help you.

### Sleep Apnea

One common cause of poor sleep is sleep apnea. If you have sleep apnea, your breathing stops briefly or becomes very shallow during sleep. Sleep apnea is particularly common among African Americans. Loud, frequent snoring can be a sign of sleep apnea. Obesity is *one* cause of sleep apnea, but people who aren't overweight can have sleep apnea also.

If you're tired during the day, even after spending enough time in bed at night, you may have sleep apnea or another sleep disorder. Talk to your health care provider. It's important to get help if you aren't sleeping well.



# Serving Sizes

Based on a 2,000 Calorie Daily Meal Plan

Food Group	Serving Size
 <p>Grains*</p>	<p>1 slice whole wheat bread            1 ounce dry cereal†            ½ cup cooked rice, pasta, or cereal</p>
 <p>Vegetables</p>	<p>1 cup raw leafy vegetable (greens)            1 cup cut-up raw, frozen, or cooked vegetable</p>
 <p>Fruits</p>	<p>1 medium fruit, such as an apple            ½ cup fresh, frozen, or canned fruit</p>
 <p>Fat-free or low-fat milk and milk products</p>	<p>1 cup of fat-free or low-fat milk or yogurt‡            1½ ounces of reduced-fat cheese</p>
 <p>Protein foods</p>	<p>1 ounce cooked lean meats, poultry, or fish            1 egg            ½ ounce nuts or seeds            1 tablespoon nut butter            ¼ cup cooked beans or peas</p>

\* Choose whole grain foods. They're a good source of fiber and nutrients.

† Serving sizes vary between ½ cup and 1¼ cups, depending on cereal type. Check the product's food label.

‡ Lactose-free alternatives for people who are lactose intolerant



# Read the Food Label

Food labels help you choose foods that are lower in calories and sugar. Here’s a food label for sweetened tea.

## 1. Serving Size and Number of Servings

The serving size is 8 ounces, half the container of tea.

## 2. Amount Per Serving

The amounts are for one serving. But as you can see here, one serving is sometimes much less than the amount in the bottle.

## 3. Calories

The amount of calories in one serving is here. The amount of calories in the full bottle is twice that.

## 4. Carbohydrates and Sugar

The amount of carbohydrates in one serving is here. The amount of sugar is shown under carbohydrates.

### Sweetened Tea

Nutrition Facts	
2 servings per container	
<b>1</b> Serving size	8 fl oz (248g)
<b>2</b> Amount Per Serving	<b>70</b> <b>3</b>
<b>Calories</b>	<b>70</b>
% Daily Value*	
Total Fat 0g	0%
Saturated Fat 0g	0%
Trans Fat 0g	
Cholesterol 0mg	0%
Sodium 10mg	0%
<b>4</b> Total Carbohydrate 18g	<b>7%</b>
Dietary Fiber 0g	0%
Total Sugars 18g	
Includes 18g Added Sugars	36%
Protein 0g	0%
Vitamin D 0mcg	0%
Calcium 7mg	0%
Iron 0mg	0%
Potassium 32mg	0%

\*The % Daily Value (DV) tells you how much a nutrient in a serving of food contributes to a daily diet. 2,000 calories a day is used for general nutrition advice.

## The Choice Is Yours – Compare!

### Which one would you choose?

Sweetened tea has a lot of calories and all of the calories are from sugar. Read food labels to find low-sugar, low-calorie options.

Amount Per Serving	70
<b>Calories</b>	<b>70</b>
% Daily Value*	
Total Fat 0g	0%
Saturated Fat 0g	0%
Trans Fat 0g	
Cholesterol 0mg	0%
Sodium 10mg	0%
Total Carbohydrate 18g	7%
Dietary Fiber 0g	0%
Total Sugars 18g	

### Sweetened tea

A container of sweetened tea has 140 calories and 36 grams of sugar.

Amount Per Serving	0
<b>Calories</b>	<b>0</b>
% Daily Value*	
Total Fat 0g	0%
Saturated Fat 0g	0%
Trans Fat 0g	
Cholesterol 0mg	0%
Sodium 5mg	0%
Total Carbohydrate < 1g	0%
Dietary Fiber 0g	0%
Total Sugars 0g	

### Unsweetened tea

Unsweetened tea has 0 calories and no sugar. Save calories: choose unsweetened tea, diet soda, sparkling water, or water.

\*Percent Daily Values are based on a 2,000-calorie diet. Your Daily Values may be higher or lower depending on your calorie needs.



# Kayla's Snack Choices

Kayla and her family like to have snacks when they watch TV. But some family members have gained weight. Use the food labels to choose tasty lower-calorie snacks that Kayla should buy. **Write the number of your choice for each pair in the space between the labels. Then write the number of calories saved as well as total carbohydrates saved.**

## 1. Potato Chips

Nutrition Facts	
10 servings per container	
Serving size <b>1 cup or 13 chips (25g)</b>	
Amount Per Serving	
<b>Calories</b>	<b>130</b>
% Daily Value*	
Total Fat 8g	10%
Saturated Fat 0.85g	4%
Trans Fat 0g	
Cholesterol 0mg	0%
Sodium 130mg	6%
Total Carbohydrate 14g	5%
Dietary Fiber < 1g	3%
Total Sugars 0g	
Includes 0g Added Sugars	0%
Protein 2g	4%
Vitamin D 0mcg	0%
Calcium 5mg	0%
Iron 0.32mg	2%
Potassium 299mg	6%

Lower calorie choice

Number of calories saved

Total carbohydrates saved

## 2. Microwave Popcorn

Nutrition Facts	
4 servings per container	
Serving size <b>1 cup (11g)</b>	
Amount Per Serving	
<b>Calories</b>	<b>60</b>
% Daily Value*	
Total Fat 5g	6%
Saturated Fat 0.8g	4%
Trans Fat 0g	
Cholesterol 0mg	0%
Sodium 75mg	3%
Total Carbohydrate 5g	2%
Dietary Fiber < 1g	3%
Total Sugars 0g	
Includes 0g Added Sugars	0%
Protein < 1g	2%
Vitamin D 0mcg	0%
Calcium 0mg	0%
Iron 0.2mg	2%
Potassium 20mg	0%

## 3. Plain Almonds

Nutrition Facts	
12 servings per container	
Serving size <b>1/4 cup (35.2g)</b>	
Amount Per Serving	
<b>Calories</b>	<b>210</b>
% Daily Value*	
Total Fat 19g	24%
Saturated Fat 2g	10%
Trans Fat 0g	
Polyunsaturated Fat 5g	
Monounsaturated Fat 12g	
Cholesterol 0mg	0%
Sodium 0mg	0%
Total Carbohydrate 7g	3%
Dietary Fiber 4g	14%
Total Sugars 2g	
Includes 0g Added Sugars	0%
Protein 7g	14%
Vitamin D 0mcg	0%
Calcium 92mg	8%
Iron 1mg	6%
Potassium 244mg	6%

Lower calorie choice

Number of calories saved

Total carbohydrates saved

## 4. Sugar Coated Almonds

Nutrition Facts	
12 servings per container	
Serving size <b>1/4 cup (48.8g)</b>	
Amount Per Serving	
<b>Calories</b>	<b>230</b>
% Daily Value*	
Total Fat 9g	12%
Saturated Fat 1g	5%
Trans Fat 0g	
Polyunsaturated Fat 2g	
Monounsaturated Fat 6g	
Cholesterol 5mg	2%
Sodium 5mg	0%
Total Carbohydrate 33g	12%
Dietary Fiber 1g	4%
Total Sugars 31g	
Includes 29g Added Sugars	58%
Protein 5g	10%
Vitamin D 0mcg	0%
Calcium 49mg	4%
Iron 1mg	6%
Potassium 124mg	2%

\*Percent Daily Values are based on a 2,000-calorie diet. Your Daily Values may be higher or lower depending on your calorie needs.



# Kayla's Snack Choices (continued)

## 5. Canned Peaches (in fruit juice)

Nutrition Facts	
3.5 servings per container	
<b>Serving size</b>	1/2 cup (125g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>60</b>
% Daily Value*	
<b>Total Fat</b> 0g	0%
Saturated Fat 0g	0%
<i>Trans</i> Fat 0g	
<b>Cholesterol</b> 0mg	0%
<b>Sodium</b> 5mg	0%
<b>Total Carbohydrate</b> 14g	5%
Dietary Fiber 2g	7%
Total Sugars 13g	
Includes 0g Added Sugars	0%
<b>Protein</b> < 1g	2%
Vitamin D 0mcg	0%
Calcium 7.5mg	0%
Iron 0.3mg	2%
Potassium 160mg	4%

Lower calorie choice

Number of calories saved

Total carbohydrates saved

## 6. Canned Peaches (in heavy syrup)

Nutrition Facts	
3.5 servings per container	
<b>Serving size</b>	1/2 cup (131g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>100</b>
% Daily Value*	
<b>Total Fat</b> 0g	0%
Saturated Fat 0g	0%
<i>Trans</i> Fat 0g	
<b>Cholesterol</b> 0mg	0%
<b>Sodium</b> 10mg	0%
<b>Total Carbohydrate</b> 26g	9%
Dietary Fiber 2g	7%
Total Sugars 24g	
Includes 18g Added Sugars	36%
<b>Protein</b> < 1g	1%
Vitamin D 0mcg	0%
Calcium 3.9mg	0%
Iron 0.4mg	2%
Potassium 120mg	2%

## 7. Chocolate Candy Bar with Caramel and Nuts

Nutrition Facts	
1 servings per container	
<b>Serving size</b>	1 bar (56g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>260</b>
% Daily Value*	
<b>Total Fat</b> 12g	15%
Saturated Fat 2.6g	13%
<i>Trans</i> Fat 0g	
<b>Cholesterol</b> 0mg	0%
<b>Sodium</b> 85mg	4%
<b>Total Carbohydrate</b> 34g	12%
Dietary Fiber 2g	7%
Total Sugars 23g	
Includes 21g Added Sugars	42%
<b>Protein</b> 5g	10%
Vitamin D 0mcg	0%
Calcium 44mg	4%
Iron 0.9mg	4%
Potassium 249mg	6%

Lower calorie choice

Number of calories saved

Total carbohydrates saved

## 8. Cereal Bar with Fruits and Nuts

Nutrition Facts	
6 servings per container	
<b>Serving size</b>	1 bar (35g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>140</b>
% Daily Value*	
<b>Total Fat</b> 4g	5%
Saturated Fat 1g	5%
<i>Trans</i> Fat 0g	
<b>Cholesterol</b> 0mg	0%
<b>Sodium</b> 65mg	3%
<b>Total Carbohydrate</b> 25g	9%
Dietary Fiber 1g	4%
Total Sugars 15g	
Includes 12g Added Sugars	24%
<b>Protein</b> 2g	4%
Vitamin D 0mcg	0%
Calcium 41mg	4%
Iron 3mg	15%
Potassium 66mg	2%

\*Percent Daily Values are based on a 2,000-calorie diet. Your Daily Values may be higher or lower depending on your calorie needs.



## Soul Food Makeover: Smothered Greens Recipe

<b>3 cups</b>	water
<b>¼ pound</b>	smoked turkey breast, skinless
<b>1 tablespoon</b>	hot pepper, chopped
<b>¼ teaspoon</b>	cayenne pepper
<b>1 teaspoon</b>	cloves, ground
<b>2 cloves</b>	garlic, crushed
<b>½ teaspoon</b>	thyme
<b>1 stalk</b>	scallion, chopped
<b>1 teaspoon</b>	ginger, chopped
<b>¼ cup</b>	onion, chopped
<b>2 pounds</b>	greens (collard, mustard, turnip, kale, or mixture)

1. Prepare greens by washing thoroughly and removing stems.
2. Tear or slice greens into bite-sized pieces.
3. Place all ingredients except greens into large saucepan and bring to a boil.
4. Add greens. Cook 20 to 30 minutes until tender.

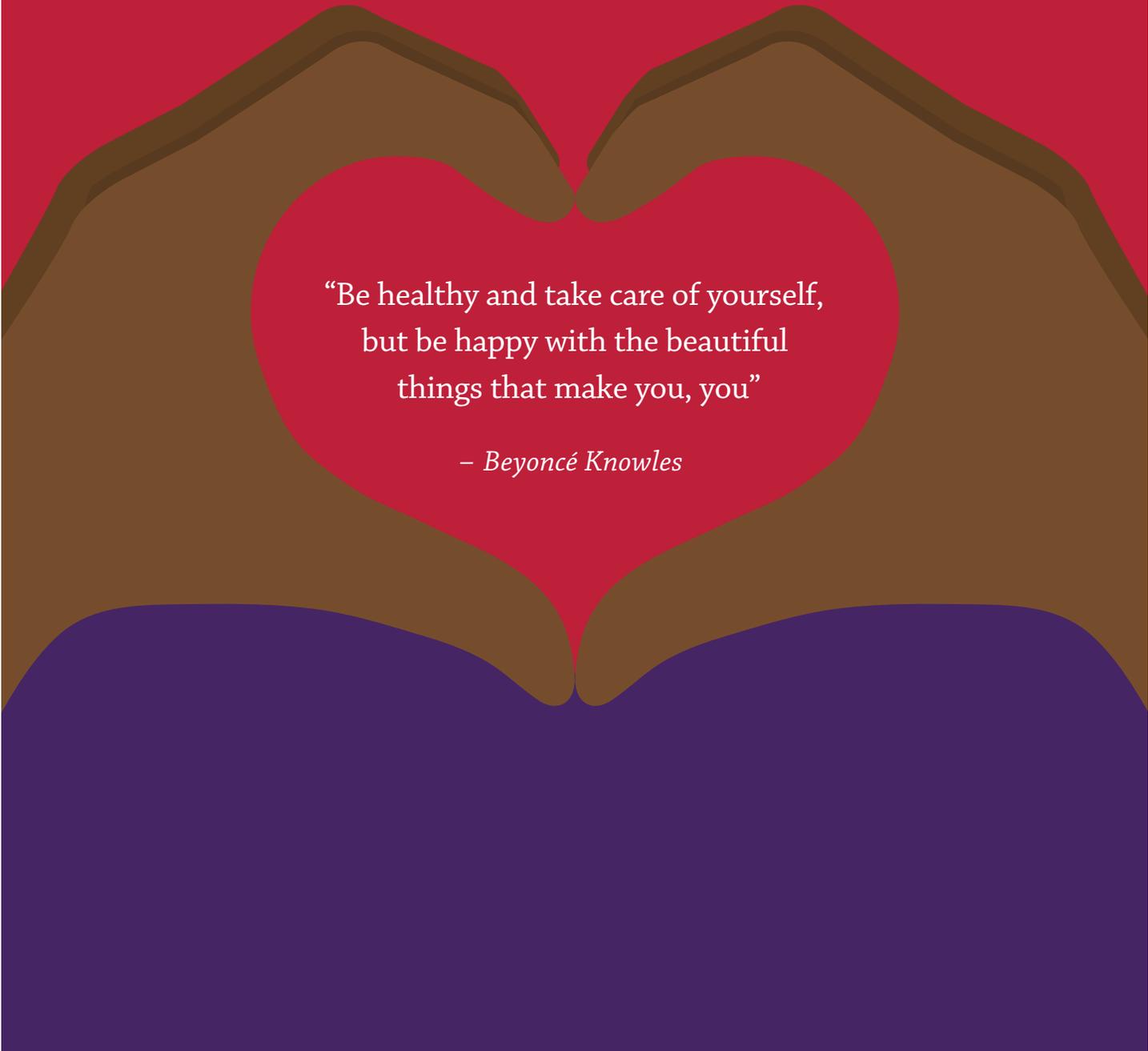


### Makes 5 servings

<b>Serving size:</b> 1 cup	<b>Dietary Fiber:</b> 4 g
<b>Calories:</b> 80	<b>Protein:</b> 9 g
<b>Fat:</b> 2 g	<b>Total</b>
<b>Saturated fat:</b> <1 g	<b>Carbohydrates:</b> 9 g
<b>Cholesterol:</b> 16 mg	<b>Potassium:</b> 472 mg
<b>Sodium:</b> 378 mg	

# Protect Your Heart From Diabetes

Session 7



“Be healthy and take care of yourself,  
but be happy with the beautiful  
things that make you, you”

– *Beyoncé Knowles*

# Session 7



## Protect Your Heart From Diabetes

### Objectives

#### By the end of this session, participants will learn:

- What diabetes is and how it affects the body
- The symptoms of diabetes
- That diabetes is a major risk factor for heart disease
- What blood sugar levels are and what they mean
- How to prevent and control diabetes
- The amount of carbohydrates and sweeteners in common drinks and foods

---

### Materials and Supplies

#### To conduct this session, you'll need:

- *With Every Heartbeat Is Life* manual and picture cards
- Blackboard and chalk, dry erase board, or several large pieces of paper, a marker, and tape
- Two bottles of water
- Red food coloring
- One cup of corn syrup
- (Optional) Small funnel
- Box of sugar cubes
- Three manila file folders or sheets of cardstock
- Supplies for the Think Before You Drink: Sweeteners in Drinks Activity (see page A.16)

## Handouts

### Give each participant these handouts during this session:

- List of places where participants can get their blood sugar checked
- What Is Diabetes? (page 7.30)
- Are You at Risk for Type 2 Diabetes? (page 7.31)
- Symptoms of Diabetes (page 7.32)
- Tender Care for Your Feet (page 7.33)
- Be Smart About Your Heart: Control the ABCs of Diabetes (page 7.34)
- Read the Food Label for Carbohydrates (pages 7.35-7.36)
- Pam's Food Choices (pages 7.37-7.38)
- Think Before You Drink: Sweeteners in Drinks (page 7.39)
- How Much Sweetener and How Many Calories Are in Your Favorite Drink? (page 7.40)
- Staying Healthy with Diabetes: Real-Life Stories (pages 7.41-7.43)
- Soul Food Makeover: Fruit Salad Recipe (page 7.44)

## Before This Session

### NOTE



(Optional) **Arrange** for a health professional or a diabetes educator to come to the session to measure participants' blood sugar levels.

- **Create** a list of where participants can get their blood sugar checked. You may find information at your local health department, hospital, or clinic.
- **Create** the displays for the Think Before You Drink: Sweeteners in Drinks Activity.

### NOTE



See pages A.14-A.18 in the Appendix for examples of the displays. You can also find online resources, including posters and YouTube videos, to demonstrate the amount of sugar and other sweeteners in drinks.

1. Use drawings, empty cans, or bottles to represent the drinks in the chart below.
2. Prepare five displays, each featuring one drink.
3. To prepare each display:
  - Cut a manila file folder in half and fold each half to make a tent.
  - Write the name of the drink on one side. On the other side, write the number of calories and the grams (or teaspoons) of sweetener that are in the drink.
  - To find the number of teaspoons, divide the grams of sugar on the nutrition label by four.
4. Put the cards aside until it's time for the activity.

**Think Before You Drink: Sweeteners in Drinks**

Serving Size	Drink	Amount of Sweetener
12 ounces	Fruit-flavored drink, powdered, reconstituted	6 teaspoons (24 grams)
12 ounces	Sparkling water	0 teaspoons (0 grams)
12 ounces	Grapefruit juice	6¾ teaspoons (27 grams)
12 ounces	Soft drinks	9¼ teaspoons (37 grams)
12 ounces	Lemonade, fruit-flavored drink	6 teaspoons (24 grams)
12 ounces	Unsweetened iced tea	0 teaspoons (0 grams)
12 ounces	Unsweetened coconut water	3½ teaspoons (14 grams)

- **Prepare the blood sugar demonstration using water, food coloring, and corn syrup.**

**NOTE**



(Optional) **Use** a small funnel to pour the liquids into the bottles.

1. Put two clear plastic bottles on the table.
2. Add 1 cup of water and 3 drops of red food coloring into one of the bottles. This represents blood with normal blood sugar.
3. Add 1 cup of corn syrup and 3 drops of red food coloring into the other bottle. This represents blood with high blood sugar.

## **Session Outline**

### **Introducing the Session**

1. Welcome
2. Review of Last Week's Session
3. About This Session

### **Conducting the Session**

1. The Facts Don't Lie
2. What Is Diabetes?
  - A. What is Prediabetes?
3. Types of Diabetes
4. Blood Sugar Demonstration Activity
5. Risk Factors for Diabetes
6. Symptoms of Diabetes
7. Blood Glucose (Sugar) Levels
  - A. Hypoglycemia
  - B. Hyperglycemia
8. Complications of Diabetes
9. ABCs of Diabetes Control
10. Food Label Activity: Carbohydrates and Sweeteners
11. Think Before You Drink: Sweeteners in Drinks Activity
12. Staying Healthy With Diabetes: Real-Life Stories—Group Activity
13. Soul Food Makeover: Fruit Salad Recipe

### **Review of Today's Key Points**

### **Weekly Pledge**

### **Closing**

# Introducing the Session

## 1. Welcome

DO **Welcome** participants to the session.

## 2. Review of Last Week's Session

SAY At the last session, we talked about aiming for a healthy weight.

---

SAY **Q: Does anyone remember why a healthy weight is important to your heart health?**

A: Keeping a healthy weight reduces your risk of heart disease, stroke, high blood pressure, high cholesterol levels, diabetes, breathing problems, and certain cancers.

**Q: What's the healthiest way to lose weight?**

A: Eat smaller portions; choose food that's low in saturated fat, added sugars, carbs, and calories; and increase your physical activity.

**Q: How does the food label help you lose weight?**

A: The food label tells you the serving size and the saturated fat, added sugars, carbs, and calories per serving, so you can compare different foods.

---

SAY The serving size isn't a recommendation of how much you should eat or drink. It just shows how much people typically eat or drink.

---

SAY At the end of the last session, you pledged to take steps to help you keep or get to a healthy weight. Did you have any problems? What were they and how did you deal with them?

## NOTE



Allow 5 minutes for participants to respond.

## ASK

Has anyone completed the family health history?

## DO

*(Optional)*

**Give** a prize to participants who've completed the history.

## SAY

Does anyone want to share what you learned about your family health history?

## NOTE



Allow 5 minutes for participants to respond.

### 3. About This Session

## SAY

Singer-songwriter and actress Beyoncé Knowles said, “Be healthy and take care of yourself, but be happy with the beautiful things that make you, you.”

## ASK

What does this quote mean to you?

## NOTE



Allow a moment for participants to respond.

## SAY

Did you know that having diabetes makes it more likely you'll get heart disease or have a heart attack? In today's session, you'll learn what you can do to prevent or control diabetes. If you have diabetes, you'll need to work closely with a health care provider, registered dietitian, or certified diabetes educator to help you monitor and control your blood sugar. (The medical term for blood sugar is “blood glucose.”)

# Conducting the Session

## 1. The Facts Don't Lie

**SAY** Diabetes is a serious problem for African Americans. It affects men, women, and children.

About 13 percent of African Americans have a diagnosis of diabetes (others may have it but a health care provider hasn't diagnosed it).

African Americans are more likely to have diabetes and to die from it than are whites.

Diabetes affects almost every part of your body. It makes you more likely to get heart disease and to have a heart attack or stroke.

Managing your blood sugar levels can help prevent many health problems caused by diabetes.

## 2. What Is Diabetes?

**SAY** Now we'll talk about what diabetes is and the types of diabetes.

**DO** **Give** participants the "What Is Diabetes?" handout (page 7.30).



HANDOUT

**DO** **Show** picture card 7.1.



PICTURE

**SAY** Normally, the food we eat breaks down into glucose, which is a type of sugar. Blood carries that sugar to our cells, where our body turns it into energy. For the sugar to get into our cells, it needs help from a hormone called insulin.

**DO** **Show** picture card 7.2



PICTURE

**SAY** Diabetes is when the body can't make enough insulin or when cells can't use it well. Both cause sugar to build up in our blood. People who have a lot of sugar in their blood have diabetes.

## A. What Is Prediabetes?

**ASK** Does anyone know what prediabetes is?

**NOTE**



Allow a minute for participants to respond.

**DO** **Add** these answers if participants don't mention them:

- Prediabetes is when blood sugar levels are higher than normal, but not high enough to be diabetes.
- One in three people has prediabetes. People with prediabetes often get type 2 diabetes. (We'll talk about the types of diabetes next.)
- Taking small steps, such as eating healthier foods and moving more to lose weight, can help improve how your body uses insulin and can prevent or delay type 2 diabetes in people with prediabetes.

## 3. Types of Diabetes

**DO** **Show** picture card 7.3.



**SAY** There are three main types of diabetes.

**Type 1 diabetes** most often occurs in children or young adults. It's caused by an autoimmune reaction, which is when the body's immune system, designed to fight off infections, mistakenly attacks healthy cells instead. In type 1 diabetes, the reaction destroys the insulin-making cells in an organ called the pancreas.

People with type 1 diabetes have to give themselves insulin, usually by injections or a pump.

Only about 5 percent of people with diabetes have type 1.

**SAY** **Type 2 diabetes** can happen at any age, but it's more common after age 45.

If you have type 2 diabetes, your body makes some insulin, but not enough. Also, your cells aren't very good at using the insulin.

If you have type 2, you may need to take medication.

Type 2 is becoming more common in children.

---

**SAY** **Gestational diabetes** occurs only when a woman is pregnant.

Every year, 2 to 10 percent of women in the United States develop gestational diabetes. It goes away after the baby is born. However, about half of all women who had it get diabetes later in life.

Women are at risk for gestational diabetes if they're older than age 25, are overweight, or have a family history of type 2 diabetes.

African American women are more likely than white women to get gestational diabetes.

Women with a hormonal disorder called polycystic ovary syndrome (PCOS) are at risk for developing gestational diabetes.

Children born to mothers with gestational diabetes are at a higher risk for becoming overweight and developing diabetes.

---

**ASK** Since type 2 diabetes is much more common than the other types, let's talk now about how to prevent and control it. What are some of the things we can do to prevent or control type 2 diabetes?

**NOTE**



Allow 2 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

**DO** **Add** these answers if not mentioned:

- Eat smaller portions.
- Drink water or other unsweetened drinks instead of sugary drinks, and eat less high-carbohydrate food, such as baked goods, rice, pasta, potatoes, and cereal. Carbohydrates turn into sugar in your body.
- Do at least 2 hours and 30 minutes of moderate-intensity aerobic activity, like brisk walking, each week.
- If you have diabetes or prediabetes, it's very important to follow your health care provider's instructions for taking your medications, monitoring your diet, and checking your sugar levels.

## 4. Blood Sugar Demonstration Activity



**SAY** Now I'm going to show you the difference between normal blood and blood with high sugar levels.

**DO** **Get** the bottles you prepared for the blood sugar demonstration.  
**Slowly tilt** the plain water bottle from side to side to show the smooth movement of the liquid.

**SAY** Notice how the liquid moves easily and freely? This is what the blood of someone with normal sugar levels looks like.

**DO** **Slowly tilt** the bottle with corn syrup from side to side to show the slow movement of the liquid.

**SAY** Notice how thick and slow it is? This is what the blood of someone with high sugar levels looks like.

Why? Because the sugar stays in the blood instead of going into the body's cells.

## 5. Risk Factors for Diabetes

**ASK** What do you think increases your chances of getting diabetes?

### NOTE



Allow 3 minutes for participants to respond.

**DO** **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

**DO** **Give** participants the “Are You at Risk for Type 2 Diabetes?” handout (page 7.31). As you read each risk factor, **ask** participants to check the risk factors they have.



**DO** **Show** picture card 7.4.



**SAY** Your risk of getting diabetes increases if you:

- Have prediabetes
- Are age 45 or older
- Are overweight, especially if you have extra weight around your waist
- Are physically inactive
- Have a parent, brother, or sister with diabetes
- Are African American, Hispanic/Latino American, Alaska Native, American Indian, Asian American, Native Hawaiian, or Pacific Islander
- Had gestational diabetes or had a very large baby (weighing more than 9 pounds)
- Have high blood pressure
- Have depression
- Have polycystic ovary syndrome, also called PCOS
- Have acanthosis nigricans, which is a condition that causes dark, thick, velvety skin around your neck or armpits

**SAY** The good news is that even if you're at risk for diabetes you can prevent or delay getting diabetes by eating healthy and doing physical activity.

It's important to be physically active for 30 minutes on most days and, if you're overweight, to lose even a small amount of weight.

## 6. Symptoms of Diabetes

**ASK** Does anyone know the signs or symptoms of diabetes?

**NOTE**



Allow 3 to 5 minutes for participants to respond.

**DO** **Give** participants the “Symptoms of Diabetes” handout (page 7.32).



HANDOUT

**DO** **Show** picture card 7.5.



PICTURE

**SAY** If you have any of these symptoms, get your blood sugar level tested right away:

- Having to pee a lot, often at night
- Feeling very thirsty
- Losing weight without trying
- Feeling very hungry
- Having blurry vision
- Feeling numbness or tingling in your hands or feet
- Having dry skin
- Feeling very tired
- Having sores that heal slowly
- Having more infections than usual

**SAY** Type 1 diabetes symptoms can develop in just a few weeks or months. Once symptoms appear, they can be severe. You may also have nausea, vomiting, or stomach pains.

However, people with type 2 diabetes often have no symptoms. That’s why it’s important to know your risk factors for type 2 diabetes and to get your blood sugar tested.

## 7. Blood Glucose (Sugar) Levels



**DO**      **Show** picture card 7.6.

**SAY**      A blood test, called the fasting plasma glucose (FPG) test, measures your blood sugar after at least 8 hours of fasting (having nothing to eat or drink except sips of water). These results show if you have diabetes. You can do the test at your health care provider’s office or at a lab.

**SAY**      Your blood sugar is measured as mg/dL, which stands for milligrams per deciliter.

- Normal is an FPG of 99 mg/dL or below.
- Prediabetes is an FPG of 100 to 125 mg/dL.
- Diabetes is an FPG of 126 mg/dL or higher.

**DO**      **Hand out** your list of where participants can get their blood sugar checked.

**SAY**      Here is a list of where you can get your blood sugar checked.  
 You can also get your blood tested without fasting. This test is called the random plasma glucose test. A normal level without fasting is below 200 mg/dL.

Fasting Plasma Blood Glucose (Sugar) Levels		
<b>Normal</b>	99 mg/dL or below	Good for you!
<b>Prediabetes</b>	100–125 mg/dL	Warning! You’re at risk for type 2 diabetes. Talk to your health care provider. You need to act to prevent diabetes.
<b>Diabetes</b>	126 mg/dL or higher	You have diabetes. Work with a health care provider to control your diabetes.

**SAY**      People with diabetes can have problems if their blood sugar levels get too low or too high.

## A. Hypoglycemia

**SAY** When your blood sugar level falls below normal, you have hypoglycemia. For most people that's 70 mg/dL or less. Hypoglycemia can happen to people with or without diabetes. Check with your health care provider to find out what level is too low for you and how best to treat it. Hypoglycemia can be dangerous!

---

**SAY** If you don't match your insulin or diabetes medicine with your food or physical activity, you can get hypoglycemia, especially if you:

- Don't eat enough carbohydrates (carbs)
  - Skip or delay a meal
  - Increase your physical activity
  - Drink too much alcohol without enough food
  - Are sick
- 

**SAY** Symptoms of hypoglycemia tend to come on quickly and can vary from person to person. Some symptoms are feeling:

- Shaky or jittery
- Sweaty
- Hungry
- Headachy
- Sleepy or tired
- Dizzy or lightheaded
- Confused or disoriented

The severe symptoms of hypoglycemia are:

- Unable to eat or drink
- Seizures or convulsions (jerky movements)
- Unconsciousness

**SAY** To get your blood sugar levels back up to normal, quickly eat or drink 15 grams of carbohydrates, such as:

- four glucose tablets or one tube of glucose gel
- ½ cup (4 ounces) of fruit juice—not low-calorie or reduced sugar
- ½ can (4 to 6 ounces) of soda—not low-calorie or reduced sugar
- 1 tablespoon of sugar, honey, or corn syrup
- 2 tablespoons of raisins

Keep glucose tablets or other rescue foods handy—such as in your purse, at your desk, or in your pocket—if you’re away from home.

## B. Hyperglycemia

**SAY** Hyperglycemia is when your blood sugar is too high, usually 180 mg/dL or above. This happens when your body can’t make enough insulin or can’t use it right away. It can be very serious also!

People with diabetes can get hyperglycemia from:

- Not eating the right foods
- Skipping or not taking medicines properly
- Having an infection
- Taking certain medicines
- Having hormone problems
- Being very sick

---

**SAY** Early symptoms of hyperglycemia are:

- Having to pee more often
- Feeling more thirsty or tired than usual
- Blurred vision
- Headache

Later symptoms of hyperglycemia are:

- Fruity-smelling breath
- Nausea and vomiting

- Shortness of breath
- Dry mouth
- Weakness
- Confusion
- Stomach pain
- Coma

**SAY** Talk with your health care provider about what to do if you have high or low blood sugar. You may need to change your medication or what you eat.

## 8. Complications of Diabetes

**SAY** Can anyone name complications of diabetes?

### NOTE



Allow 3 to 5 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

**SAY** Over time, high blood sugar levels damage your blood vessels and nerves, including the nerves that control your heart. The longer you have diabetes and the less well you control your sugar levels, the greater the chances you'll develop complications.

Diabetes can lead to:

- Heart disease and heart attack
- Stroke
- Amputations of the feet or legs. Diabetes can cause nerve damage. If you have nerve disease, you may lose feeling or have tingling or pain in the toes, feet, or legs.
- Kidney disease. Having high blood sugar can harm blood vessels in your kidneys. African Americans have high rates of kidney failure, the final stage of kidney disease.

- Eye disease. Diabetes can harm your vision or even cause blindness. People with diabetes need to have their eyes examined by a medical eye specialist once a year.
- Dental problems. Not controlling your blood sugar causes cavities and tooth infections. To prevent tooth decay, brush and floss your teeth every day. See your dentist every 6 months.
- Problems with digestion, bladder control, and sexual function

---

**SAY** If you or someone close to you has diabetes, be sure to talk to your health care provider about how to prevent or treat these complications.

---

**DO** **Give** and **review** the “Tender Care for Your Feet” handout (page 7.33).



HANDOUT

## 9. ABCs of Diabetes Control

**SAY** If you have diabetes, controlling your blood sugar levels can help prevent or delay complications.

---

**SAY** Now let’s talk about the ABCs of diabetes control.

---

**DO** **Give** participants the “Be Smart About Your Heart: Control the ABCs of Diabetes” handout (page 7.34).



HANDOUT

### NOTE



Allow a few minutes for participants to read the handout.

**SAY** Ask your health care provider:

- What are my ABC numbers?
- What should my ABC numbers be?
- What should I do to control my ABC numbers?

## 10. Food Label Activity: Carbohydrates and Sweeteners



**SAY** People with diabetes should control their sugar intake. Sugar is high in calories and contributes to weight gain. Eating too much sugar can lead to increased blood sugar levels.

Carbohydrates are found in foods such as baked goods, rice, cereal, potatoes, pasta, and sweet beverages. Because carbohydrates turn into sugar in your body, they affect your blood sugar level more than other foods do.

Manufacturers add other types of sweeteners besides sugar to food, like high-fructose corn syrup, fructose, honey, corn syrup, and others. Those sweeteners act like sugar in your body.

Foods you wouldn't expect, especially at restaurants, can have a lot of sugar. For example, a serving of "fruit and maple oatmeal" at a fast food restaurant has almost as much sugar as a can of soda. So does 4 tablespoons of barbeque sauce.

You don't have to give up a favorite food to eat a healthy diet. When a food you like is high in a nutrient you want to eat less—such as carbohydrates and sweeteners—balance it with foods that are low in that nutrient at other times of the day, or get small portions.

---

**SAY** Now let's use food labels to find foods with fewer carbohydrates and sweeteners.

---

**DO** **Give** participants the "Read the Food Label for Carbohydrates" handout (pages 7.35-7.36).



---

**SAY** Do you see the amount of carbohydrates listed on the label for a Coke at the top of the handout? That's the total amount of sugar, starches, and other carbs in the drink.

Daily Value is the amount of a nutrient that you need every day if you were eating 2,000 calories a day.

The Percent Daily Value listed on the right of the label is the amount of that nutrient in one serving. You can use that number to compare foods. If the Percent Daily Value for total carbohydrates is 5 percent or lower, it's generally low carb. If it's 20 percent or higher it's high carb.

**SAY** The food label also tells you how much sugar is in your food. It tells you how much of the sugar has been added by the manufacturer, to make the product sweeter.

**Q: Which drink has less sugar—grape juice or unsweetened iced tea?**

**A:** The unsweetened iced tea has no sugar. The grape juice has 35 grams.

**NOTE**

Unlike other nutrients, sugar doesn't have a Percent Daily Value on the food label.

**SAY** Let's try another activity. Pam needs our help.

**DO** **Give** participants the "Pam's Food Choices" handout (pages 7.37-7.38).



**SAY** First, I'm going to describe Pam's problem. Then we'll use the food labels to find some solutions.

## Pam's Food Choices

Pam has offered to go grocery shopping for her mother, Ms. Diane, who has diabetes. Pam wants to buy her mother food that's lower in calories and carbohydrates. Which items should Pam buy? Look at the food labels. Write the number of your choice for each pair in the space between the labels. Then write the number of grams of carbohydrates you saved by this choice.



### NOTE



The correct answers to the questions are underlined.

- Cooked oatmeal (plain) or a toaster pastry  
*The cooked oatmeal saves 26 grams*
- Unsweetened or sweetened applesauce  
*The unsweetened applesauce saves 7 grams*
- Light or original strawberry yogurt  
*The light yogurt saves 8 grams*
- Sweet or unsweetened tea  
*The unsweetened tea saves 29 grams*

## 11. Think Before You Drink: Sweeteners in Drinks Activity



**SAY** Let's play a guessing game about how much sugar is in some common drinks.

**DO** **Give** participants the “Think Before You Drink: Sweeteners in Drinks” handout (page 7.39).



**DO** **Show** participants the names of the beverages on the five displays that you prepared before the session.

**SAY** Guess how many teaspoons of sugar are in each drink. Write your answers on the handout.

### NOTE



Allow 2 minutes for participants to write down their answers.

**DO** **Ask** participants to share their guesses. Then **show** them the actual amounts. **Pass around** the display cards one by one.

**SAY** In this part of the activity, you'll learn how much sugar and how many calories are in your favorite drink.

**DO** **Give** participants the “How Much Sweetener and How Many Calories Are in Your Favorite Drink?” handout (page 7.40).



**SAY** Find your favorite drink on the list. How much sugar does it have? How many calories? Notice that fruit juices, soft drinks, and sports drinks tend to have more of each. Water, including sparkling water, has zero of both.

**SAY** You can see how easy it is to get too many calories. Remember, any extra calories, even in drinks, can make you gain weight.

Choose water and other unsweetened drinks. Limit how often you have sweetened soda, tea, coffee drinks, smoothies, energy drinks, and juice.

## 12. Staying Healthy With Diabetes: Real Life Stories— Group Activity

**NOTE**

This activity will help participants think about ways they can help their relatives and friends with diabetes stay healthy.

**DO**

**Give** participants the “Staying Healthy With Diabetes: Real-Life Stories” handout (pages 7.41-7.43).

**DO**

**Divide** participants into groups of three to five people and **give** each group a different story (handout) to discuss. (Your copy of the handouts with the answers is below.)

**SAY**

Each group will review a story and think about ways to solve the problem described. Please choose a leader of your group to read the story and questions out loud and to write down your group’s answers.

**NOTE**

Allow 5 to 7 minutes for participants to do the activity.

**SAY**

Now leaders will take turns reading their group’s story and answers to all of us.

**NOTE**

After each leader has read, **ask** if anyone has other additional solutions to share.

## Staying Healthy With Diabetes: Real-Life Stories

### Scene 1: Harris family reunion

Saturday is the Harris family reunion. Many relatives will bring tasty foods and desserts. Harold hasn't been to a potluck since his health care provider told him he has diabetes. He's worked hard to change his eating habits. Now Harold wonders what he should bring to the reunion and how he can stick to his eating plan.

#### NOTE



**Add** the bulleted answers if they aren't mentioned.

#### What can Harold bring to the reunion?

- Unsweetened iced tea with slices of lemon or orange
- A green salad with sliced, fresh vegetables, and low-fat dressing
- Cold bean salad

#### How can Harold stick to his eating plan at the reunion?

- Eat smaller portions, particularly of baked goods, rice, potatoes, and pasta.
- Have only one helping of the main course.
- Eat salad if he's still hungry.
- Limit sweets, high-fat foods, sauces, gravies, and alcohol.

#### What else can Harold do?

- Eat a healthy snack, such as a low-fat cheese stick or small portion of nuts, before the party, so he's not too hungry.
- Take a walk after eating.
- Check his sugar 2 hours after eating to see how his food choices affected it.

## Staying Healthy With Diabetes: Real-Life Stories (continued)

### Scene 2: Connie's new shoes

Connie bought new shoes a week ago. She wore them two days in a row because her feet felt fine. At the end of the second day, however, Connie noticed red spots on both of her feet and blisters on the big toe of her right foot. She's concerned that she didn't feel the sores. She also worries that her diabetes isn't under control.

#### NOTE



**Share** the answers to each question if they aren't said.

### What can Connie do about the sores on her feet?

- People with diabetes need to see a health care provider if they have a cut, blisters, or signs of infection on their feet.
- Connie should go for a foot screening, which includes inspection, testing for feeling, and other tests.
- Because she can't feel sensation in her feet, Connie needs to practice personal foot care every day to look for changes and infections.

### What should people with diabetes consider when buying shoes?

- Medicare provides coverage of special shoes for people with diabetes. Check with your health care provider to see if you qualify.
- Walking shoes and athletic shoes are good for daily wear. They support your feet and allow them to breathe.
- Don't wear vinyl or plastic shoes, because they don't stretch or breathe.
- Have the salesperson measure both feet. Test the shoes by wearing them for at least 5 minutes in the store.
- Buy shoes at the end of the day, when your feet are the largest.
- If the shoes hurt, don't buy them.
- Break in new shoes slowly by wearing them for only a few hours a day. Check for irritation or redness every time you remove your shoes and socks. Never wear new shoes all day.

## Staying Healthy With Diabetes: Real-Life Stories (continued)

### Scene 3: What's wrong with Angela?

**First visit:** When Angela and her cousin, Dawn, go shopping, Angela often has to stop to use the restroom. Dawn, a community health worker, asks her if anything is wrong. Angela says she's been more tired and thirsty lately and has to pee frequently. Even though she's physically active, Angela worries she has diabetes. She asks Dawn what to do.

#### NOTE



**Add** the bulleted answers if they aren't mentioned.

#### **Dawn should say to Angela:**

- Get your blood sugar checked! If you have diabetes, you need treatment right away. Only a health care provider can diagnosis diabetes.
- People are more likely to have diabetes if they're overweight, inactive, have a parent or sibling with diabetes, or are age 45 or older.

**Second visit:** Angela tells Dawn that she went to the health care provider and she has diabetes. Now she's afraid.

#### **Dawn can help Angela overcome her fear by saying:**

- It's normal to feel scared, depressed, or angry. You'll feel better when you learn how to control your diabetes.
- Controlling your blood sugar, blood pressure, and cholesterol will delay or prevent complications. One complication might be eye problems, so be sure to get a thorough eye exam.
- You should go to classes at the clinic and join a support group for people with diabetes.
- Please learn how to take care of your heart also. Diabetes can affect your heart.

## 13. Soul Food Makeover: Fruit Salad Recipe



### NOTE



This activity will give participants a chance to try heart healthy recipes at home.

### DO

**Give** participants the “Soul Food Makeover: Fruit Salad Recipe” handout (page 7.44).



### SAY

Here’s a healthy dessert that you can bring to a family gathering or other event.

### DO

**Ask** participants to prepare the recipe during the coming week. **Tell** them that using the recipe will give them a chance to practice some of the ideas from the session.

## Review of Today’s Key Points

### SAY

Let’s review what we learned today.

#### What is diabetes?

- Diabetes is when our body doesn’t make enough insulin or can’t use it well. This causes glucose (a type of sugar) to build up in our blood. As a result, our body can’t function well.

#### What are risk factors for diabetes?

- Having prediabetes
- Being age 45 or older
- Being overweight, especially if the extra weight is around your waist
- Having a parent or sibling with diabetes
- Being physically inactive

- Being African American, Hispanic/Latino American, Alaska Native, American Indian, Asian American, Native Hawaiian, or Pacific Islander
- Having had gestational diabetes or given birth to a large baby (weighing more than 9 pounds)
- Having depression
- Having polycystic ovary syndrome, also called PCOS
- Having acanthosis nigricans, which is dark, thick, velvety skin around your neck or armpits

### **How can you prevent or delay type 2 diabetes?**

- Doing at least 2 hours and 30 minutes of physical activity each week
- Losing weight if you're overweight
- Eating healthier

### **What are the ABCs of diabetes control?**

- **A** is for the A1C blood test. It shows your average sugar level over the past 3 months. The goal for many people with diabetes is an A1C below 7 percent. Ask your health care provider what your goal should be.
- **B** is for blood pressure. High blood pressure increases your risk for a heart attack, stroke, and kidney and eye damage.
- **C** is for cholesterol. High LDL (the “bad”) cholesterol increases your risk of having a heart attack or stroke. Ask your health care provider what your goal should be.
- **S** is for stop smoking. Not smoking is especially important for people with diabetes. Smoking and diabetes both narrow your blood vessels, which makes your heart work harder.

### **How does diabetes affect your body?**

- Having high sugar levels increases your risk of having heart disease; stroke; nerve damage; and kidney, eye, dental, and foot problems.

## Weekly Pledge



PLEDGE

**SAY** Today you learned a lot about diabetes. Please think of one change you can make in your everyday life to prevent or control diabetes. This will be your pledge for the week.

**SAY** Be specific about **what** you plan to do, **how** you'll do it, and **when** you'll start.

Here are some examples:

- I'll talk to my health care provider about my risk for diabetes and about getting my blood sugar checked.
- If I have diabetes, I'll check my blood sugar levels as often as my health care provider tells me to.
- I'll compare food labels when I go grocery shopping and choose foods with fewer carbohydrates.
- I'll drink water with my meals instead of soda or other sugary drinks.
- Write your pledge on the "Be Smart About Your Heart: Control the ABCs of Diabetes" handout. Keep this handout where you can see it easily and keep your goals in mind.

**NOTE**

Allow 5 minutes for participants to think of a pledge.

**SAY** Would anyone like to share their pledge with the group?

**NOTE**

**Write** down participants' pledges.

**SAY** *(Optional)*

Keeping a personal value in mind can help you prevent or control diabetes. Remember that a personal value is a quality that you consider important.

Today the value is joy. Joy can help you replace boredom or indifference with a positive outlook. As today's quote says, "Be healthy and take care of yourself, but be happy with the beautiful things that make you, you."

Joy can help you enjoy preparing foods the healthy way. Joy is contagious, and others may follow your example!

**ASK** How could you use joy, or another value, to help you keep your pledge?

**NOTE**

Allow 3 minutes for participants to share their thoughts.

**SAY** We'll discuss the results of your pledges next week. Remember to continue working on your pledges to be more physically active; to cut back on sodium, sugar, and saturated fat; and to have a healthy weight.

## Closing

**SAY** Thank you for coming today. What did you think of today's session?

**NOTE**

Allow a moment for participants to respond.

**SAY** I'm looking forward to seeing you at the next session. It will be about making traditional African American meals heart healthy. Please continue to fill out your family health history.

**NOTE**

**Think** about today's session. What worked? What didn't work? Have you made changes in your own life because of today's session?

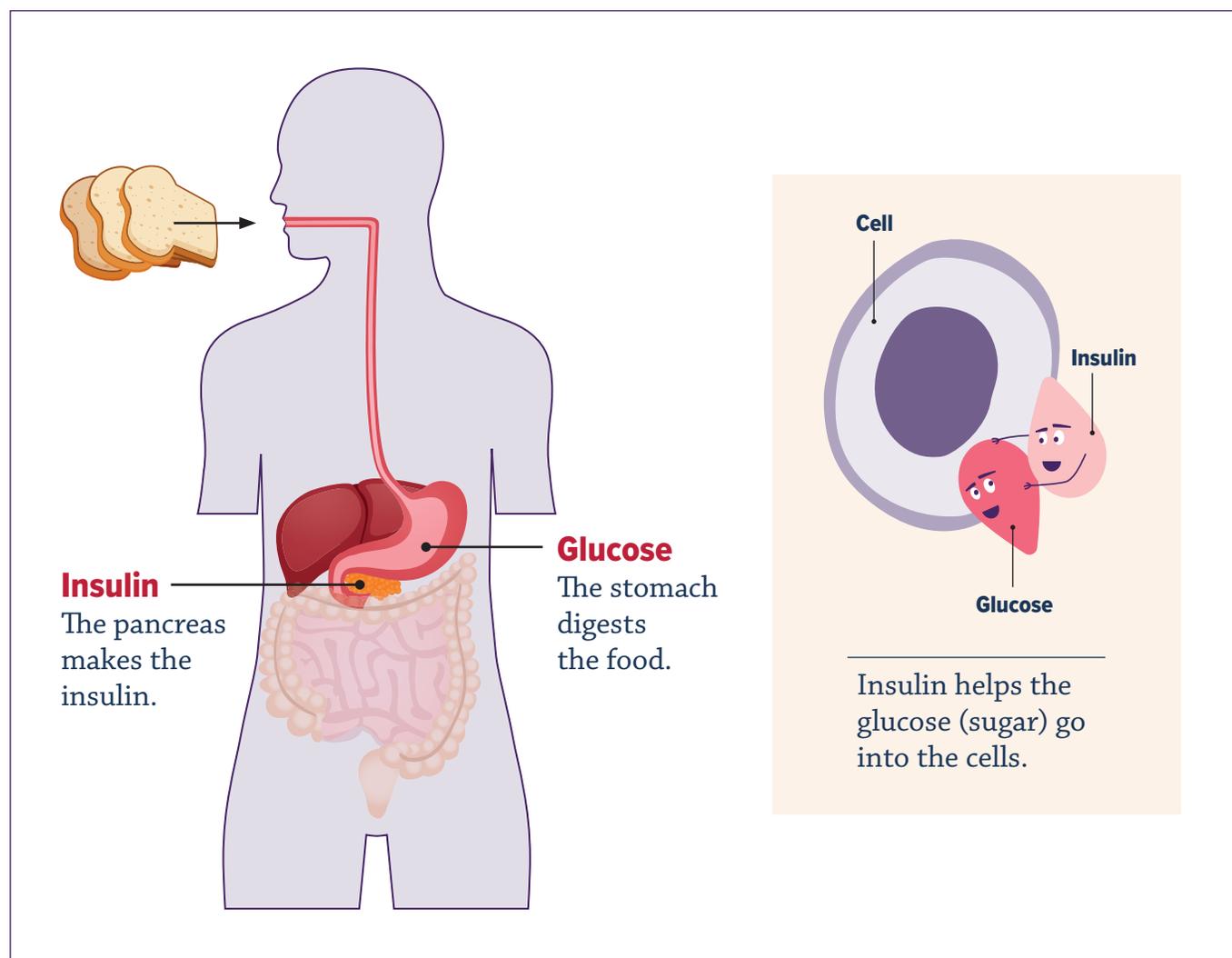


## What Is Diabetes?

Diabetes is when the body doesn't make enough insulin or can't use it well. This causes glucose (a type of sugar) to build up in the blood. As a result, the body doesn't function well.

### Know your body

- Your stomach digests your food and breaks it down into glucose, a type of sugar.
- Blood carries that sugar to cells, where the body turns it into energy. Insulin helps the sugar go into the cells. Your pancreas makes insulin.
- If your body can't produce enough insulin, or the cells can't use the insulin well, then the sugar builds up in your blood and you have prediabetes or diabetes.





# Are You at Risk for Type 2 Diabetes?

## Check your risk factors

The more risk factors you have, the higher your risk for developing type 2 diabetes. Only your health care provider can determine if you have diabetes. On your next visit, talk to your health care provider about getting tested for diabetes.

- I'm overweight (especially around the waist).
- I have a parent, brother, or sister with diabetes.
- My family background is African American, Hispanic/Latino American, Alaska Native, American Indian, Asian American, Native Hawaiian, or Pacific Islander.
- I have had gestational diabetes or I gave birth to a large baby (weighing 9 pounds or more).
- I'm not physically active.
- I have depression.
- I have polycystic ovary syndrome (PCOS).
- I have acanthosis nigricans (dark, thick, and velvety skin around your neck or armpits).





# Symptoms of Diabetes

The symptoms of type 2 diabetes develop over time, and some people have no symptoms.

## Here's what to look out for:



**Having to pee a lot, often at night**



**Feeling very thirsty**



**Losing weight without trying**



**Feeling very hungry**



**Blurry vision**



**Numbness or tingling in hands or feet**



**Feeling very tired**



**Dry skin**



**Sores that heal slowly**



**More infections than usual**



## Tender Care for Your Feet

Diabetes can cause nerve damage, which reduces sensation in your feet. Diabetes may also affect blood flow in your legs and feet, making it harder for cuts or sores to heal. Small injuries may become infected and can become very serious.

### Daily care

- Wash your feet with soap in warm (not hot) water every day. Test the water to make sure it's not too hot. Dry them carefully, especially between your toes. Don't soak your feet.
- Look at your feet every day to check for cuts, sores, blisters, redness, calluses, or other problems. If you can't bend over or pull your feet up to check them, use a mirror, or ask someone else to check your feet.
- If your skin is dry, rub a thin coat of lotion on your feet after you wash and dry them. Don't put lotion between your toes.
- If your health care provider tells you to, smooth corns and calluses gently with an emery board or pumice stone. Do this after your bath or shower. Don't use a pocketknife or razor blade that can cut your skin.
- Trim your toenails, when needed, after you wash and dry your feet. Use toenail clippers and trim your nails straight across.



### Periodic foot exam

- Remind your health care provider to check your feet at every visit.
- Get a complete foot exam once a year. If you have problems with your feet, have your health care provider check them every 3 to 6 months.

### Footwear

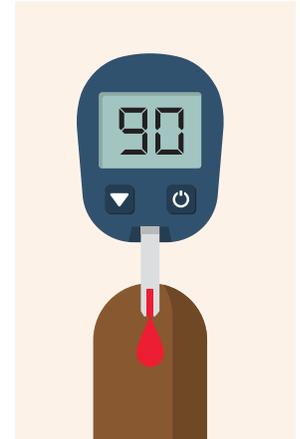
- Wear well-cushioned shoes and socks at all times. Don't go barefoot.
- Change your socks every day, and make sure they're clean and soft.
- Buy shoes that are roomy and allow your feet to "breathe."
- Medicare provides coverage of special shoes for people with diabetes. Check with your health care provider to see if you qualify.



# Be Smart About Your Heart: Control the ABCs of Diabetes

Prediabetes is when blood sugar levels are higher than normal but not as high as they would be if you had diabetes. If you have prediabetes, eating healthy foods, being active, and losing weight if you're overweight can help improve how your body uses insulin and can prevent or delay type 2 diabetes.

If you have diabetes, you can prevent or delay complications by controlling your blood sugar levels.



## The ABCs of Diabetes

If you have diabetes, follow these ABCs to lower your risk of having a heart attack or stroke. Always talk with your health care provider to find out what number is best for you to aim for, since it can be different for each person.

- **A** is for the A1C blood test. This test measures your average blood sugar level over the past 3 months. It lets you know if your sugar level is under control. Get this test at least twice a year.
- **B** is for blood pressure. The higher your blood pressure, the harder your heart has to work. Get your blood pressure checked at every visit to your health care provider.
- **C** is for cholesterol. Maintain healthy blood cholesterol levels. LDL (“bad”) cholesterol builds up and clogs your arteries. Get your LDL cholesterol tested at least once a year.
- **S** is for stop smoking. Not smoking is especially important for people with diabetes. Smoking and diabetes narrow your blood vessels, which stresses your heart. There’s no “safe” level of smoking.

## Be sure to ask your health care provider:

- What are my ABC numbers?
- What should my ABC target numbers be?
- What actions should I take to reach my ABC target numbers?

**Write the changes you’ll make this week to control your blood sugar, blood pressure, or cholesterol.**

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# Read the Food Label for Carbohydrates



Food labels help you choose foods that are lower in calories and in carbohydrates and sweeteners. Here is a food label for a 12-ounce regular soda. The label provides lots of useful information.

## 1. Serving Size and Number of Servings

The serving size is 12 ounces. There's 1 serving in this container.

## 2. Amount Per Serving

The nutrient amounts on the label are for one serving. If you have more than one serving, you'll get more calories and other nutrients. For example, if you drink 2 cans of soda, you're drinking 2 servings, which has 320 calories and 74 grams of sugar.

## 3. Percent Daily Value\*

The Percent Daily Value (%DV) helps you compare nutrient amounts in products. Products with 5% DV or less are low in carbohydrates, products with 20% DV or more are high.

## 4. Calories and Carbohydrates

Here are the amounts of calories and carbohydrates in one serving.

12-ounce soda

Nutrition Facts	
1 serving per container	
Serving size	1 can (12oz) (372g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>160</b>
% Daily Value*	
<b>Total Fat</b> 1g	1%
Saturated Fat 0g	0%
<i>Trans Fat</i> 0g	
<b>Cholesterol</b> 0mg	0%
<b>Sodium</b> 10mg	0%
<b>Total Carbohydrate</b> 39g	14%
Dietary Fiber 0g	0%
Total Sugars 37g	
Includes 37g Added Sugars	74%
<b>Protein</b> 0g	0%
Vitamin D 0mcg	0%
Calcium 4mg	0%
Iron 0mg	0%
Potassium 19mg	0%

\* The % Daily Value (DV) tells you how much a nutrient in a serving of food contributes to a daily diet. 2,000 calories a day is used for general nutrition advice.

\*Percent Daily Values are based on a 2,000-calorie diet. Your Daily Values may be higher or lower depending on your calorie needs.



# Read the Food Label for Carbohydrates (continued)

## The Choice Is Yours — Compare!

Which one would you choose?

The unsweetened iced tea has fewer calories and no carbohydrates. That makes the iced tea a better choice! You can learn a lot from a food label.

<b>Nutrition Facts</b>	
8 servings per container	
<b>Serving size</b>	1 cup (248g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>150</b>
<small>% Daily Value*</small>	
<b>Total Fat</b> 0g	0%
Saturated Fat 0g	0%
Trans Fat 0g	
<b>Cholesterol</b> 0mg	0%
<b>Sodium</b> 10mg	0%
<b>Total Carbohydrate</b> 37g	13%
Dietary Fiber 0g	0%
Total Sugars 35g	
Includes 0g Added Sugars	0%

### 100% Grape Juice

One cup of grape juice has 150 calories and 37 grams of carbohydrates.

<b>Nutrition Facts</b>	
<b>Serving size</b>	1 cup (240g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>0</b>
<small>% Daily Value*</small>	
<b>Total Fat</b> 0g	0%
Saturated Fat 0g	0%
Trans Fat 0g	
<b>Cholesterol</b> 0mg	0%
<b>Sodium</b> 5mg	0%
<b>Total Carbohydrate</b> < 1g	0%
Dietary Fiber 0g	0%
Total Sugars 0g	
Includes 0g Added Sugars	0%

### Unsweetened Iced Tea

One cup of unsweetened iced tea has 0 calories and less than 1 gram of carbohydrates.

\*Percent Daily Values are based on a 2,000-calorie diet. Your Daily Values may be higher or lower depending on your calorie needs.



# Pam's Food Choices

Pam is grocery shopping for her mother, Ms. Diane, who has diabetes. Pam wants to buy foods that are lower in calories and carbohydrates for her mother. Look at the food labels. Help Pam select foods that are lower in sugar. Which foods should Pam buy? **Write the number of your choice for each pair in the space between the labels. Then write the number of grams of sugar you saved.**

## 1. Cooked Oatmeal

Nutrition Facts	
13 servings per container	
<b>Serving size</b>	1/2 cup (117g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>70</b>
% Daily Value*	
<b>Total Fat</b> 1g	1%
Saturated Fat 0.2g	1%
Trans Fat 0g	
<b>Cholesterol</b> 0mg	0%
<b>Sodium</b> 140mg	6%
<b>Total Carbohydrate</b> 13g	5%
Dietary Fiber 2g	7%
Total Sugars 0g	
Includes 0g Added Sugars	0%
<b>Protein</b> 2g	4%
Vitamin D 0mcg	0%
Calcium 13mg	0%
Iron 0.7mg	4%
Potassium 66mg	2%

Lower sugar choice

Grams of sugar saved

## 2. Toaster Pastry

Nutrition Facts	
8 servings per container	
<b>Serving size</b>	1 pastry (54g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>210</b>
% Daily Value*	
<b>Total Fat</b> 5g	6%
Saturated Fat 1.6g	8%
Trans Fat 0g	
<b>Cholesterol</b> 0mg	0%
<b>Sodium</b> 170mg	7%
<b>Total Carbohydrate</b> 39g	14%
Dietary Fiber < 1g	3%
Total Sugars 17g	
Includes 16g Added Sugars	32%
<b>Protein</b> 2g	4%
Vitamin D 0mcg	0%
Calcium 6mg	0%
Iron 2.3mg	15%
Potassium 46mg	0%

## 3. Sweetened Applesauce

Nutrition Facts	
1 servings per container	
<b>Serving size</b>	1/2 cup (122g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>80</b>
% Daily Value*	
<b>Total Fat</b> 0g	0%
Saturated Fat 0g	0%
Trans Fat 0g	
<b>Cholesterol</b> 0mg	0%
<b>Sodium</b> 0mg	0%
<b>Total Carbohydrate</b> 21g	8%
Dietary Fiber 1g	4%
Total Sugars 18g	
Includes 6g Added Sugars	12%
<b>Protein</b> 0g	0%
Vitamin D 0mcg	0%
Calcium 4mg	0%
Iron 0.1mg	0%
Potassium 92mg	2%

Lower sugar choice

Grams of sugar saved

## 4. Unsweetened Applesauce

Nutrition Facts	
1 servings per container	
<b>Serving size</b>	1/2 cup (128g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>50</b>
% Daily Value*	
<b>Total Fat</b> 0g	0%
Saturated Fat 0g	0%
Trans Fat 0g	
<b>Cholesterol</b> 0mg	0%
<b>Sodium</b> 0mg	0%
<b>Total Carbohydrate</b> 14g	5%
Dietary Fiber 1g	4%
Total Sugars 12g	
Includes 0g Added Sugars	0%
<b>Protein</b> 0g	0%
Vitamin D 0mcg	0%
Calcium 5mg	0%
Iron 0.3mg	2%
Potassium 94mg	2%

\*Percent Daily Values are based on a 2,000-calorie diet. Your Daily Values may be higher or lower depending on your calorie needs.



# Pam's Food Choices (continued)

## 5. Light Strawberry Yogurt

Nutrition Facts	
1 servings per container	
<b>Serving size</b>	1 container (170g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>90</b>
% Daily Value*	
<b>Total Fat</b> 0g	0%
Saturated Fat 0g	0%
Trans Fat 0g	
<b>Cholesterol</b> < 5mg	1%
<b>Sodium</b> 75mg	3%
<b>Total Carbohydrate</b> 18g	7%
Dietary Fiber 0g	0%
Total Sugars 10g	
Includes 4g Added Sugars	8%
<b>Protein</b> 5g	10%
Vitamin D 2mcg	10%
Calcium 210mg	15%
Iron 0mg	0%
Potassium 260mg	6%

Lower sugar choice

Grams of sugar saved

## 6. Regular Strawberry Yogurt

Nutrition Facts	
1 servings per container	
<b>Serving size</b>	1 container (170g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>150</b>
% Daily Value*	
<b>Total Fat</b> 2g	3%
Saturated Fat 1.5g	8%
Trans Fat 0g	
<b>Cholesterol</b> 10mg	3%
<b>Sodium</b> 90mg	4%
<b>Total Carbohydrate</b> 26g	9%
Dietary Fiber 0g	0%
Total Sugars 19g	
Includes 13g Added Sugars	26%
<b>Protein</b> 6g	12%
Vitamin D 2mcg	10%
Calcium 220mg	15%
Iron 0mg	0%
Potassium 280mg	6%

## 7. Sweet Tea

Nutrition Facts	
1 servings per container	
<b>Serving size</b>	1 can (12 fl. oz) (372g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>120</b>
% Daily Value*	
<b>Total Fat</b> 0g	0%
Saturated Fat 0g	0%
Trans Fat 0g	
<b>Cholesterol</b> 0mg	0%
<b>Sodium</b> 10mg	0%
<b>Total Carbohydrate</b> 30g	11%
Dietary Fiber 0g	0%
Total Sugars 28g	
Includes 28g Added Sugars	56%
<b>Protein</b> 0g	0%
Vitamin D 0mcg	0%
Calcium 0mg	0%
Iron 0mg	0%
Potassium 126mg	2%

Lower sugar choice

Grams of sugar saved

## 8. Unsweetened Tea

Nutrition Facts	
1 servings per container	
<b>Serving size</b>	1 can (12 fl. oz) (360g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>0</b>
% Daily Value*	
<b>Total Fat</b> 0g	0%
Saturated Fat 0g	0%
Trans Fat 0g	
<b>Cholesterol</b> 0mg	0%
<b>Sodium</b> 10mg	0%
<b>Total Carbohydrate</b> 1g	0%
Dietary Fiber 0g	0%
Total Sugars 0g	
Includes 0g Added Sugars	0%
<b>Protein</b> 0g	0%
Vitamin D 0mcg	0%
Calcium 0mg	0%
Iron 0mg	0%
Potassium 133mg	2%

\*Percent Daily Values are based on a 2,000-calorie diet. Your Daily Values may be higher or lower depending on your calorie needs.



# Think Before You Drink: Sweeteners in Drinks

Guess how many teaspoons of sugar are in each drink.

Drink	Teaspoons of Sugar	
	My Guess	True Amount
 Fruit-flavored drink, powdered, reconstituted	_____	_____
 Sparkling water	_____	_____
 Grapefruit juice	_____	_____
 Soft drinks	_____	_____
 Lemonade, fruit-flavored drink	_____	_____
 Iced tea	_____	_____
 Unsweetened coconut water	_____	_____



# How Much Sweetener and How Many Calories Are in Your Favorite Drink?



Non-alcoholic Beverages			
Drink (12-ounce serving)	Sugar* (grams)	Sugar (teaspoons)	Calories
water	0 grams	0 teaspoons	0
unsweetened tea	0 grams	0 teaspoons	0
diet cola	0 grams	0 teaspoons	0
iced coffee, 2% milk, unsweetened	2 grams	½ teaspoon	25
light lemonade	7½ grams	1⅞ teaspoons	37
café latte, whole milk	14 grams	3½ teaspoons	180
sports drink	21 grams	5¼ teaspoons	80
sweet tea	32 grams	8 teaspoons	120
powdered drink mix with sugar	33 grams	8¼ teaspoons	135
fruit punch	38⅞ grams	9⅝ teaspoons	168
lemonade	42 grams	10½ teaspoons	180
blended cold coffee drink, whole milk, caramel and chocolate syrup, whipped cream	44 grams	11 teaspoons	350
orange soda	44 grams	11 teaspoons	160
root beer	45 grams	11¼ teaspoons	160
grape juice	54 grams	13½ teaspoons	210
Alcoholic Beverages**			
1.5 ounces of 80-proof distilled spirits or liquor (40% alcohol content)			97
5 ounces of wine (12% alcohol content)			128
8 ounces of malt liquor (7% alcohol content)			139
12 ounces of beer (5% alcohol content)			155

\* There are two types of sugar in food: naturally occurring and added sugar. Fruits and milk have naturally occurring sugar. Sodas and sports drinks have added sugar. People with diabetes should limit all drinks with a lot of sugar, naturally occurring and added.

\*\* Alcoholic beverages have no or very little sugar.



# Staying Healthy With Diabetes: Real-Life Stories

## Scene 1: Harris family reunion

Saturday is the Harris family reunion. Many relatives will bring tasty foods and desserts. Harold hasn't been to a potluck meal since his health care provider told him he has diabetes. He's worked hard to change his eating habits. Now, Harold wonders what he should bring to the reunion and how he can stick to his eating plan.

**What can Harold bring to the reunion?**

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**How can Harold stick to his eating plan at the reunion?**

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**What else can Harold do?**

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# Staying Healthy With Diabetes: Real-Life Stories

(continued)

## Scene 2: Connie's new Shoes

Connie bought a new pair of shoes a week ago. She wore them 2 days in a row because her feet felt fine. When she took off her shoes at the end of the second day, however, Connie noticed some red spots on both of her feet and blisters on the big toe on her right foot. She wonders what she needs to do about the red spots and blisters on her feet. She's concerned that she didn't feel the sores on her feet. She also worries that her diabetes isn't under control.

**What can Connie do about the sores on her feet?**

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**What should people with diabetes consider when buying shoes?**

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# Staying Healthy With Diabetes: Real-Life Stories

(continued)

## Scene 3: What's wrong with Angela? What can you do?

**First visit:** When Angela and her cousin, Dawn, go shopping, Angela often has to stop to use the restroom. Dawn, a community health worker, asks her if anything is wrong. Angela says she's been more tired and thirsty lately and has to pee frequently. Even though she's physically active, Angela worries she has diabetes. She asks Dawn what to do.

**What should Dawn tell Angela?**

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**Second visit:** Angela tells Dawn that she went to the health care provider and she has diabetes. Now she's afraid.

**How can Dawn help Angela overcome her fear of having diabetes?**

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## Soul Food Makeover: Fruit Salad Recipe

<b>1 teaspoon</b>	lemon juice
<b>1 medium</b>	apple, cored and chopped
<b>1 can (8 ounces)</b>	pineapple chunks in juice, drained
<b>1 can (15 ounces)</b>	peaches in juice, drained
<b>1 cup</b>	grapes, halved
<b>½ cup</b>	plain, nonfat Greek yogurt
<b>2 tablespoons</b>	walnuts (shelled and chopped)

1. Cut up the apples and grapes.
2. Drain the pineapple chunks and peaches.
3. Combine fruit in a large bowl.
4. Stir in Greek yogurt and walnuts until combined.
5. Refrigerate and serve when chilled.



### Makes 12 servings

<b>Serving size:</b> ½ cup	<b>Sodium:</b> 6 mg
<b>Calories:</b> 65	<b>Dietary Fiber:</b> 1 g
<b>Total Fat:</b> 1 g	<b>Protein:</b> 2 g
<b>Saturated fat:</b> 0 g	<b>Total Carbohydrates:</b> 14 g
<b>Cholesterol:</b> 1 mg	<b>Total Sugars:</b> 11 g

# Make Traditional African American Dishes Heart Healthy

An illustration of two hands, one in a dark brown color and the other in a purple color, holding a red heart. The hands are positioned as if they are gently cradling the heart. The background is a solid red color.

“Of all the rocks upon which we build  
our lives, we are reminded today that  
family is the most important.”

*– Barack Obama*

# Session 8



## Make Traditional African American Dishes Heart Healthy

### Objectives

#### By the end of this session, participants will learn:

- How to plan and prepare traditional African American and soul foods in a heart healthy way
  - How to choose heart healthy foods
- 

### Materials and Supplies

#### To conduct this session, you'll need:

- *With Every Heartbeat Is Life* manual and picture cards
  - Set of measuring cups (1 cup, ½ cup, ¼ cup)
  - Blackboard and chalk, dry erase board, or several large pieces of paper, a marker, and tape
- 

### Handouts

#### Give each participant these handouts during this session:

- Alcohol and Heart Disease (pages 8.24-8.25)
- Heart Healthy Eating Plan (page 8.26)
- (Optional) Serving Sizes (from Session 6, page 6.34)
- Teaching Children About Healthy Eating and Cooking (pages 8.27-8.28)
- Soul Food Makeover: Six Traditional African American Dishes (pages 8.29-8.34)

## Before This Session

NOTE



(Optional) If you're offering a tour of a grocery store, **plan to provide** participants with the date, time, and meeting place.

NOTE



(Optional) If you decide to offer a cooking demonstration as part of this session, please **review** Activity 4: Heart Healthy Cooking Demonstrations in the Appendix (pages A.20-A.23).

- **Create** the chart shown below on a dry erase board, blackboard, or a large piece of paper that you can tape to the wall. Leave some columns blank until you do the activity in class. (Optional: Create charts for lunch and dinner meals also.)

### Breakfast

Kayla's Breakfast	Food Group <i>(Leave blank until you do the activity)</i>	Portion Size	Better Choices <i>(Leave blank until you do the activity)</i>
Scrambled egg cooked in bacon fat		1 egg	
Bacon		3 ounces (or 3 strips)	
Biscuit		1 biscuit	
Butter		1 teaspoon	
Grapefruit with sugar		½ grapefruit	
Coffee with whole milk		1 cup of coffee with 1 tablespoon of milk	

## **Session Outline**

### **Introducing the Session**

1. Welcome
2. Review of Last Week's Session
3. About This Session

### **Conducting the Session**

1. Eat a Variety of Heart Healthy Foods
2. African American and Soul Food Dishes
3. A Heart Healthy Eating Plan for African Americans
4. How To Choose Heart Healthy Foods
5. Teaching Children About Healthy Eating and Cooking
6. Soul Food Makeover: Six Traditional African American Dishes

### **Review of Today's Key Points**

### **Weekly Pledge**

### **Closing**

# Introducing the Session

## 1. Welcome

**DO**      **Welcome** participants to the session.

## 2. Review of Last Week's Session

**SAY**      At the last session, we talked about diabetes.

---

**DO**      **Review** these questions:

**Q: What is diabetes?**

A: Diabetes is when your body doesn't make enough insulin or can't use the insulin it does make effectively. That leads to too much sugar (glucose) in your blood, which causes health problems.

**Q: What increases your risk of type 2 diabetes?**

A: You're more likely to develop it if you

- Have prediabetes
- Are overweight or obese
- Are age 45 or older
- Have a family history of diabetes
- Belong to certain racial/ethnic groups, including African American
- Have a history of gestational diabetes or gave birth to a baby weighing 9 pounds or more
- Aren't physically active
- Have a history of heart disease or stroke
- Have depression
- Have polycystic ovary syndrome, also called PCOS
- Have acanthosis nigricans—dark, thick, velvety skin around your neck or armpits

**Q: What are the ABCs of diabetes control?**

A: They are:

- **A** is for the A1C blood test. It shows your average sugar level over the past 3 months. A normal A1C level is below 5.7 percent. For many people with diabetes, the goal is an A1C below 7 percent. Ask your health care provider what your goal should be.
- **B** is for blood pressure. The higher your blood pressure, the harder your heart has to work. High blood pressure increases your risk for a heart attack, stroke, and kidney and eye damage.
- **C** is for cholesterol. Keep it at healthy levels. High LDL (the “bad”) cholesterol increases your risk of having a heart attack or stroke.
- **S** is for stop smoking. Not smoking is especially important for people with diabetes. Smoking and diabetes both narrow your blood vessels, which makes your heart work harder.

**Q: How does diabetes affect your body?**

A: High sugar levels can lead to heart disease, stroke, nerve damage, and kidney, eye, dental, and foot problems. Diabetes can also affect blood flow in your legs and feet, which can lead to sores that don’t heal and even to amputation.

---

**SAY** At the end of the last session, you pledged to take one step to help you prevent or control diabetes.

---

**SAY** Please share what you did. What went well? What problems did you have? How did you try to solve them?

**NOTE**

Allow 2 minutes for participants to respond.

**SAY** Has anyone completed the family health history?

---

**DO** *(Optional)*

**Give** a prize to participants who've completed the history.

---

**ASK** Does anyone want to share what you've learned about your family health history?

**NOTE**



Allow about 5 minutes for participants to respond.

### 3. About This Session

**SAY** Former President Barack Obama said, "Of all the rocks upon which we build our lives, we are reminded today that family is the most important."

---

**ASK** What does this quote mean to you?

**NOTE**



Allow 2 to 3 minutes for participants to respond.

**SAY** What you choose to eat can make a difference to your heart health. During this session, you'll learn:

- How to choose a variety of heart healthy foods
- How to make some traditional African American and soul food dishes more heart healthy
- What a serving size is for each food group
- About the history of some traditional African American dishes and foods

# Conducting the Session

## 1. Eat a Variety of Heart Healthy Foods

**ASK** Why is it important to eat a variety of heart healthy foods?

**NOTE**



Allow about 5 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

**DO**

**Add** the answers below if the participants don't mention them.

- Eating a variety of foods that are lower in saturated fat, salt, sodium, sugar, and calories can help you have a healthy heart.
- One food can't give you all the nutrients your body needs.

### More Information

**Nutrients in the foods we eat include:**

- |                 |         |            |
|-----------------|---------|------------|
| ▪ Carbohydrates | ▪ Fats  | ▪ Vitamins |
| ▪ Protein       | ▪ Fiber | ▪ Minerals |

## 2. African American and Soul Food Dishes

**NOTE**



This session will help participants think about the foods they eat. Some favorite traditional African American and soul food dishes are very nutritious and others you can make heart healthy.

**SAY**

Soul food combines traditional African food and ways of cooking food with the African American experience in the United States, from slavery through today.

**SAY**

Let's take some time to talk about soul food:

- What does soul food mean to you?
- What foods would you call soul food?
- What are some of the soul food dishes that you and your family or friends like to eat?

**NOTE**

Allow 5 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

**ASK**

What are some foods you think our African ancestors ate?

**NOTE**

Allow 2 to 3 minutes for participants to respond.

**DO**

**Add** the foods below if they're not mentioned:

- Grains, legumes (such as beans and black-eyed peas), yams, and sorghum (a grain)
- Watermelon, pumpkin, okra, wild lemons, and oranges
- Dates, figs, eggplant, cucumber, onion, garlic, and leafy greens

**ASK**

What cooking methods do you think our African ancestors used?

**NOTE**

Allow 2 to 3 minutes for participants to respond.

**DO**

**Add** the methods below if they're not mentioned:

- Cooking dishes such as stews and soups in one pot over an open fire
- Using spices and seasonings to flavor meals and prevent spoilage

**More Information**

- Our ancestors often told stories and recited oral history while their dishes cooked for hours. This oral tradition is still a part of African American gatherings, such as Sunday dinners or family reunions.
- African Americans were resourceful during slavery and created meals with few provisions. We use some of these cooking methods today.
- African Americans were skilled at using leftovers, such as making croquettes with leftover salmon. Today, we might make salmon croquettes for a special occasion, not just when we have leftovers.

**Examples of common African American foods and dishes:**

- Breads and grains, such as cornbread, biscuits, and cornbread stuffing (dressing)
- Pea, bean, and nut dishes, such as succotash (a corn and lima bean dish), black-eyed peas, butterbeans, “Hoppin’ John” (a dish usually made with black-eyed peas, a meat, and rice), field peas, and peanuts
- Rice and pasta dishes, such as red beans and rice, jambalaya, and baked macaroni and cheese
- Vegetable dishes, such as green beans, collard greens, coleslaw, candied yams, potato salad, cabbage, okra, squash, and sweet potato pie
- Meat and poultry dishes, such as chicken gumbo, meatloaf, pork chops (loin or lean varieties), and chicken creole
- Fish and fish dishes, such as catfish stew, whiting, porgie, and mackerel
- Fruits, such as peaches and bananas

**SAY** To make lasting life changes, you need to start slowly. Our “Soul Food Makeover” recipes can help you prepare traditional African American meals in heart healthy ways. I’ll give you more recipes later in the session. Try each recipe to see how you like it, and then put them all together for a delicious and heart healthy feast.

#### More Information

- We may prepare soul food dishes a little differently, depending on what foods and ingredients we have on hand.
- Traditional recipes were passed down orally, so there’s no “correct” way to prepare dishes.
- Apply the heart healthy cooking skills we’ve been learning to your family recipes.

### 3. A Heart Healthy Eating Plan for African American Families

**SAY** We can improve the way we eat and still enjoy our traditional dishes. The first step is to learn which foods to eat more often. The second step is to learn how much of these foods to eat each day. A heart healthy eating plan will help you accomplish that.

**SAY** But before we talk about healthy eating, I want to take a minute to talk about alcohol.

As we learned in Session 7, which was about diabetes, many drinks, including alcoholic beverages, have a lot of calories. But did you know that alcohol can also be hard on your heart?

**DO** **Give** each participant the “Alcohol and Heart Disease” handout (pages 8.24-8.25).



HANDOUT

**SAY** More African Americans than whites don't drink. But overall African Americans who do drink alcohol consume more, do more binge drinking, and are more likely to develop alcohol-related liver disease, compared to whites.

Please take a few minutes to read the handout. The handout has information about where to go for more information or help. Share it with your family or friends.

**DO** **Show** picture card 8.1.  
(Keep it in view throughout this activity.)



**SAY** A heart healthy eating plan includes types of foods to choose for better health, as well as recommended amounts of those foods.

**NOTE**



**Give** each participant the "Heart Healthy Eating Plan" handout (page 8.26).

*(Optional)* **Give** each participant the "Serving Sizes" handout from Session 6 (page 6.34).



**SAY** We'll talk about ways to choose healthy foods. We'll also discuss the recommended number of servings for each food group if you're eating 2,000 calories a day. (The amount of calories you should have depends on your age, gender, activity level, and more.)

## Grains

### SAY

For grains:

- Have 5 to 8 servings a day.
- Make at least half of your grains whole grains. Eat whole grain cereals, breads, rice, or pasta every day.
- Look at the food label. Choose foods that have whole grains, such as whole wheat, whole oats, oatmeal, or whole rye, as the first ingredient.
- For a change, try brown rice or whole wheat pasta instead of white rice or pasta.
- Snack on ready-to-eat, whole grain cereal, such as toasted oat cereal, instead of high-fat, high-salt snacks. Try popcorn with little or no salt or butter.

### NOTE



When you ask questions about serving size, **hold up** the correct measuring cup for each answer.

### Q: What equals one serving from the grains group?

A: One serving is:

- 1 slice of bread
- About 1 ounce dry cereal (which is between  $\frac{1}{2}$  cup and  $1\frac{1}{4}$  cups, depending on your type of cereal. Check the nutrition label.)
- $\frac{1}{2}$  cup cooked rice, pasta, or cereal

## Vegetables

**SAY**

For vegetables:

- Have 2 to 3 servings (cups) a day.
- Eat different color vegetables. Try green vegetables, such as green beans, broccoli, okra, and greens, and orange vegetables, like carrots, squash, and sweet potatoes.
- Eat nuts and legumes, such as lima beans and black-eyed peas.
- Stock up on frozen vegetables for quick and easy cooking.
- Fresh vegetables in season cost less than other vegetables and can taste great.
- Even if you're not a vegetarian, plan some meals around a vegetable main dish, such as vegetable stirfry or soup.
- Choose no-salt-added canned vegetables.

### **Q: What is one serving of a vegetable?**

A: One serving is:

- 1 cup cut-up cooked or raw vegetable
- 1 cup cooked, 2 cups raw, leafy greens (including spinach and dark green lettuce)

## Fruits

**SAY**

For fruits:

- Have 2 to 3 servings (1½ to 2 cups) a day.
- Choose fresh, frozen, canned (in fruit juice), or dried fruit.
- Drinking fruit juice can add a lot of calories and sugar to your day. Instead, eat whole fruit, such as oranges, apples, or mangos. If you do have juice, choose brands that say “100% juice” on the label.
- Keep a bowl of fruit on the table, counter, or in the refrigerator.

### **Q: What is one serving of fruit?**

A: One serving is:

- 1 medium apple, banana, or orange
- ½ cup fresh, frozen, or canned fruit or 100% fruit juice

## Fat-free or low-fat dairy products

**SAY** For fat-free or low-fat dairy products:

- Have 2 to 3 servings (cups) a day.
- If you usually use whole milk, switch gradually to fat-free milk. First try reduced-fat (2%) milk, then low-fat (1%), and then fat-free milk.
- Have fat-free or low-fat yogurt for a snack.
- If you're lactose intolerant, try products such as yogurt and lactose-free milk.

### **Q: How much milk, yogurt, or cheese is in one serving?**

A: One serving is:

- 1 cup milk or yogurt
- 1½ ounces cheese

## Protein foods

**SAY** For protein foods:

- Have 5 to 6½ servings a day.
- Beans, nuts, seeds, peas, and soy products (such as tofu) are rich sources of protein and fiber.
- If you eat meat, choose low-fat or lean meats, poultry, or seafood.
- For lunch meats, choose lean turkey, roast beef, or ham instead of fatty lunch meats such as regular bologna or salami. Also, look for low-sodium varieties.
- Try roasting, braising, broiling, baking, stewing, poaching, or simmering your meat or fish instead of frying.
- Eat a variety of foods rich in protein.
- Fish is generally healthy, but pregnant women and children should avoid or limit some types of fish, such as swordfish, that contain mercury.

**Q: What is one serving of protein?**

A: One serving is:

- 1 ounce lean meat, poultry, or seafood
- 1 egg
- 1 tablespoon peanut butter
- ¼ cup cooked beans or peas
- ½ ounce nuts or seeds

**Fats and oils**

**SAY** For fats and oils:

- Limit to 2 to 3 servings (5 to 7 teaspoons) per day.
- Get most of your fat from food sources such as fish, nuts, and vegetable oils.
- Don't eat too much solid fat (such as butter, shortening, or lard), coconut and other tropical oils, or foods that have those fats in them.

**Sweets and added sugars**

**SAY** For sweets and added sugars:

- Limit the amount of added sugar in your diet. Talk to your health care provider about how much is okay for you.
- Choose foods and beverages that are low in calories and sweeteners. Read labels to compare the calorie and sugar content of foods and beverages.
- Choose water, fat-free milk, or other unsweetened beverages most often.
- Have unsweetened cereal with fresh fruit or canned fruit in fruit juice (not syrup).

## 4. How To Choose Heart Healthy Foods

**SAY** We're going to do a group activity. During this activity, we'll learn how to make better food choices.



**NOTE**



**Use** the chart you created before class, shown below. *(Optional)* **Do** the activity for lunch and dinner also.

**ASK**

Which group does each food belong to? What changes would make Kayla's breakfast more heart healthy?

**NOTE**



**Write** the answers beside the foods they're replacing on the blackboard, dry erase board, or large piece of paper taped to the wall.

### Breakfast

<b>Kayla's Breakfast</b>	<b>Food Group</b> <i>(Fill in during the activity)</i>	<b>Portion Size</b>	<b>Better Choices</b> <i>(Fill in during the activity)</i>
Scrambled egg cooked in bacon fat	Protein	1 egg	Boiled or poached egg, ¼ cup egg substitute, or 2 egg whites. Cooked with vegetable oil
Bacon	Protein	3 ounces (or 3 strips)	Lean turkey bacon
Biscuit	Grains	1 biscuit	Whole grain toast or English muffin
Butter	Fats and oils	1 teaspoon butter	1 teaspoon soft tub margarine, a nut butter, or jam with no added sugar
Grapefruit with sugar	Fruit	½ grapefruit	Grapefruit, unsweetened or with cinnamon or sugar substitute
Coffee with whole milk	Dairy	1 cup of coffee with 1 tablespoon of milk	Coffee with 2 tablespoons low-fat (1%) milk

**(Optional) Lunch**

<b>Kayla's Lunch</b>	<b>Food Group</b> <i>(Fill in during the activity)</i>	<b>Portion Size</b>	<b>Better Choices</b> <i>(Fill in during the activity)</i>
Large cheeseburger with lettuce, tomato, and mayonnaise	Protein, grains, dairy, vegetables, fats and oils	1 large cheeseburger	Small hamburger without mayonnaise, grilled chicken sandwich with mustard or ketchup, or, better yet, turkey sandwich on whole grain bread with lettuce, tomato, and mustard
Super-size French fries	Vegetables, fats and oils	1 large serving fries	Small order of fries or, better yet, a side salad with reduced-calorie salad dressing
Large soft drink	*Sweets	1 large soft drink	Diet soft drink or, better yet, water or fat-free milk

**(Optional) Dinner**

<b>Kayla's Dinner</b>	<b>Food Group</b> <i>(Fill in during the activity)</i>	<b>Portion Size</b>	<b>Better Choices</b> <i>(Fill in during the activity)</i>
Fried pork chop with onions	A protein, vegetables, fats and oils	1 pork chop with ¼ cup onions	Baked pork chop, with onions sautéed in vegetable oil
White rice and gravy	Grains, fats and oils	½ cup cooked rice with 1 teaspoon gravy	Brown rice with peas and carrots
Collard greens with ham hocks	Vegetables, protein, fats and oils	1 cup collard greens with 1 piece of ham hock	Collard greens cooked with skinless, smoked turkey breast
Sweetened iced tea	*Sweets	1 cup tea	Unsweetened iced tea or tea with sugar substitute
Sweet potato pie	Grains, fats and oils, sugar, vegetables	1 slice pie	Fresh fruit cup or heart healthy sweet potato pie (See Soul Food Makeover recipe on page 276.)

\* Sugar and other sweeteners don't belong to any of the official food groups.

**ASK** What are some ways to eat less saturated fat and sodium and fewer calories?

**DO** **Add** the following answers if they're not mentioned:

- When shopping:
  - Choose a variety of whole grains, fruits, and vegetables.
  - Choose low-fat or fat-free milk products, salad dressings, and mayonnaise.
  - Choose lean cuts of meat. Trim away extra fat.
  - Read food labels to choose foods lower in saturated fat, sodium, sugar, and calories.
- When cooking:
  - Drain the fat off of cooked meat.
  - Use vegetable oil instead of butter or lard.
  - Use low-fat cooking methods, such as baking, roasting, poaching, simmering, stewing, or broiling (without added fat), rather than frying.
- When eating:
  - Cut back on fats, oils, and sweets.
  - Remove and throw away the chicken skin.
  - Choose low-fat or fat-free milk products, salad dressings, and mayonnaise.
- Limit high-calorie, low-nutrition foods, such as high-fat lunch meats, pies, cakes, cookies, crackers, chips, and sugary drinks (such as soda, sweetened iced tea, or energy drinks). Check the label if you're unsure.
- Eat smaller portions.

**SAY** Now you can make healthier choices for you and your family!

## 5. Teaching Children About Healthy Eating and Cooking

DO **Give** participants the “Teaching Children About Healthy Eating and Cooking” handout (pages 8.27-8.28).



DO **Ask** for volunteers to read the handout out loud.

**SAY** You can teach children in your lives how to develop healthy eating habits that will last a lifetime.

For good health and proper growth, children need to eat a variety of different foods every day. When you offer children healthy foods every day, they're more likely to have good eating habits.

One way to get children interested in healthy eating is for them to help you prepare meals.

**ASK** What are some ways children can help in the kitchen?

DO **Write down** participants' suggestions so everyone can see them.

### More Information

The Delicious Heart Healthy Eating website at [healthyeating.nhlbi.nih.gov](http://healthyeating.nhlbi.nih.gov) has:

- Tasty, heart healthy recipes from cuisines from around the world
- Tips on shopping, cooking, and eating healthfully

## 6. Soul Food Makeover: Six Traditional African American Dishes



### NOTE



This activity will give participants a chance to try heart healthy recipes at home.

### DO

**Give** participants the “Soul Food Makeover: Six Traditional African American Dishes” handout (pages 8.29-8.34).



### SAY

We’ve given six traditional recipes a “makeover” for your heart. Here’s how we improve them:

- For the sweet potato pie, we replace butter and whole milk with vegetable oil and fat-free milk.
- The macaroni and cheese uses evaporated fat-free milk, vegetable oil, and reduced-fat cheese instead of whole milk, butter, and regular cheese.
- For the yams, we use soft tub margarine instead of butter.
- Instead of frying the chicken we bake it and remove the skin.
- We cook the green beans without salt or high-fat meats, such as fatback, salt-pork, ham hocks, or bacon. We use vegetable oil to sauté the onions.
- The cornbread has fat-free or low-fat (1%) buttermilk instead of whole buttermilk, and soft tub margarine instead of butter.

### SAY

See how small changes can make traditional dishes more heart healthy? Try our recipes, or experiment with your own using these substitutions.

## Review of Today's Key Points

**SAY** Let's review what we learned today.

---

**ASK** **What is heart healthy about the traditional African American diet?**

- The traditional African American diet provides a variety of foods that are lower in fat and sodium, such as peas, greens, rice, vegetables, fruits, poultry, fish, and milk products.

**What are some foods that we should eat less often?**

- We should limit foods that are high in fat, sodium, sugar, low-nutrient carbohydrates, and calories, including:
  - High-fat foods like fried fish, fried chicken, fatty meats, and high-fat cheeses
  - Salty foods like potato chips and cured meats
  - High-sugar, high-fat foods like pastries, pies, sweet buns, cookies, and chocolate
  - Sugary foods like candy and sweet drinks
  - High-carb, low-nutrient foods, such as white bread or white rice

**How can you use the heart healthy eating plan to choose foods?**

- Use the heart healthy eating plan to choose foods from each of the five food groups. The eating plan also shows the amount you need from each group every day.
- When you know the amount of food you need every day, it can help you get the right amount of calories.



PLEDGE

## Weekly Pledge

**SAY** You've learned a lot today about how to make favorite dishes in a heart healthy way. Please think of one change you can make in your everyday life to eat in a heart healthy way, including with your family or friends. This will be your pledge for the week.

**SAY** Be specific about **what** you plan to do, **how** you'll do it, and **when** you'll start. Here are some examples:

- I'll make roast chicken instead of fried chicken for the next family meal.
- I'll eat one more vegetable and one more fruit each day, starting tomorrow.

### NOTE



Allow 5 minutes for participants to respond.

**SAY** Would anyone like to share your pledge with the group?

### NOTE



Write down the pledge ideas so everyone can see them.

**SAY** *(Optional)*

Keeping a personal value in mind can help you make heart healthy eating a part of your life. Remember that a personal value is a quality that's important to you.

Today's value is fun. Fun can help you stay positive in your efforts to improve your health and the health of your family. As former President Obama said, "Of all the rocks upon which we build our lives, we are reminded today that family is the most important."

Fun can help you and your family overcome challenges and motivate you to turn your pledges into permanent habits.

**ASK** How could you use fun or another value to help you keep your pledge?

**NOTE**

Allow 3 minutes for participants to share their thoughts.

**SAY** We'll discuss the results of your pledges next week. Don't forget to work on your pledges to be more physically active; to cut back on sodium, sugar, and saturated fat; to reach and keep a healthy weight; and to prevent or control diabetes. Our list has gotten pretty long, hasn't it? But you've learned a lot, and I know you can do it.

## Closing

**SAY** Thank you for coming today. What did you think of today's session?

**NOTE**

Allow a moment for participants to share their thoughts.

**SAY** I'm looking forward to seeing you again at the next session. We'll talk about eating in a heart healthy way—even when time or money is tight.

**NOTE**

**Think** about today's session. What worked and what didn't work? Have you made any changes in your own life that were covered in today's session?



## Alcohol and Heart Disease

Something you may not have thought about that can affect your heart is alcohol. Drinking too much—on a single occasion or over time—can take a serious toll on your health. More African Americans than whites don't drink. But African Americans who do drink consume more, do more binge drinking, and are more likely to develop alcohol-related liver disease.

### How Alcohol Affects Your Heart

Long-term alcohol misuse is a leading cause of heart disease.

#### Alcohol can increase your risk of:

- High blood pressure
- Arrhythmias, which are an irregular heart rhythm or rate. Even modest amounts of alcohol can trigger atrial fibrillation, a common type of arrhythmia, in some people.
- Stroke
- Alcoholic cardiomyopathy, which is when the heart muscle becomes enlarged, thick, or rigid
- Heart failure, which is when the heart can't pump enough blood to meet the body's needs

**Alcohol also affects your brain, liver, pancreas, immune system, and increases your risk of cancer.**

### Is Any Alcohol Okay?

Many people should not drink alcohol. Some medications and medical conditions make drinking alcohol more risky. Pregnant women shouldn't drink and older people need to consider that aging lowers their tolerance for alcohol. If you have concerns about your health and alcohol use, talk with your health care provider.

If you choose to drink alcohol, do so only in moderation. That means no more than one drink per day for women and two drinks per day for men. To learn more about what is a typical drink or how much alcohol is in different drinks, go to [www.rethinkingdrinking.niaaa.nih.gov](http://www.rethinkingdrinking.niaaa.nih.gov).





# Alcohol and Heart Disease (continued)

## The Danger of Alcohol for Women

Women are more susceptible to alcohol-related heart disease than men are, even though they may consume less alcohol over their lifetime. One reason is that women generally weigh less than men and have less water in their body, so their blood alcohol levels get higher with less alcohol.

For women who are pregnant or trying to get pregnant, it's important not to drink. Alcohol in the mother's blood passes to the fetus. Drinking alcohol during pregnancy can cause a miscarriage or stillbirth. It can also cause the baby to have lifelong physical, behavioral, and intellectual disabilities, known as fetal alcohol spectrum disorders.

## For more information

Visit the National Institute on Alcohol Abuse and Alcoholism website at [www.niaaa.nih.gov](http://www.niaaa.nih.gov) for more information on alcohol and health.

For tips and tools to better understand your drinking patterns and for help to cut back if necessary, visit Rethinking Drinking at [www.rethinkingdrinking.niaaa.nih.gov](http://www.rethinkingdrinking.niaaa.nih.gov).

For immediate help see [www.asam.org](http://www.asam.org) or [www.alcoholtreatment.niaaa.nih.gov](http://www.alcoholtreatment.niaaa.nih.gov).



# Heart Healthy Eating Plan\*

## Food Group

## Heart Healthy Options



### Whole Grains

Bread, cereal, starchy vegetables, rice, and pasta (6 ounces for women and 8 ounces for men)

- ♥ Whole grain versions of sliced bread, sandwich buns, dinner rolls, pita, English muffins, bagels
- ♥ Unsalted, low-fat crackers (such as graham crackers), pretzels, and popcorn
- ♥ Cooked hot cereals (not instant) and whole grain cold cereals
- ♥ Rice and pasta (such as whole grain noodles, spaghetti, and macaroni)



### Vegetables

(without added fat) (2½ cups)

- ♥ Fresh, frozen, or no-salt-added canned vegetables (such as green beans, string beans, carrots, cabbage, tomatoes, squash, broccoli, and okra)



### Fruits

(2 cups)

- ♥ Fresh, frozen, canned (in fruit juice rather than syrup), or dried fruits



### Fat-free or low-fat milk and milk products

(3 cups) Milk, yogurt, and cheese (choose fat-free or low-fat more often)

- ♥ Fat-free or low-fat (1%) milk
- ♥ Fat-free or low-fat yogurt
- ♥ Cheeses lower in fat and sodium



### Protein

Meat, poultry, fish, eggs, nuts, seeds, and legumes (5 ½ ounces)

- ♥ Chicken or turkey without the skin
- ♥ Fish
- ♥ Lean cuts of beef, such as round, sirloin, chuck, loin, and extra-lean ground beef
- ♥ Lean cuts of pork, such as the leg, shoulder, tenderloin, and lean ham
- ♥ Eggs
- ♥ Cooked dry beans and peas (such as field peas, crowder peas, black-eyed peas)
- ♥ Frozen butter beans and lima beans
- ♥ Nuts and seeds



### Fats and oils

(less than 22 grams of saturated fat)

- ♥ Soft tub margarine
- ♥ Oils (canola, corn, safflower, olive, peanut, or sesame)



### Sweets and added sugars

Limit your intake of sugar and other sweeteners. Ask your health care provider about how much sugar or other sweetener is okay for you.

- ♥ Frozen desserts (such as frozen juice pops, low-fat frozen yogurt, or low-fat ice cream)
- ♥ Low-fat cake and cookies (such as angel food cake, fig bar cookies, gingersnaps, animal crackers, vanilla wafers, and graham crackers)

\*Serving sizes depend on how many calories you need, which is based on your age, gender, and physical activity.



# Teaching Children About Healthy Eating and Cooking

## Get Children Interested

Getting children interested in cooking helps them have healthy eating habits and try new foods. Children often enjoy cooking and eating the food they make. While you prepare a meal together, talk about healthy eating.



**Keep foods that are choking hazards away from small children.**

## Let Children Help

Here are ways children of different ages can help in the kitchen.

### 2-year-olds can:

- Wipe tabletops
- Scrub and rinse fruits and vegetables
- Tear lettuce or greens
- Break cauliflower
- Bring ingredients from one place to another

### 3-year-olds can:

- Wrap potatoes in foil for baking
- Knead and shape dough
- Mix ingredients
- Pour liquids
- Shake liquids in a covered container
- Apply soft spreads
- Put things in the trash, recycle, or compost bin

### 4-year-olds can:

- Peel oranges or hard-boiled eggs
- Mash bananas or cooked beans with a fork
- Cut parsley and green onions with kid-safe scissors
- Set the table

### 5 to 6-year-olds can:

- Measure ingredients
- Use an egg beater

### Keep in Mind

- 1** Make sure children wash their hands before and after helping in the kitchen.
- 2** Be patient with spills and mistakes. Your goal is to help children learn about healthy eating.



# Teaching Children About Healthy Eating and Cooking (continued)

## Let Them Be Creative

Let children make a new snack or sandwich from three or four healthy foods



### Start with one or two of the following:

- A new kind of bread (whole grain )
- Whole grain crackers
- Mini rice cakes or low-sodium popcorn cakes
- Small, whole grain bagels
- Small pieces of whole wheat pita bread

### Spreads could include:

- Low-fat cream cheese or cheese spread
- Low-fat peanut butter
- Bean dip
- Jelly or jam with no sugar added

### Toppings could include:

- Slices of apple or banana
- Raisins or other dried fruit
- Strawberries
- Slices of cucumber or squash
- Cherry tomatoes, sliced
- Slices of cheese or hard-boiled egg

### Keep in Mind

- 1 When you help children make a new snack or sandwich, talk about why it's healthy.
- 2 Tell them the food groups that make up their snack or sandwich. Explain that eating a variety of foods is healthy.
- 3 Ask why the snack or sandwich tastes good. Is it sweet, juicy, chewy, or crunchy?

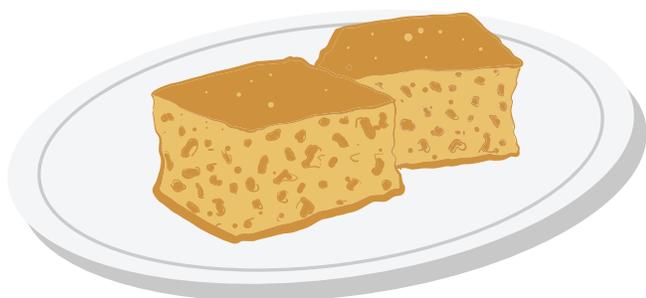


## Six Traditional African American Dishes

### Soul Food Makeover: Good-for-You Cornbread

<b>1 cup</b>	cornmeal
<b>1 cup</b>	flour
<b>¼ cup</b>	white sugar
<b>1 teaspoon</b>	baking powder
<b>1 cup</b>	fat-free or low-fat (1%) buttermilk
<b>1 medium</b>	egg, whole
<b>¼ cup</b>	soft tub margarine vegetable oil (to coat baking pan)

1. Preheat oven to 350° F.
2. Mix together cornmeal, flour, sugar, and baking powder.
3. In another bowl, combine buttermilk and egg. Beat lightly.
4. Slowly add buttermilk and egg mixture to the dry ingredients.
5. Add margarine and mix by hand or with a mixer for 1 minute.
6. Grease an 8-inch by 8-inch baking dish with vegetable oil. Bake 20 to 25 minutes. Cool. Cut into 10 servings.



#### Makes 10 servings

<b>Serving size:</b> 1 piece	<b>Dietary Fiber:</b> 1 g
<b>Calories:</b> 178	<b>Protein:</b> 4 g
<b>Total Fat:</b> 6 g	<b>Total Carbohydrates:</b> 27 g
<b>Saturated Fat:</b> 1 g	<b>Potassium:</b> 132 mg
<b>Cholesterol:</b> 22 mg	
<b>Sodium:</b> 94 mg	



## Six Traditional African American Dishes

### Soul Food Makeover: Heart Healthy Sweet Potato Pie

#### Crust Ingredients

<b>1¼ cups</b>	flour
<b>¼ teaspoon</b>	sugar
<b>⅓ cup</b>	fat-free milk
<b>2 tablespoons</b>	vegetable oil

#### Filling Ingredients

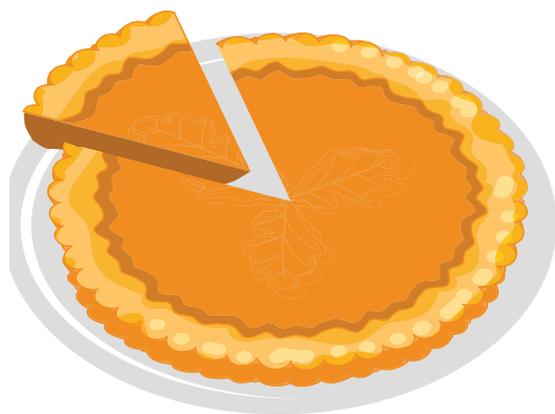
<b>¼ cup</b>	white sugar
<b>¼ cup</b>	brown sugar
<b>½ teaspoon</b>	salt
<b>¼ teaspoon</b>	nutmeg
<b>3 large</b>	eggs, beaten
<b>¼ cup</b>	evaporated fat-free milk, canned
<b>1 teaspoon</b>	vanilla extract
<b>3 cups</b>	sweet potatoes (cooked and mashed)

#### Crust Preparation

1. Preheat oven to 350° F.
2. Combine flour and sugar in a bowl.
3. Add milk and oil to flour mixture.
4. Stir with fork until mixed. Then form pastry into a smooth ball with your hands.
5. Roll the ball between two 12-inch squares of waxed paper using short, brisk strokes until pastry reaches edge of paper.
6. Peel off top paper and invert crust into 9-inch pie plate.

#### Filling Preparation

1. Combine sugars, salt, spices, and eggs.
2. Add milk and vanilla. Stir.
3. Add sweet potatoes and mix well.
4. Pour mixture into pie crust.
5. Bake for 60 minutes or until crust is golden brown.
6. Cool and cut into 16 slices.



#### Makes 16 servings

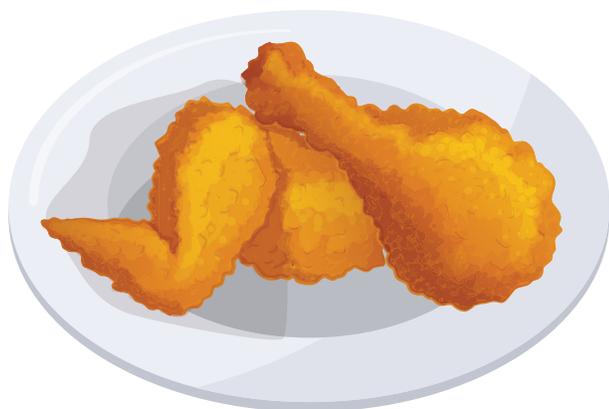
<b>Serving size:</b> 1 slice	<b>Dietary Fiber:</b> 2 g
<b>Calories:</b> 147	<b>Protein:</b> 4 g
<b>Total Fat:</b> 3 g	<b>Total Carbohydrates:</b> 27 g
<b>Saturated Fat:</b> 1 g	<b>Potassium:</b> 293 mg
<b>Cholesterol:</b> 40 mg	
<b>Sodium:</b> 98 mg	



## Six Traditional African American Dishes

### Soul Food Makeover: Crispy Oven-Fried Chicken

<b>½ cup</b>	fat-free milk or buttermilk
<b>1 teaspoon</b>	poultry seasoning
<b>1 cup</b>	cornflakes, crumbled (or breadcrumbs)
<b>1½ tablespoons</b>	onion powder
<b>1½ tablespoons</b>	garlic powder
<b>2 teaspoons</b>	black pepper
<b>2 teaspoons</b>	dried hot pepper, crushed
<b>1 teaspoon</b>	ginger, ground
<b>8 pieces</b>	chicken, skinless (4 breasts, 4 drumsticks)
<b>¼ teaspoon</b>	paprika



1. Preheat oven to 350° F.
2. Add ½ teaspoon of poultry seasoning to milk.
3. Combine remaining ½ teaspoon of poultry seasoning and all other spices, except paprika, with corn flake crumbs (or breadcrumbs), and place in a plastic bag.
4. Dip chicken into milk, shake to remove excess liquid, then quickly shake chicken in the bag with seasoning and crumbs.
5. Refrigerate for 1 hour.
6. Remove from refrigerator and sprinkle lightly with paprika for color.
7. Place chicken on wire rack, and place rack on top of a baking pan that you have lined with foil. The chicken pieces should be spaced evenly apart.
8. The crumbs will form a crispy “skin.” Don’t turn the chicken during baking.
9. Bake 40 minutes. Rotate the pan and continue baking for an additional 30 to 40 minutes or until the meat can be easily pulled away from the bone with a fork. The juices should run clear and the meat should not be pink. The drumsticks may require less baking time than the breasts.

#### Makes 6 servings

<b>Serving size:</b> ½ breast or 2 small drumsticks	<b>Sodium:</b> 286 mg
<b>Calories:</b> 256	<b>Dietary Fiber:</b> 1 g
<b>Total Fat:</b> 5 g	<b>Protein:</b> 30 g
<b>Saturated Fat:</b> 1 g	<b>Total</b>
<b>Cholesterol:</b> 34 mg	<b>Carbohydrates:</b> 22 g
	<b>Potassium:</b> 339 mg



## Six Traditional African American Dishes

### Soul Food Makeover: Flavorful Green Beans

<b>2 pounds</b>	fresh green beans
<b>1/3 cup</b>	chopped onions
<b>2 cloves</b>	garlic, chopped
<b>1/2 teaspoon</b>	black pepper
<b>1 teaspoon</b>	dried basil
<b>1 teaspoon</b>	vegetable oil

1. Rinse green beans, and snap tips off.
2. Steam the green beans for 5-7 minutes.
3. Sauté chopped onions in vegetable oil for 5-7 minutes or until they are tender and very lightly browned.
4. Add green beans, garlic, and ground black pepper to onions, sauté for another 3-5 minutes or until green beans are tender but not soft.
5. Sprinkle dried basil flakes over green beans, and serve.



#### Makes 7 servings

Serving size: 1 cup

Calories: 46

Total Fat: 1 g

Saturated Fat: 0 g

Cholesterol: 0 mg

Sodium: 12 mg

Dietary Fiber: 4 g

Protein: 2 g

Total  
Carbohydrates: 9 g

Potassium: 179 mg

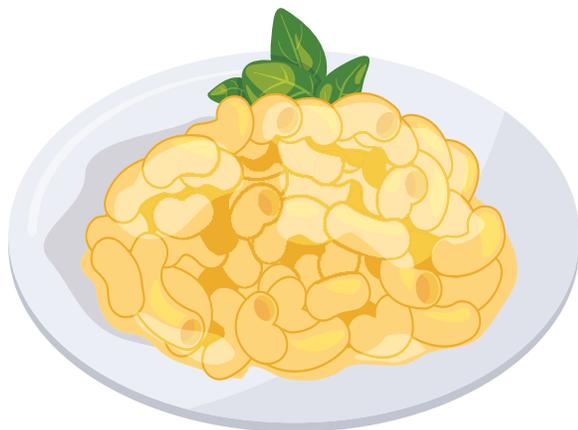


## Six Traditional African American Dishes

### Soul Food Makeover: Baked Macaroni and Cheese

<b>2 cups</b>	macaroni
<b>½ cup</b>	chopped onions
<b>½ cup</b>	evaporated, fat-free milk
<b>1 medium</b>	egg, beaten
<b>¼ teaspoon</b>	black pepper
<b>1 ¼ cups (4 oz.)</b>	reduced-fat, natural, sharp cheddar cheese, shredded

1. Cook macaroni according to package directions. (Don't add salt to the cooking water.) Drain and set aside.
2. Preheat oven to 350° F.
3. Heat 1 teaspoon of oil in saucepan.
4. Add onions to saucepan and sauté for about 3 minutes.
5. In another bowl, combine macaroni, onions, and the remaining ingredients. Mix thoroughly.
6. Transfer mixture into casserole dish.
7. Bake for 25 minutes or until bubbly. Let stand for 10 minutes before serving.



#### Makes 8 servings

<b>Serving size:</b> ½ cup	<b>Dietary Fiber:</b> 1 g
<b>Calories:</b> 205	<b>Protein:</b> 11 g
<b>Total Fat:</b> 5 g	<b>Total Carbohydrates:</b> 29 g
<b>Saturated Fat:</b> 2 g	<b>Potassium:</b> 119 mg
<b>Cholesterol:</b> 34 mg	
<b>Sodium:</b> 120 mg	



## Six Traditional African American Dishes

### Soul Food Makeover: Candied Yams

<b>3 medium</b>	yams (1½ cups)
<b>¼ cup</b>	brown sugar, packed
<b>1 teaspoon</b>	flour
<b>¼ teaspoon</b>	salt
<b>¼ teaspoon</b>	ground cinnamon
<b>¼ teaspoon</b>	ground nutmeg
<b>¼ teaspoon</b>	orange peel, grated
<b>1 teaspoon</b>	soft tub margarine
<b>½ cup</b>	orange juice

1. Preheat oven to 350° F.
2. Cut yams in half, and boil until tender but firm (about 20 minutes). When cooled enough to handle, peel and slice into ¼-inch slices.
3. Combine sugar, flour, salt, cinnamon, nutmeg, and grated orange peel.
4. Place half of the sliced yams in the dish. Sprinkle with spiced sugar mixture.
5. Dot with half the amount of margarine.
6. Add a second layer of yams, using the rest of the ingredients in the same order as above. Add orange juice.
7. Bake uncovered in oven for 20 minutes.



#### Makes 6 servings

<b>Serving size:</b> ¼ cup	<b>Dietary Fiber:</b> 2 g
<b>Calories:</b> 110	<b>Protein:</b> 1 g
<b>Total Fat:</b> <1 g	<b>Total</b>
<b>Saturated Fat:</b> <1 g	<b>Carbohydrates:</b> 25 g
<b>Cholesterol:</b> 0 mg	<b>Potassium:</b> 344 mg
<b>Sodium:</b> 115 mg	

# **Eat Heart Healthy—** Even When Time or Money Is Tight



“Victory is very, very sweet. It tastes better than any dessert you’ve ever had.”

—*Serena Williams*

# Session 9



## Eat Heart Healthy— Even When Time or Money Is Tight

### Objectives

**By the end of this session, participants will learn tips to:**

- Make mealtimes easier
- Eat out in a heart healthy way
- Save money on food bills

---

### Materials and Supplies

**To conduct this session, you'll need:**

- *With Every Heartbeat Is Life* manual and picture cards
- Blackboard and chalk, dry erase board, or several large pieces of paper, a marker, and tape
- Pencils

---

### Handouts

**Give each participant these handouts during this session:**

- Tips for Busy People (page 9.21)
- Lakisha's Dilemma (page 9.22)
- Tips for Eating Out the Heart Healthy Way (page 9.23)
- Lakisha's Monthly Food Budget (page 9.24)
- Your Monthly Food Budget (pages 9.25)
- Money-Saving Tips (page 9.26)
- Shopping List (pages 9.27-9.28)
- Soul Food Makeover: Catfish Stew and Rice Recipe (page 9.29)

## Before This Session

- Gather examples of food advertisements, from magazines or online, that focus on the themes of family, health, sex appeal, humor, appearance, or famous people.
  - Create the nutrition display, Making the Best Choice in Fast Food Places. (See page A.18 in the Appendix.)
- 

## Session Outline

### Introducing the Session

1. Welcome
2. Review of Last Week's Session
3. About This Session

### Conducting the Session

1. Eating in a Heart Healthy Way When You're Short on Time
  - A. Busy Times
  - B. Quick and Easy Meal Tips
  - C. Eating Out
2. Saving Money on Your Food Bill
  - A. Food Budget
  - B. Money-Saving Tips
3. Food Advertising Activity
4. Soul Food Makeover: Catfish Stew and Rice Recipe

### Review of Today's Key Points

### Weekly Pledge

### Closing

# Introducing the Session

## 1. Welcome

DO **Welcome** participants to the session.

## 2. Review of Last Week’s Session

### NOTE



After each of the following questions, allow about 3 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

If participants went on a grocery store tour, **ask** them what they learned from the tour.

**SAY** At the last session, we talked about how to make traditional African American dishes in a heart healthy way. What do you remember is heart healthy about the traditional African American diet?

DO **Add** the following if participants don’t mention them:

- The traditional African American diet has a lot of healthy foods that are low in fat and sodium, such as:
  - Greens, sweet potatoes, and fruits
  - Whole grains, such as rice and millet
  - Butter beans, lima beans, and black-eyed peas
  - Chicken, fish, and some milk products

**ASK** What are some foods that we should eat less often?

DO **Add** the following if participants don’t mention them:  
We should limit foods that have a lot of saturated fat, sodium, and sugar.

Here are examples of those foods:

- High-fat foods, like fried fish, fried chicken, fatty meats, and high-fat cheeses
- Salty foods, like potato chips and cured meats
- High-fat and high-sugar foods, like pastries, pies, honey buns, cookies, and chocolate
- Sugary foods, like candy, soft drinks, sweetened iced tea, and energy drinks

---

**ASK** How can you use the heart healthy eating plan to choose heart healthy foods?

---

**DO** **Say** the following if participants don't mention them:  
Use the plan to select foods from each food group that are lower in saturated fat, sodium, and sugar.  
Use the plan to see how much you need from each group every day.

---

**ASK** Why is it helpful to know how much to eat from each food group?

---

**DO** **Say** the following if participants don't:  
Knowing the amount of food you need helps you get the right amount of calories and nutrients every day.

---

**ASK** How are you doing on your pledges to eat in a heart healthy way? What went well? What kinds of problems did you have? Maybe your family didn't like some of the changes. How did you solve the problems?

---

**ASK** Has anyone completed the family health history?

**NOTE**



(Optional) **Give** a prize to participants who've completed the history.

**ASK** Does anyone want to share what they've learned about their family health history?

**NOTE**

Allow 5 minutes for participants to respond.

### 3. About This Session

**SAY** Tennis star Serena Williams said, “Victory is very, very sweet. It tastes better than any dessert you’ve ever had.”

---

**ASK** What does this quote mean to you?

**NOTE**

Allow 2 to 3 minutes for participants to respond.

**SAY** Today, you’ll learn how to eat in a heart healthy way—even when you have little time and are on a tight budget. You’ll learn:

- Quick and easy ways to prepare heart healthy meals
- How to eat right when eating out
- Food shopping on a budget
- The effects of advertising on what we buy

# Conducting the Session

## 1. Eating in a Heart Healthy Way When You're Short on Time

### A. Busy Times

**SAY** Many of us have little time to shop, cook, and clean up.

---

**SAY** When we're busy we may:

- Skip breakfast and lunch and eat one big meal in the evening
  - Eat out several times a week
  - Buy boxed, instant, or pre-prepared foods
  - Buy food from vending machines
- 

**ASK** What do you eat when you're short on time?

#### NOTE



Allow about 5 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

**SAY** When we're in a hurry, we're less likely to think about choosing heart healthy foods. We look for food that's easy to buy or quick to make. Unfortunately, that food is often high in fat, sodium, sugar, and calories. For example, we eat snacks and candy from vending machines, prepackaged microwave meals, or burgers from fast food restaurants.

We may also eat bigger portions of high-fat, high-calorie food when there's no time to prepare healthy side dishes like a salad, vegetable, or a whole grain, such as brown rice.

## B. Quick and Easy Meal Tips

### NOTE



This part of the session will help participants think about ways to prepare meals in less time.

DO

**Give** each participant the “Tips for Busy People” handout (page 9.21).



HANDOUT

DO

**Show** picture card 9.1 while you **review** the “Plan Your Meals” and “Use a Shopping List” sections of the handout.



PICTURE

SAY

It’s common to feel too tired or too busy to prepare the kind of meal you’d like to eat or would like your family to have.

Today, we’ll learn ways to save time and make meal preparation easier by:

- Planning weekly meals based on your family’s schedule
- Making fewer trips to the store
- Using a shopping list
- Teaching your loved ones how to shop for groceries

DO

**Show** picture card 9.2 when you review the “Cook in Advance” section.



PICTURE

SAY

Here are tips for enjoying heart healthy meals when time is limited:

- Prepare some foods in advance, such as spaghetti sauce. Use these foods for quick meals. For example, you can add chicken or turkey to the sauce and serve it over spaghetti or rice with vegetables.
- Prepare part of a meal the night before. For example, marinate chicken in the refrigerator overnight.
- Pack your lunch the night before.
- Cook and freeze two or three dishes on your day off.

DO

**Ask** for volunteers to read the tips out loud, one at a time. Allow participants to comment as the tips are read.

**ASK** Would you find any of these tips difficult to do?

**NOTE**

Allow 3 to 5 minutes for participants to respond.

**Group Activity**

ACTIVITY

**NOTE**

This activity will help participants think about creative ways a family can have heart healthy meals when time is limited.

**DO**

**Form** groups of three or four participants. **Give** them the “Lakisha’s Dilemma” handout (page 9.22).



HANDOUT

**SAY**

I’m going to read the handout while you follow along. Think about how Lakisha can solve her problem.

**Lakisha’s Dilemma—A Real-Life Story**

Lakisha has two daughters, Tamika (age 3) and Shandra (age 10 months). She’s also raising her two nephews, 11-year-old Devon and 10-year-old Jamar. Lakisha’s aunt, Ms. Connie, watches the younger children from 8 a.m. to 5 p.m., while Lakisha’s at work. Lakisha receives food assistance and needs to watch her budget



After picking up the kids, Lakisha doesn’t have much time to make dinner. She may give the children prepackaged noodle mixes, spaghetti from a can, or take-out fried chicken.

To get to a supermarket with a large selection of foods, Lakisha has to ride a bus and then she has to carry the groceries home from the bus stop. So she often buys her groceries from a nearby convenience store, which has higher prices and fewer healthy foods.

DO **Ask** each group to discuss how Lakisha can make sure her family eats in a heart healthy way.

## NOTE



Allow about 5 minutes for the groups to come up with suggestions.

DO **Ask** one person from each group to present their group's suggestions.

DO **Add** these ideas if they're not mentioned:

- Lakisha could cook and freeze two or three meals over the weekend.
- She could make a meal in a slow cooker, so it will be ready when she gets home.
- Lakisha's nephews could meet her bus and help carry the groceries.
- Her family could set the table and do the dishes.
- She could buy roasted chicken instead of fried chicken.
- Several families could get together and share meals.
- She might find fresh produce at a discount at a farmer's market.

### C. Eating Out

## NOTE



This activity will teach participants how to make heart healthy choices at fast food restaurants.

DO **Show** the nutrition display, Making the Best Choice in Fast Food Places.

**SAY** Wherever you eat, try to create a balanced meal. Make half your meal vegetables, one-fourth of it a grain (preferably whole grain like brown rice or whole wheat bread), and one-fourth a protein (like beans, chicken, or fish). For example, you could order a large salad with low-fat dressing or two servings of vegetables, baked fish, and a small whole wheat roll or side of rice.

**ASK** Where do you eat when you eat out?



Allow about 3 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

**SAY** People may eat at a fast food restaurant because:

- The food comes quickly, tastes good, and is cheap.
- It has food, toys, and playgrounds for children.

**DO** **Show** picture card 9.3. Keep it on display while you review the handout.



PICTURE

**SAY** Many fast foods are high in saturated fat, sodium, sugar, and calories, so look for the healthier options:

- Order small, plain hamburgers instead of “deluxe” ones.
- Choose grilled instead of breaded chicken or breaded fish sandwiches.
- Share a small order of french fries instead of eating a large order by yourself.
- Order a green vegetable or salad instead of potatoes, rice, pasta, or cornbread.
- Choose water instead of a soft drink or milkshake.

**DO** **Give** each participant the “Tips for Eating Out the Heart Healthy Way” handout (page 9.23).



HANDOUT

**DO** **Ask** for volunteers to read the suggestions on the handout out loud.

**SAY** Do you have other ideas for making heart healthy choices at restaurants?

**NOTE**

Allow 2 or 3 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

**SAY** Let's talk briefly about buffet-style and "all-you-can-eat" restaurants. They may seem like great, money-saving places, but you're likely to overeat. Don't go too often.

**SAY** If you do go, make heart healthy choices, such as roasted, broiled, or grilled lean meat or fish and steamed or sautéed vegetables without sauces. Also, watch your portion size.

Eating a lot to "get your money's worth" isn't a good deal if your health and waistline suffer.

## 2. Saving Money on Your Food Bill

### A. Food Budget

**ASK** Do you have trouble stretching your food budget until your next paycheck or the end of the month? What kinds of problems do you face?

**NOTE**

Allow 3 to 5 minutes for participants to respond.

**SAY** Making a monthly food budget is your first step to healthy eating with limited money. A budget is a plan for the amount of money you can afford to spend on certain items.

**DO** **Give** each participant “Lakisha’s Monthly Food Budget” and “Your Monthly Food Budget” handouts (pages 9.24-9.25).



**SAY** Let’s see how Lakisha made her monthly food budget.

**DO** **Ask** a participant to read the handout out loud.

**ASK** Does anyone have other tips to help plan a monthly food budget?

**NOTE**



Allow 3 to 5 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

## B. Money-Saving Tips

**ASK** What do you do to save money on food? Have any of you found useful online tools or a good source for coupons?

**NOTE**



Allow about 5 minutes for participants to respond. **Write** these answers also.

**SAY** Here are some other ways to save on your food bill.

**DO** **Give** each participant the “Money-Saving Tips” handout (page 9.26). **Ask** for volunteers to read the tips out loud.



**DO** **Give** each participant the “Shopping List” handout (pages 9.27-9.28).



**SAY** Use this list when you shop. Check off or write on the blank lines what you need to buy.



ACTIVITY

### 3. Food Advertising Activity

**NOTE**

This section will help participants become more aware of how advertising affects what they decide to buy.

**SAY**

Food companies spend *billions* on packaging and on radio, TV, and Internet ads to get you to buy their food.

- Nationally advertised items usually cost more than store brands and local brands.
- Most people are more likely to buy items with fancy, eye-catching packaging.
- Ads and other promotions for sweet drinks, fast foods, and other products often target African Americans.
- African American children see more food ads than white children do, especially for sugar-sweetened beverages and fast food restaurants.
- Companies use sports teams, athletes, and sports video games to promote unhealthy foods.
- Understanding food advertising can help you make better choices over the long term.

**DO**

**Ask** participants to describe advertisements that may have prompted them, their children, or friends to buy certain foods.

**NOTE**

Allow about 3 minutes for participants to respond.

**DO** **Review** different themes advertisers use to get us to buy certain foods. **Show** or **describe** the ads you found before the session.

**NOTE**

As you discuss the six themes, **write** them on the blackboard, dry erase board, or large piece of paper taped to the wall. You'll need these themes for the group activities.

**SAY** Advertisements often focus on family, health, sex appeal, humor, appearance, or famous people.

▪ **Family**

Advertisers target African American women's love of family and role as caregivers.

▪ **Health**

Advertisers promote products' supposed health benefits because people worry about their health.

▪ **Sex appeal**

We want to believe that we too will be beautiful and sexy if we use their products.

▪ **Humor**

A funny advertisement often helps us remember a product.

▪ **Appearance**

Advertisers make food look better in ads than it looks in real life, so we want to try it.

▪ **Famous people and shows**

Companies pay famous people to help sell products. They also pay to place their products in popular TV shows, on YouTube, and in movies and videos.



## Group Activity

**NOTE**

This activity will help participants think about how advertising affects what they buy.

**DO**

**Form** groups of three or four. **Give** each group two to three advertisements that you collected before the session.

**SAY**

I have given you real advertisements. Talk with the others in your group about which themes your ads use.

**NOTE**

Allow about 5 minutes for the groups to come up with their ideas.

**DO**

**Ask** one person from each group to present their group's ideas.

**SAY**

Advertisements can be helpful, but they can also get us to buy things we don't need, can't afford, or that aren't as good as they seem.

**ASK**

What should you ask yourself before buying something?

**NOTE**

Allow 4 to 5 minutes for participants to respond.

**DO** **Add** the following questions if participants don't mention them:

- Do I really need it?
- Is there a less expensive alternative?
- Have I compared the products' nutrition labels?
- Am I buying it because it comes in a nice package?
- Am I buying it because of a catchy advertisement?
- Am I buying it because I have a coupon or because it's on sale?
- Can I afford it, even with a coupon?

**SAY** If you want to buy name brands, save money by buying the products when they're on sale.

## 4. Soul Food Makeover: Catfish Stew and Rice Recipe



**DO** **Give** participants the “Soul Food Makeover: Catfish Stew and Rice Recipe” handout (page 9.29). **Suggest** that they try the dish this week.



**ASK** How can this dish help us eat in a heart healthy way when we have little time?

**DO** **Add** these answers if participants don't mention them:

- This dish can be prepared and frozen for you to eat later.
- It includes a lot of vegetables.
- It's low in fat and sodium.

## Review of Today's Key Points

**SAY** Let's review what we learned today.

### **What can you do to save time in meal preparation?**

- Get help from your family members.
- Cook several dishes at one time and freeze some to eat later.
- Make enough to have leftovers for lunch.
- Pack lunches the night before.
- Learn simple, fast recipes.
- Use a slow cooker.

### **What can you do to eat healthier when eating out?**

- Order the small, plain hamburgers or other sandwiches—not the “deluxe” versions.
- Don't get large sizes.
- Ask for roasted or grilled chicken or fish, not breaded.
- Go for vegetarian pizza, and ask for less cheese.
- Order your sandwich without mayonnaise or sauce.
- Avoid the “value” or “combo” meal unless it comes with healthy sides, like apple slices or a salad.
- Instead of getting a large order of fries, share a small order or get a side salad instead.
- Choose water or 100 percent fruit juice, unsweetened iced tea, or fat-free or low-fat (1 percent) milk instead of a soft drink or milkshake.

**How can you stretch a limited food budget and still eat healthy?****▪ Before you shop:**

- Make a monthly food budget.
- Plan your meals for the week, and think about how you'll use the leftovers.
- See what you already have in your freezer, cabinets, and refrigerator.
- Look for coupons, including in your local newspaper and online.
- Make a shopping list of what you need to buy for the week. It should have a mix of canned, fresh, and frozen fruits and vegetables. Don't forget inexpensive protein foods like beans and peas.
- Plan how you'll get to the supermarket, so you don't have to shop at a convenience store.

**▪ At the store:**

- Use your list and your coupons.
- Stores often stock the priciest items at eye level, so look at the upper and lower shelves.
- If a sale item has run out, ask the store for a rain check.
- Join your store's loyalty program to get discounts.
- With fresh food, like vegetables, buy only the amount that you or your family can use before it spoils.
- Try not to shop when you're hungry.
- Buy store brands as often as possible.
- Check your receipt for errors at the cash register.

## Weekly Pledge



**SAY** You've learned a lot today about eating in a heart healthy way even when you're short on time and money. As Serena Williams said, "Victory is very, very sweet. It tastes better than any dessert you've ever had." Please think of one change you can make in your everyday life to eat in a heart healthy way even when time or money is tight. This will be your pledge for the week.

**SAY** Be specific about **what** you'll do, **how** you'll do it, and **when** you'll start. Here are some examples:

- I'll use a shopping list the next time I go to the store.
- I'll try a store brand the next time I go food shopping.
- I'll choose a restaurant that isn't buffet-style the next time I go out to eat.
- I'll plan my dinners for the next week so I don't eat fast food.

### NOTE



Allow 5 minutes for participants to think of a pledge.

### ASK

Would anyone like to share their pledge with the group?

### NOTE



**Write** down pledge ideas on the blackboard, dry erase board, or large piece of paper taped to the wall.

### SAY

*(Optional)*

Keeping a personal value in mind can help you eat in a heart healthy way when you're on a tight budget or have little time. Remember that a personal value is a quality that you consider important.

Today's value is **gratitude**. Gratitude can help you appreciate your efforts to change, no matter how small they may be.

**ASK** How could you use gratitude or another value to help you keep your pledge?

**NOTE**

Allow 3 minutes for participants to share their thoughts.

**SAY** We'll discuss the results of your pledges next week. Don't forget to work on your pledges to be more physically active; to cut back on sodium, saturated fat, and sugar; to reach and keep a healthy weight; to prevent or control diabetes; and to make heart healthy eating a part of your life and your family's.

## Closing

**SAY** Thank you for coming today. What did you think of today's session?

**NOTE**

Allow a moment for participants to respond.

**SAY** I'm looking forward to seeing you at the next session. It will be on living tobacco free.

Please continue to work on your family health history.

**NOTE**

**Think** about today's session. What worked and what didn't work? Have you decided to make any changes in your own life that were covered in today's session?



## Tips for Busy People

### Plan Your Meals

- ♥ Plan weekly meals.

### Use a Shopping List

- ♥ Save money and time by making fewer trips to the store. Make and use a shopping list.

### Share Meal Preparation Tasks

- ♥ Teach your family how to shop for groceries.
- ♥ Get your family to help prepare meals and clean up.
- ♥ Clean as you cook, so you'll have less to do later.
- ♥ Share cooking duties with other family members or neighbors. For example, cook enough food to share with another family.

### Cook in Advance

- ♥ Prepare some foods in advance (such as a sauce). Use these foods for quick meals. You can add chicken or turkey to the sauce and serve it over spaghetti.
- ♥ Prepare parts of a meal the night before (for example, marinate chicken in the refrigerator overnight).
- ♥ Pack your lunch the night before.
- ♥ Cut and wash vegetables, and make enough salad for two days. Don't add dressing until serving time.
- ♥ Cook and freeze two or three dishes on your day off. Use those dishes on the days you don't have time to cook.
- ♥ Do some prep the night before by cutting up vegetables or meat that the recipe calls for.
- ♥ Prepare meals in a slow cooker.

### Cook Simply

- ♥ Steam vegetables and flavor them with herbs.
- ♥ Use frozen vegetables without sauces.
- ♥ Broil, roast, bake, or grill meats.
- ♥ Make one-pot meals, such as stews and casseroles.
- ♥ Use frozen vegetables (such as carrots, greens, and peas).
- ♥ Learn simple recipes you can make in less than 30 minutes.

### Use Herbs and Spices

- ♥ Chop fresh herbs, put them in ice cube trays with water, and freeze. Store the frozen cubes in a plastic bag. Use when you need fresh herbs.
- ♥ Grow oregano, basil, or thyme on a sunny windowsill.
- ♥ Keep dried herbs on hand. One teaspoon of dried herbs is equal to 3 teaspoons of fresh herbs.

### Keep Quick Snacks on Hand

- ♥ Try these healthy snacks:
  - Cut-up fresh fruit or vegetables
  - Whole grain, ready-to-eat dry cereal
  - Fat-free and low-fat yogurt
  - Low-fat cheese
  - Whole grain breads





# Tips for Eating Out the Heart Healthy Way

You don't have to give up eating out to eat right.

**Here are some tips for making heart healthy choices at restaurants.**

## Sandwiches

- ♥ Order sandwiches without mayonnaise, tartar sauce, or special sauces. Try mustard or low-fat mayonnaise. Ask for vegetables on your sandwich.
- ♥ Order small, plain hamburgers instead of “deluxe” ones.
- ♥ Order sandwiches made with lean roast beef or turkey. Chicken salad and tuna salad made with regular mayonnaise are high in fat.
- ♥ Choose grilled instead of breaded chicken or fish sandwiches.

## Main dishes

- ♥ Go for rotisserie-style chicken rather than fried. Always remove the skin.
- ♥ Order pizza with vegetable toppings, such as peppers, mushrooms, or onions. Ask for half the usual amount of cheese.
- ♥ Choose grilled, steamed, or baked fish instead of deep-fried.
- ♥ Leave off all butter, gravy, and sauces.



## Side dishes

- ♥ Ask for any high-fat toppings, including salad dressing, on the side. Use less than the amount they give you.
- ♥ Ask the server not to add salt to your serving.
- ♥ Order a baked potato instead of fries.
  - Try salsa or vegetables as a potato topping.
  - If you really want fries, order the small size to share instead of having a large order by yourself.
- ♥ Use low-calorie, low-fat salad dressing. Bring your own if the restaurant doesn't offer a low-fat dressing. You can buy small packets at some stores.
- ♥ Try to create a balanced meal by making half your meal vegetables, one-quarter a whole grain, and one-quarter a protein.
- ♥ Ask for low-fat cheese and low-fat sour cream.

## Beverages

- ♥ Choose water, 100 percent fruit juice, unsweetened iced tea, or fat-free or low-fat (1%) milk rather than a soft drink or a milkshake.
- ♥ If you really want to have a soft drink, order a small one.

## Desserts

- ♥ Buy a small fat-free frozen yogurt, low-fat ice cream, or sherbet instead of cakes or pies.



## Lakisha's Monthly Food Budget

Lakisha needs to plan how much money she can spend on food each month to feed her family of five. Follow Lakisha's steps as she makes her first monthly food budget.

For your budget, you can also check out online and electronic budgeting tools. Use what works best for you.



### Step 1: Lakisha figures out how much she can spend on food each month.

- She receives \$300 in food stamps each month.
- She figures out that she can put \$190 aside from her salary for food each month.
- In total, she can spend \$490 each month for food ( $\$300 + \$190 = \$490$  per month).

### Step 2: Lakisha writes down what she spends on food and keeps all her receipts.

She writes down how much she spends at the grocery store and at restaurants in her Food Money Log. She clips the log to the envelope where she keeps her receipts.

### Step 3: Lakisha checks her expenses each week to make sure she sticks to her monthly food budget.

Lakisha adds up her food expenses each week. Then she adds up what she has spent during the month so far and compares the amount with her total monthly food budget.

#### Let's plan your monthly food budget. Use the Food Money Log handout.

- 1 Figure out how much money you have to spend on food for the month.
- 2 List the cost of each item you bought in the Week 1 column, add the costs together, and put the total on the Weekly Total Spent line.
- 3 Put your monthly food budget on the Monthly Budget line. Subtract from that the amount spent in Week 1. That's your Remaining Monthly Budget.
- 4 Copy remaining amount from Week 1 to Week 2 Remaining Monthly Budget line.

#### NOTE



**Try to plan** for the entire month, so you don't run out of money. You have a good plan if you don't go over your monthly food budget.





# Money-Saving Tips

**You can save money on groceries. Follow these simple suggestions.**

## Before Going to the Store

- ♥ Plan weekly meals. Your family can help you plan the menu.
- ♥ Make a shopping list based on your meal plan.
- ♥ Look for websites or apps for your phone that help you find sales for items you normally buy.
- ♥ Check for coupons online, in the newspaper, and in store mailings. Ask your children or another family member to help you.
- ♥ Remember—coupons don't save you money if you buy products that you don't need. Always compare the price of the items you have the coupons for with the price of similar items, such as the store brand.
- ♥ Make fresh foods at home instead of using prepared items like salad from a salad bar, prepared foods from a deli, or microwave meals.



## At the Store

- Buy what's on your list. You're more likely to buy too much or buy items that you don't need when you don't use a list.
- ♥ Convenience foods cost more. Some examples include:
    - Canned beans
    - Boneless chicken breasts
    - Precut fruit and vegetables
  - ♥ Buy fruits and vegetables that are in season.
  - ♥ Shop alone when possible. Family members or friends may try to get you to buy items you don't need.
  - ♥ Don't shop when you're hungry.
  - ♥ Watch for errors at the cash register. Sometimes sale items don't ring up as being on sale. Some stores give customers free items if they charged the wrong amount.
  - ♥ Look for store brands. They're usually just as nutritious as the more expensive name brands.
  - ♥ Stores often stock the priciest items at eye level, so look at the upper and lower shelves.

## Choosing a Store

- ♥ If you can, shop at the store that has the lowest prices for the items you need. That may not be the same store every week.
- ♥ Remember that convenience stores have higher prices and less variety than supermarkets.



# Shopping List\*

**Make a shopping list. Include the items you need for your menus and any basic items you need to restock your kitchen.**

## Produce

- \_\_\_\_\_ Fresh fruits (bananas, apples, oranges, grapes)
- \_\_\_\_\_ Fresh vegetables (cabbage, lettuce, carrots, greens, onions, tomatoes, squash, sweet potatoes, green peppers, okra)
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_



## Whole Grain Breads, Muffins, and Rolls

- \_\_\_\_\_ Bread, bagels, biscuits
- \_\_\_\_\_ English muffins
- \_\_\_\_\_ Dinner rolls
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## Cereals, Rice, Crackers, Pasta, and Noodles

- \_\_\_\_\_ Unsweetened cereal, dry or cooked
- \_\_\_\_\_ Brown rice
- \_\_\_\_\_ Whole grain pasta (noodles, spaghetti)
- \_\_\_\_\_ Soda crackers
- \_\_\_\_\_ Graham crackers
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## Milk Products<sup>†</sup>

- \_\_\_\_\_ Fat-free or low-fat (1%) milk
- \_\_\_\_\_ Fat-free or low-fat (1%) cottage cheese
- \_\_\_\_\_ Low-fat cheeses
- \_\_\_\_\_ Fat-free or low-fat yogurt
- \_\_\_\_\_ Fat-free sour cream
- \_\_\_\_\_ Fat-free cream cheese
- \_\_\_\_\_ Eggs
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## Proteins

- \_\_\_\_\_ Chicken
- \_\_\_\_\_ Turkey
- \_\_\_\_\_ Fish (salmon, catfish, whiting, flounder)
- \_\_\_\_\_ Beef (round or sirloin)
- \_\_\_\_\_ Extra-lean ground beef
- \_\_\_\_\_ Pork tenderloin, leg, shoulder
- \_\_\_\_\_ No-salt, lower fat lunch meats (turkey, chicken, and lean roast beef)
- \_\_\_\_\_ Dry beans and peas, tofu
- \_\_\_\_\_ Unsalted roasted nuts
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_



\*Use the nutrition label to choose foods lowest in saturated fat, sugar, and sodium.  
<sup>†</sup> Or lactose-free milk and milk products, or fortified nondairy nut milks, such as soy milk.



# Shopping List (continued)

## Baking Items

- \_\_\_\_\_ Flour, whole wheat and white
- \_\_\_\_\_ Sugar
- \_\_\_\_\_ Vegetable oil spray
- \_\_\_\_\_ Fat-free canned evaporated milk
- \_\_\_\_\_ Fat-free dry milk powder
- \_\_\_\_\_ Unsweetened cocoa powder
- \_\_\_\_\_ Baking powder
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_



## Canned Fruits, Vegetables, Beans, and Soups

- \_\_\_\_\_ Canned fruit in juice (not syrup)
- \_\_\_\_\_ Unsweetened applesauce
- \_\_\_\_\_ Canned tomatoes (no salt added)
- \_\_\_\_\_ Low-sodium tomato sauce or paste
- \_\_\_\_\_ Other canned vegetables (no salt added)
- \_\_\_\_\_ Canned broth (fat-free, low-sodium)
- \_\_\_\_\_ Other canned soups
- \_\_\_\_\_ Canned beans or peas (no salt or seasoning added)
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## Fats and Oils

- \_\_\_\_\_ Soft tub margarine
- \_\_\_\_\_ Canola, olive, or vegetable oil
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## Frozen

- \_\_\_\_\_ Fat-free or low-fat frozen yogurt and desserts (sherbet)
- \_\_\_\_\_ Frozen vegetables without sauces
- \_\_\_\_\_ Frozen 100% fruit juices
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## Other

- \_\_\_\_\_ Herbs and spices (oregano, cumin, red pepper, garlic, parsley, paprika, sage)
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_



## Soul Food Makeover: Catfish Stew and Rice

<b>1 medium</b>	potato
<b>1 can (14½ ounces)</b>	tomatoes (reduced- or low-sodium), sliced
<b>1 cup</b>	chopped onion
<b>1 cup</b>	clam juice or water
<b>1 cup</b>	water
<b>2 cloves</b>	garlic, minced
<b>½ head</b>	cabbage (coarsely chopped)
<b>1 pound</b>	catfish fillets
<b>1½ tablespoons</b>	Hot 'N Spicy Seasoning (recipe below)
<b>1</b>	sliced green onion for garnish (optional)
<b>2 cups</b>	hot cooked rice (brown or white)

### Hot 'N Spicy Seasoning

<b>¼ cup</b>	paprika
<b>2 tablespoons</b>	dried oregano, crushed
<b>2 teaspoons</b>	chili powder
<b>1 teaspoon</b>	garlic powder
<b>1 teaspoon</b>	black pepper
<b>½ teaspoon</b>	red (cayenne) pepper
<b>½ teaspoon</b>	dry mustard

### Preparation Instructions

Mix together all seasoning ingredients. Store in airtight container. Makes about ⅓ cup of seasoning.

1. Peel potato, and cut into quarters.
2. In a large pot, combine potato, tomatoes and juice from the can, onion, clam juice, water, and garlic.
3. Bring to a boil. Reduce heat.
4. Cook, covered, over medium-low heat for 10 minutes.
5. Add cabbage. Return to boiling. Reduce heat; cook, covered, over medium-low heat for 5 minutes, stirring occasionally.
6. Meanwhile, cut fillets into 2-inch lengths. Coat fillets with Hot 'N Spicy Seasoning.
7. Add fish to vegetables. Reduce heat; simmer, covered, for 5 minutes or until fish flakes easily with fork.
8. Ladle stew over cooked rice in soup bowls and garnish with green onion.

#### Makes 4 servings

<b>Serving size:</b> About 2 cups	<b>Sodium:</b> 355 mg
<b>Calories:</b> 363	<b>Dietary Fiber:</b> 4 g
<b>Total Fat:</b> 8 g	<b>Protein:</b> 28 g
<b>Saturated Fat:</b> 2 g	<b>Total Carbohydrates:</b> 44 g
<b>Cholesterol:</b> 87 mg	<b>Potassium:</b> 1,079 mg



# Take Control of Your Health

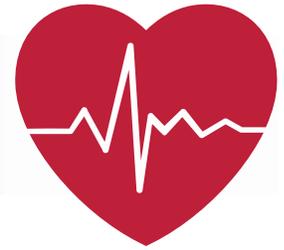
Enjoy Living Tobacco Free



“Freedom is never given; it is won.”

– A. Philip Randolph

# Session 10



## Take Control of Your Health Enjoy Living Tobacco Free

### Objectives

#### By the end of this session, participants will learn:

- About the harmful effects of smoking
- About the harmful effects of secondhand smoke
- Tips for quitting
- Ways to ask people not to smoke around you

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### Materials and Supplies

#### To conduct this session, you'll need:

- *With Every Heartbeat Is Life* manual and picture cards
- Blackboard and chalk, dry erase board, or several large pieces of paper, a marker, and tape
- (Optional) Scissors for cutting paper and a small container to hold the paper (see page 10.9)

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### Handouts

#### Give each participant these handouts during this session:

- Smoking Harms All of You (page 10.20)
- Smoking Harms Infants and Children (page 10.21)
- Costs of Smoking (page 10.22)
- Role Play: Someone Is Smoking. What Can You Do? (pages 10.23-10.25)
- List of local programs that help people quit smoking

- Tips To Quit (pages 10.26-10.27)
- Help Your Heart: Don't Smoke (page 10.28)
- Break Free From Smoking (pages 10.29-10.30)

## NOTE



For more information, contact the following organizations:

- National Cancer Institute's [smokefree.gov](http://smokefree.gov) and the federal government's [betobaccofree.hhs.gov](http://betobaccofree.hhs.gov) have many free resources, such as apps, a motivational text service, and a chat line to help you quit.
- All states also have quit lines with trained counselors. Call 1-800-QUIT-NOW (1-800-784-8669) to connect to your state's quit line.
- Pathways to Freedom: Leading the Way to a Smoke Free Community is a free smoking cessation program for African Americans. Find out more at [www.naatpn.org/pathways](http://www.naatpn.org/pathways).

## Before This Session

- Review the “More Information” box (page 10.16) about tobacco companies' advertisement practices.
- Prepare a list of local programs that help people quit smoking. Find the information online or at your local health department, hospital, or clinic.

## Session Outline

### Introducing the Session

1. Welcome
2. Review of Last Week's Session
3. About This Session

### Conducting the Session

1. Facts About Smoking
2. Smoking Harms Infants and Children
3. Youth and Smoking
4. Smoking and Your Wallet
5. Secondhand Smoke
  - A. Secondhand Smoke Can Harm You and Those Around You
  - B. Secondhand Smoke Role-Playing Activity
6. Quitting Smoking

### Review of Today's Key Points

### Weekly Pledge

### Closing

# Introducing the Session

## 1. Welcome

**DO**      **Welcome** participants to the session.

## 2. Review of Last Week's Session

**SAY**      At the last session, we talked about ways to save money on our food bills. Who can name some of them?

### NOTE



Allow about 3 to 5 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

**DO**      **Add** these ideas if they aren't mentioned:

- Plan weekly meals and shop with a list.
- Check food sale ads.
- Use fewer packaged foods.
- Buy only the amount of food you and your family need.
- Try not to shop when you're hungry.
- Check your receipt for errors at the register.
- Use coupons for products you were already planning to buy.
- Shop at convenience stores less often.
- Use store brands when possible.

**ASK** How are you doing with your pledge to eat in a heart healthy way even when time or money is tight? What went well? Did you have problems? If so, what did you do to solve them?

**NOTE**

Allow 5 to 8 minutes for participants to respond.

**ASK** Has anyone completed the family health history?

**NOTE**

(Optional) **Give** a prize to participants who've completed the history.

**ASK** Does anyone want to share what you've learned about your family health history?

**NOTE**

Allow about 5 minutes for participants to respond.

### 3. About This Session

**SAY** Civil rights and labor activist A. Philip Randolph said, “Freedom is never given; it is won.”

**ASK** What does this quote mean to you?

**NOTE**



Allow 2 to 3 minutes for participants to respond.

**SAY** This session is about the importance of living free from smoking and secondhand smoke. We’ll talk about the importance of not starting to smoke and quitting if you’ve already started. During this session, you’ll learn:

- How smoking harms your health
- How secondhand smoke from other people’s cigarettes hurts you
- Ways to ask people not to smoke around you
- Tips to help you or others quit smoking

**ASK** How many of you smoke?

Do you live with someone who does?

How many of you would like to live free of smoking or secondhand smoke?

**SAY** You can get hooked on nicotine, the addictive part of tobacco, by using cigarettes, cigars, pipes, or chewing tobacco. This session focuses on cigarette smoking because it’s the most common use of tobacco.

E-cigarettes generally don’t have tobacco. But they usually do have a lot of nicotine (even some that claim they don’t). There’s much to learn about the effects of e-cigarettes on health, but we already have scientific evidence that nicotine and flavorings found in these products are associated with effects on the cardiovascular system and lungs. Scientific studies are still being done to look at all the harmful effects of e-cigarette use. So today, we’re going to focus on cigarette smoking.

# Conducting the Session

## 1. Facts About Smoking

- SAY** Here are some of the reasons you should quit smoking, or not start:
- Smoking causes about one in every five deaths every year.
  - Smoking kills more people than HIV, illegal drug use, alcohol, car accidents, and firearms *combined!*
  - Smoking increases your risk of dying from heart disease, cancer, and stroke.
  - Smokers have a 30 to 40 percent higher risk of getting diabetes than nonsmokers do.
  - Although African Americans usually smoke fewer cigarettes and start smoking at an older age than whites start, they're more likely to die from smoking-related diseases.
  - All nicotine is addictive, similar to the addiction that happens with heroin or cocaine. Tobacco companies put enough nicotine in cigarettes that it's easy to get addicted to smoking and hard to stop. No tobacco products are safe.

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**DO** **Show** picture card 10.1.



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**SAY** Smoking causes cancer; heart disease; stroke; and lung diseases, such as chronic obstructive pulmonary disease (COPD), which includes emphysema and chronic bronchitis.

Smoking also increases your risk for tuberculosis, eye diseases, and immune problems, such as rheumatoid arthritis.

Smoking can eventually cause such poor oral health that your teeth fall out. It can also cause erectile dysfunction.

**DO** **Give** participants the “Smoking Harms All of You” handout (page 10.20), and review the information.

**NOTE**

**Ask** for volunteers to read the handout out loud. **Keep** the picture card on display while you review this handout.

**SAY**

Let’s take a moment to talk about menthol cigarettes.

**ASK**

Many African American smokers use menthol cigarettes. Can you think of reasons why some people choose menthol over regular cigarettes?

**NOTE**

Allow 2 to 3 minutes for participants to respond.

**DO**

**Add** the following answers if they aren’t mentioned.

They may think menthol cigarettes:

- Taste better
- Feel cool when they inhale
- Are less harsh on their throat
- Are safer

**SAY**

But menthol cigarettes are as dangerous for your health as all other cigarettes, and they may be more addictive!

Cigarette companies target menthol cigarette advertisements to African Americans and young people.

## 2. Smoking Harms Infants and Children

**ASK** Do you think that pregnant women should smoke?

**DO** **Show** picture card 10.2.



PICTURE

### NOTE



Allow a moment for participants to respond.

**SAY** Pregnant women shouldn't smoke or be around other people who do. It harms their health and the health of their baby.

**SAY** Let's go over some problems that can happen if pregnant women smoke.

**DO** **Give** participants the "Smoking Harms Infants and Children" handout (page 10.21).



HANDOUT

### NOTE



**Ask** for volunteers to read the handout out loud.

*(Optional)* **Cut out** the facts listed on the handout, and put them in a container. Let participants pick out the slips of paper and read the facts out loud.

**Keep** picture card 10.2 on display while you review the handout.

### 3. Youth and Smoking

## NOTE



**Review** the “More Information” box (page 10.16) about tobacco companies’ advertisement practices.

## DO

**Show** picture card 10.3.



PICTURE

## SAY

Nearly 90 percent of adult smokers began smoking before age 18.

Studies show that young people who choose *not* to smoke are more likely to:

- Be part of a religious group or tradition
- Have a strong racial or ethnic pride
- Do better in school

## SAY

Let’s look at some of the facts about young people and smoking:

- Nicotine harms young people’s developing brain.
- Most teens exposed to nicotine get addicted.
- Some African American high school students and even some middle schoolers use tobacco.
- Compared to other racial or ethnic groups, African Americans smoke less as teens but then catch up as adults.
- It’s illegal in all states to sell cigarettes and other tobacco products to people younger than age 18. In some states, the age cutoff is higher.

## SAY

Let your children know that most teens, especially African American teens, don’t smoke.

If you smoke, set an example for your family by quitting. If you can’t quit yet, be honest. Admit that kicking the habit is hard. Let young people know that it’s definitely better not to start.

Try not to smoke in front of your children. Never ask them to bring you cigarettes or to light one. Asking them to do those things can send the message that smoking is okay.

## 4. Smoking and Your Wallet

**SAY** Smoking costs a lot. Let's look at some things smokers could buy with the money they spend on cigarettes.

**DO** **Give** out and **review** the "Costs of Smoking" handout (page 10.22).



HANDOUT

## 5. Secondhand Smoke

### A. Secondhand Smoke Can Harm You and Those Around You

**ASK** What have you heard about secondhand smoke?

#### NOTE



Allow 3 to 5 minutes for participants to respond.

**SAY** Secondhand smoke is the smoke that you breathe in from someone else's cigarette or cigar. It's bad for your health.

**SAY** Let's look at some facts about secondhand smoke:

- Secondhand smoke contains hundreds of dangerous chemicals.
- Every year, many thousands of adult *nonsmokers* die of stroke, heart disease, and lung cancer caused by secondhand smoke.
- Children who live with a smoker are more likely to have breathing problems, bronchitis, and pneumonia. Infants are more likely to die of sudden infant death syndrome (SIDS), when an infant dies suddenly and unexpectedly in the first year of life.
- Secondhand smoke can bring on an asthma attack. African American children are more likely than white children to have asthma and to die from it.

## B. Secondhand Smoke Role-Playing Activity

**SAY** Let's try a role-playing activity that lets you practice what to say to smokers.



**DO** **Divide** participants into groups of three. **Give** each group the "Role Play: Someone Is Smoking. What Can You Do?" handout (pages 10.23-10.25). **Ask** them to act out a solution to the problem.



### NOTE



**Read** the scenes in the Scenes for Role-Playing Activity: Someone Is Smoking (page 10.13) one at a time or **hand out** copies of it to each group. Allow about 5 minutes for each group to role play a solution.

**DO** **Ask** participants if they have any comments or questions about the role play.

**SAY** To prevent uncomfortable situations in your home, post a sign that says "Thank You for Not Smoking" or "This Is a Smoke-Free Home."

## 6. Quitting Smoking

**SAY** Quitting smoking isn't easy, *but you can do it.*

Have any of you quit smoking? Do you know anyone who has? What are the benefits of quitting?

### NOTE



Allow 3 to 5 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

## Scenes for Role-Playing Activity: Someone Is Smoking. What Can You Do?

### Scene 1

One evening, you find that the person you've asked to watch your children while you're at work is smoking in front of them. You want this person to continue helping you with the kids, but not to smoke around them. What do you do?

#### Solutions

- Ask the person not to smoke while caring for your children.
- Tell the person that your home is smoke-free and that secondhand smoke is bad for children.
- Find another sitter.

### Scene 2

You and your family go to a friend's house to celebrate her son's birthday. A few of the guests are smoking, and the smoke hurts your eyes. You promised your friend you would help her, so you don't want to leave. What can you do?

#### Solutions

- Tell your friend ahead of time that you can help her only if she has a smoke-free party.
- Help your friend make a "Thank You for Not Smoking" sign.
- Tell your friend you're very sorry, but you need to leave because of the smoke.

### Scene 3

You're at a crowded park for a family reunion. You and your family are eating at the picnic tables. A small group of smokers are standing near you. Your daughter has asthma, and although you're outdoors the smoke is making her wheeze.

#### Solutions

- Tell the group that your daughter doesn't feel well, and ask them to please stop smoking or to move farther away.
- You and your daughter leave the reunion.
- You and your daughter move to another table, farther from the smokers.

**DO** **Add** the following answers if they aren't mentioned:

- You'll live longer and have better health.
- You'll lower your chance of having a heart attack, stroke, cancer, and respiratory problems.
- If you're pregnant, quitting will improve your chances of having a healthy baby.
- The people near you, especially children and older adults, will be healthier.
- You'll have more money.
- You might cough more right after you quit smoking, but that's a sign your lungs are healing. Soon, you won't be coughing and you'll be more likely to fight off colds and infections.
- Your clothes, hair, breath, and your home will smell better.

---

**SAY** Some people use smokeless tobacco as a way to smoke fewer cigarettes. But it's best to quit everything eventually.

---

**ASK** If you use tobacco, why do you use it?  
What feelings or situations trigger your urge to smoke?

**NOTE**



Allow 3 to 5 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

**DO** **Add** the following answers if they aren't mentioned:

- Drinking coffee
- Drinking alcohol
- Talking on your phone
- Watching someone smoke
- Being in a social situation
- Feeling stressed or bored

- SAY** Let's review what you can do to overcome those urges.
1. Go somewhere that doesn't allow smoking, such as a friend's house, shops, movie theaters, museums, or restaurants.
  2. Find ways to relax. If stress is a trigger, try deep breathing. Let's try it now. Take a slow, deep breath in, hold it to a count of five, and then release it.
  3. Keep your hands busy. Play a game on your phone, eat a healthy snack, or squeeze a stress ball. Try a sewing, arts and crafts, or other project around your home that uses your hands.
  4. Keep moving. Go for a walk, do some housekeeping or yard work, stretch, or practice your favorite dance steps.
  5. Know what to expect. Nicotine is addictive. When you try to cut back or quit, the lack of nicotine causes withdrawal symptoms. You may feel irritable, restless, jumpy, and tired. You may have trouble concentrating.
  6. Consider using a nicotine replacement option, like the patch. It improves your chance of quitting successfully.

---

**SAY** Withdrawal symptoms are unpleasant, but they're a sign that your body is recovering. For most people, the worst symptoms last a few days to a few weeks.

---

**DO** **Give** participants the list that you created of local programs that help people quit.




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**SAY** Here's a list of local programs that offer help quitting. Share this list with your friends and family.

---

**DO** **Give** participants the "Tips To Quit" handout (pages 10.26-10.27). **Ask** for volunteers to read the tips out loud.




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**SAY** If you don't smoke, share these tips with family members or friends who want to quit.

---

**SAY** Nagging people about their smoking can make them become angry or defensive. Instead, try more positive approaches:

- Say things like “Quitting is hard, but I know you can do it.”
- When they first quit, help them stay away from people who smoke.
- Suggest other activities that will help them beat the urge to smoke. For example, ask them to take a walk with you.

**ASK** Do you have any questions about the information we covered today?

**NOTE**

Allow a moment for participants to respond.

**DO** **Give** participants the “Help Your Heart: Don’t Smoke” handout (page 10.28) and the “Break Free From Smoking” handout (pages 10.29-10.30).



**DO** **Ask** for volunteers to read the suggestions out loud.

**More Information**

- In the United States, tobacco companies spend almost *\$10 billion a year* on promoting their products and offering discounts to make cigarettes less expensive.
- The tobacco companies promote menthol cigarettes specifically to African Americans by:
  - Sponsoring hip-hop nights at bars and giving out free menthol cigarettes
  - Mailing out coupons
  - Using culture and language targeted to African American audiences in ads
- For decades, tobacco companies have been encouraging children to start smoking:
  - Images that make smoking appealing to children are common, including in video games, movies, and online.
  - Advertisements highlight independence and rebellion. The ads try to make smoking seem socially acceptable to young people.
  - Companies sell flavored tobacco products that appeal to young people.
- Tobacco ads usually show happy, attractive people enjoying life while they smoke cigarettes. Many individuals want to be like those people, so they start smoking.

## Review of Today's Key Points

**SAY** Let's review what we've learned today.

### **When people smoke, which diseases are they likely to develop?**

- Smoking increases the risk of getting heart disease, cancer, serious breathing problems, and of having a stroke. It hurts almost every organ in the body!

### **Should pregnant women smoke?**

- No, pregnant women shouldn't smoke. When pregnant women smoke, the baby gets less oxygen and is more likely to be born early, have a low birth weight, have birth defects, or even die.

### **What is secondhand smoke?**

- Secondhand smoke is smoke that you breathe in from someone else's cigarette, cigar, or pipe. It has many harmful chemicals.

### **What can you do if you don't want someone to smoke around you?**

- Ask them to smoke outside. You can also leave the area. Post a sign in your home that says "Thank You for Not Smoking" or "This Is a Smoke-Free Home."

### **What should you know about menthol cigarettes?**

- Menthol cigarettes aren't safer than other cigarettes. No matter what type or brand you smoke, quitting is one of the best things you can do for your health.

### **Why is it a bad idea to smoke in front of children?**

- Being around smoke makes it more likely a child will have sudden infant death syndrome (SIDS), lung diseases, ear infections, and asthma.

## Weekly Pledge



PLEDGE

**SAY** You've learned a lot today about living free of tobacco. Please think of one change you can make in your everyday life to quit smoking or to avoid secondhand smoke. This will be your pledge for the week.

**SAY** Be specific about **what** you'll do, **how** you'll do it, and **when** you'll start. Let's look at some examples:

- I'll choose a quit day within the next 2 weeks. I'll quit smoking on that day.
- I'll ask my children to make a sign to let others know that our home is smoke-free.

**NOTE**

Allow 5 minutes for participants to think of a pledge. **Ask** them to write their pledges on the "Break Free From Smoking" handout (pages 10.29-10.30).

**ASK**

Would anyone like to share their pledge with the group?

**NOTE**

**Write** their pledge ideas on the blackboard, dry erase board, or large piece of paper taped to the wall.

**SAY**

*(Optional)*

Keeping a personal value in mind can help you quit smoking. Remember that a personal value is a quality that you consider important.

Today's value is **peace**. Feeling at peace with your life can help you overcome fears that keep you from quitting. It helps you trust yourself and be optimistic in spite of problems you face. Quitting is hard, but remember today's quote, "Freedom is never given; it is won."

**ASK** How could you use peace or another value to help you keep your pledge?

**NOTE**

Allow 3 minutes for participants to share their thoughts.

**SAY** We'll discuss the results of your pledges next week. Work on your pledges to be more physically active; to cut back on salt, sodium, and saturated fat; to be a healthy weight; to prevent or control diabetes; and to eat heart healthy, even when time or money is tight.

## Closing

**SAY** Thank you for coming today. What did you think of today's session?

**NOTE**

Allow a moment for participants to respond.

**SAY** I'm looking forward to seeing you next week. The next session will be a review and graduation celebration. Please continue to work on your family health history.

---

**DO** **Ask** participants if they want a potluck dinner at the final session. If so, **ask** for volunteers to bring heart healthy dishes.

**Remember** nonfood items, such as plates, cups, forks, spoons, and napkins.

**NOTE**

**Think** about today's session. What worked and what didn't work? Have you decided to make any changes in your own life that were covered in today's session?



# Smoking Harms All of You

## Heart attack and stroke

If you smoke, you're two to four times more likely to develop heart disease or to have a stroke, compared to nonsmokers. But just 1 year after quitting, your heart attack risk drops sharply. Within 2 to 5 years, the risk for stroke may reduce to about that of a nonsmoker.



## Cancer

- Smoking increases your risk of developing leukemia and cancers of the lung, esophagus, larynx, mouth, throat, kidney, bladder, liver, pancreas, stomach, cervix, colon, and rectum.
- Smoking causes about 90 percent of all lung cancer deaths.
- Smokers are about 25 times more likely than nonsmokers to get lung cancer.
- More women die from lung cancer each year than from breast cancer.

## Smoking can cause:

- Chronic obstructive pulmonary disease (COPD), which includes emphysema and chronic bronchitis
- More colds and respiratory infections
- Asthma attacks
- Diabetes, fertility and pregnancy problems, tooth decay, weaker bones, and more

## Less serious effects of smoking are:

- Yellow stains on your teeth and fingers
- Gum disease and bad breath
- Early wrinkling of your skin
- Your home, car, and clothes smell like smoke
- Decreased sense of smell and taste



# Smoking Harms Infants and Children



**When a pregnant woman smokes, her fetus gets less oxygen.**

**Nicotine may damage the brain and lungs of the fetus.**

**Smoking during pregnancy increases the chance of the baby being born with birth defects, too early, or underweight, or even dying.**

**Smoking during pregnancy may increase the likelihood the child will become a smoker.**

**Babies whose mothers smoked when pregnant have a greater risk of dying from SIDS (sudden infant death syndrome).**

**Babies who live with smokers are more likely to get chest colds, ear infections, bronchitis, pneumonia, and asthma.**

**Babies who are exposed to secondhand smoke are more likely to cry, sneeze, and cough.**

**Children who grow up in a home with smokers are more likely to become smokers.**



# Costs of Smoking\*

## Smoking one \$6 pack of cigarettes a day for...

1 week = **\$42** = Movie tickets for 4



1 month = **\$180** = A week of low-cost groceries for family of 4



9 months = **\$1,620** = Down payment on a used car



1 year = **\$3,190** = Living room furniture set



2 years = **\$4,380** = A cruise for 2



3 years = **\$6,570** = Associate's degree from 2-year college



4 years = **\$8,760** = Average down payment on a \$150,000 townhome or apartment (6%)



\*Based on 30 days/month. These numbers may vary over the years and by locations.





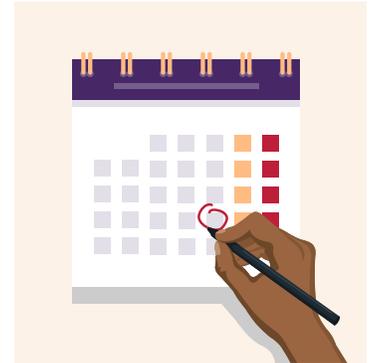




## Tips to Quit

### Get ready

- **Set** a quit date.
- **Write down** your reasons for quitting and your triggers.
- **Plan** how you'll respond to urges to smoke.
- **Talk** to your health care provider about using a nicotine patch or other medications to help you quit.
- **Don't let** people smoke in your home.
- **Don't try** to cut back by buying just one cigarette at a time instead of buying the pack. This costs more money, and you can lose count and end up smoking more cigarettes.
- **Review** your past attempts to quit. Think about what worked and what didn't.
- Once you quit, **don't smoke—NOT EVEN A PUFF!** One cigarette can cause you to start smoking again.



### Line up support

- **Tell** your family, friends, and coworkers that you're going to quit and want their help. Ask them not to smoke around you.
- **Connect** with others who have quit. Hearing about other people's success can be a great motivator.
- **Get** individual, group, phone, or online counseling. The more counseling you have, the better your chances are of quitting.
- **Try** meditation, yoga, or other relaxation techniques (such as guided imagery). It may help you quit.
- **Find out** whether your church, faith community, or other community organizations sponsor quit-smoking clinics or other activities that will support you.
- **Check out** Pathways to Freedom: Leading the Way to a Smoke Free Community®. It's a free smoking cessation program for African Americans. Find out more at [naatpn.org/pathways](http://naatpn.org/pathways).



## Tips to Quit (continued)

### Contact

- National Cancer Institute Smoking Quitline: 1-877-448-7848 or visit [cancer.gov/contact](https://www.cancer.gov/contact).
- States also have quit lines with trained counselors. Call 800-QUIT-NOW (1-800-784-8669) to connect to your state's quit line.
- The websites [smokefree.gov](https://www.smokefree.gov) and [betobaccofree.hhs.gov](https://www.betobaccofree.hhs.gov) have many free resources to help you quit, including apps, a chat line, a motivational text service, and more.



### Find ways to relax

- **Try to distract** yourself from urges to smoke. Talk to someone, go for a walk, or get busy with a task.
- **Change** your routine. Use a different route to work.
- **Try** warm milk to help you relax at night.
- **Reduce** stress by listening to music, doing yoga, watching a show, or dancing to your favorite music—whatever works for you.
- **Plan** something enjoyable to do every day.
- **Drink** a lot of water when you feel the urge to smoke.



# Help Your Heart: Don't Smoke

Even if you don't smoke, it's important that you learn about the best ways to quit. Help those around you, and keep your children smoke-free.



## Quit smoking and add years to your life!



**James and Darnell decided to quit smoking. Darnell made a firm pledge one morning, threw away his cigarettes, and decided to quit for good. James used the following three tips and also quit.**

### **1 Learn how to handle urges to smoke**

“Every time I felt stressed, I wanted to smoke. Instead of smoking, I prayed for courage and strength, talked to a friend, or walked around the neighborhood.”

### **2 Get support**

“I also attended a quit smoking program at the clinic every Thursday night, and I got a lot of help from my family and the support group. Even my children are encouraging me.”

### **3 Use the nicotine patch or gum**

“The health care provider at the clinic suggested that I use the patch. The patch helped me control the urge to smoke.”



# Break Free From Smoking

## Ms. Diane's tips to make your home smoke-free

### Protect your children!

Talk to your children about the dangers of smoking. Help them practice saying, "No, thanks. I don't smoke."

If your children already smoke, the way you react can make a difference. Tell your children that you really care about them. Listen to their thoughts and feelings. Give them the facts that can help them choose good health over smoking.

When a friend comes to our house and lights up a cigarette, I say very politely, "I'm sorry, we have a smoke-free home, please smoke outside." And I keep a sign in my home that says, "Thank You for Not Smoking."





## Break Free From Smoking (continued)

**Make your personal pledge to protect your family from cigarette smoke.**



### Here are some examples of pledges:

#### **If you smoke—**

I will set a quit date today.

#### **To help your children stay smoke-free—**

I'll talk to my children about the harmful effects of smoking. I'll encourage them to create a sign that says, "We're proud to be smoke-free kids."

#### **To protect your family and friends—**

I'll let my family, friends, and others know that I do mind if people smoke around me. I'll put a "No Smoking" sign in my home and car.

#### **To help your community—**

I'll encourage my neighbors to have smoke-free homes. I'll offer them "Thank You for Not Smoking" signs

**Write the changes you'll try to make this week:**

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**Your health and your family's and friend's health are priceless. Invest in good health!**

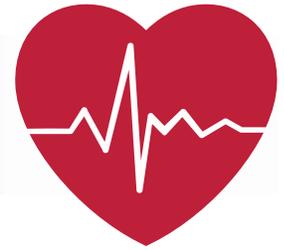
# Review and Graduation

An illustration of two hands, one in a brownish-gold color and the other in a purple color, holding a red heart. The hands are positioned as if they are gently cradling the heart. The background is a solid red color.

“If people learn something better,  
they will do better.”

– *Juanita Green,*  
*community health worker*

# Session 11



## Review and Graduation

### Objectives

#### In this session, you'll:

- Review information learned in Sessions 1 through 10 using games and activities
- Recognize the participants' efforts and accomplishments

---

### Materials and Supplies

#### To conduct this session, you'll need:

- *With Every Heartbeat Is Life* manual and picture cards
- Blackboard and chalk, dry erase board, or several large pieces of paper, a marker, and tape
- Heart Health Bingo Facts (pages 11.9-11.10)
- Heart Health Bingo Cards (pages 11.11-11.25)
- Bingo card markers (such as pennies or dry beans)
- Pens
- Stamped envelopes
- (Optional) Healthy food and beverages (if having a potluck)
- (Optional) Small gift for each participant

---

### Handouts

#### Give each participant these handouts during this session:

- Heart Health Bingo Facts (pages 11.9-11.10)
- Heart Health Bingo Cards (pages 11.11-11.25)
- (Optional) Letter to Myself: Sample (page 11.26)
- Letter to Myself (page 11.27)
- Certificate of Achievement (page 11.28)

## Before This Session

- Make one copy of the “Heart Health Bingo Facts” handout (pages 11.9-11.10) on stiff paper and cut the paper on the dotted lines to get your bingo pieces. Mix up these pieces and place them in a box.
- Make one copy on stiff paper of each of the Heart Health Bingo Cards (pages 11.11-11.25).
- Make copies of the “Certificate of Achievement” handout (page 11.28). Write in the name of each participant. Give out certificates during the recognition part of this session.

## Session Outline

### Introducing the Session

1. Welcome
2. Review of Last Week’s Session
3. About This Session

### Conducting the Session

1. Heart Health Bingo
2. Letter to Myself Activity

### Recognition for Completing the With Every Heartbeat Is Life Course

### *(Optional)* Potluck Meal

### Closing

# Introducing the Session

## 1. Welcome

**DO**      **Welcome** participants to the session.

## 2. Review of Last Week's Session

**SAY**      During Session 10, we talked about how cigarette smoking can harm you. Who can name some of the harmful effects of smoking?

### NOTE



Allow about 3 to 5 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

**DO**      **Add** these effects if they aren't mentioned:

- Smoking can cause heart disease, cancer, stroke, asthma, and COPD (chronic obstructive pulmonary disease, including emphysema and chronic bronchitis).
- Cigarette smoke irritates the eyes and can trigger asthma attacks.
- The nicotine from smoking is very addictive.
- Nicotine harms the development of young people's brains. It also harms a pregnant woman's fetus.
- Also:
  - Your breath and clothes smell bad.
  - You get yellow stains on your teeth and fingers.
  - Your sense of smell and taste decline.
  - Your skin wrinkles faster.
  - You get more colds and sore throats.

**ASK** How did you do with your pledge? Did you take steps to quit smoking or protect yourself or your family from secondhand smoke? What worked and what didn't?

**NOTE**

Allow 3 to 5 minutes for participants to comment.

**SAY** Have you done anything to lower your stress? Did you:

- Join a stress management program?
- Try meditation or relaxation therapy?
- Increase your physical activity?
- Talk with your family, friends, a mental health care provider, clergy, or general health care provider?

**NOTE**

Allow 5 to 8 minutes for participants to respond.

### 3. About This Session

**SAY** Juanita Green, a community health worker from Baltimore, said (based on her work experience), “If people learn something better, they will do better.”

**ASK** What does this quote mean to you?

**NOTE**

Allow 2 to 3 minutes for participants to answer.

**SAY** During this session, we'll review what we learned in previous sessions. Thank you all for taking part in the course. Congratulations to each of you on making the effort to learn how to lower the risk—for you and your family and friends—of heart disease, stroke, and diabetes.

# Conducting the Session

## 1. Heart Health Bingo

**DO** **Give** one bingo card to each person. **Give** each participant nine pennies, dry beans, or other items to mark the cards.



**SAY** We're going to play a game of bingo to review facts about preventing heart disease, stroke, and diabetes. Here's how to play:

- To start, place a marker on the free space in the center of the card.
- Listen as the bingo caller reads facts about heart health.
- The caller will get the facts from this box.
- If the fact that the caller reads matches a fact on your card, place a marker on it.
- If you get three markers in a row, call out "Bingo." The row can be up and down, across, or diagonal.
- Now, would anyone like to be a caller? If not, I'll volunteer!

**DO** **Hold up** a card to show the group how the rows can look.

### NOTE



**Play** two or three games as time permits. At the end of each game, participants turn in their cards for new ones. If possible, you may want to **award** small prizes to the winners.

## 2. Letter to Myself Activity



ACTIVITY



HANDOUT

**SAY** Now you're going to list healthy changes you would like to work on so those changes become habits. You can write the list on this "Letter to Myself" handout.

**SAY** (*Optional*)

If you'd prefer to record the list on your phone instead of writing it, that's fine too. You can record your message in a quiet corner of the room or in the hallway.

**NOTE**



You may want to **show** or **read out loud** the "Letter to Myself: Sample" handout (page 11.26) to give participants ideas of what to list.

**DO** **Give** participants a pen, the "Letter to Myself" handout (page 11.27), and a stamped envelope.

**NOTE**



**Watch** to see that everybody is either recording on their phone or writing it down. **Offer** to help as needed.

**DO** **Ask** participants to write their address on the envelope, **put** the letter **inside**, and **seal it**. **Collect** the envelopes.

**SAY** I'll mail your letter to you in about 3 months. Getting this letter will remind you to use what you've learned in these sessions to care for your heart.

**SAY** (*Optional*)

If you recorded the message on your phone, put a reminder in your phone for 3 months from now to review your recording.

## Recognition for Completing the With Every Heartbeat Is Life Course

DO **Show** picture card 11.1.



SAY Thank you for taking the time to attend the sessions. Now you know how to live a heart healthy life. I hope you use the information to help others improve their heart health as well.

SAY I would like to give each of you a certificate to honor your efforts and your achievements.

DO *(Optional)*  
**Give** each participant a small gift when you give them the certificate.

DO **Call** each participant's name and **give** them the "Certificate of Achievement" (page 11.28) and, if you choose, the small gift.

SAY Congratulations as well on completing your family health history. Knowing this information can help you take steps to decrease your risk for heart disease and stroke.

ASK Does anyone want to share what you learned about your family's health? Did you think the activity was helpful?

### NOTE



Allow a moment for participants to respond.

**SAY** Let's talk about how this course was helpful to you. Also, would anyone like to share a short story about your family's reactions to your pledged activities?

**NOTE**

Allow a few minutes for participants to respond.

## Potluck Meal (*Optional*)

**SAY** Now it's time for our potluck meal. Please put your dishes on the table. Let's begin the celebration!

## Closing

**SAY** Each of you have demonstrated today's quote by Juanita Green, community health worker: "If people learn something better, they will do better." Because you decided to learn about heart health, you're improving your own health and the health of your family and friends.

**SAY** Thank you for coming and for completing the course. I wish everyone well, and I hope you continue your journey toward good health and a healthy heart.

**NOTE**

**Think** about today's session and about all of the experience and knowledge you gained from teaching this course. What do you think worked and what didn't? What changed in your own life as a result of what you learned? **Learn about** evaluations in Session 12, which is just for community health workers.

**Thank you for teaching the course and helping others to protect their heart health.**



# Heart Health Bingo Facts

**(Photocopy and cut on the dotted lines.)**

<p>✂</p> <p>Protect your heart. When your heart stops, your life stops.</p>	<p>If your waist measurement is high, you're at risk for heart disease.</p>
<p>Physical activity makes your heart and lungs stronger.</p>	<p>Move more and encourage your family or friends to join you.</p>
<p>A stroke can happen when a blood vessel bursts or when a clot blocks your arteries and brain cells die.</p>	<p>Talk to your health care provider about what your blood pressure should be.</p>
<p>Uncontrolled high blood pressure increases your risk of having a heart attack.</p>	<p>Eat less salt and sodium to help prevent high blood pressure.</p>
<p>Hypertension is another term for high blood pressure.</p>	<p>Two heart attack warning signs can be feeling dizzy and sick to your stomach.</p>
<p>A heart attack warning sign can be pain in the arm.</p>	<p>Two heart attack warning signs can be light-headedness and a cold sweat.</p>
<p>Use herbs and spices instead of salt.</p>	<p>If your health care provider prescribes blood pressure or cholesterol medication, take it exactly how they tell you to.</p>
<p>Being overweight increases your risk of heart disease and diabetes.</p>	<p>Being overweight increases your risk of high blood pressure and high cholesterol.</p>
<p>Having diabetes increases your risk of heart disease and stroke.</p>	<p>If someone is having a heart attack or stroke, do <b>not</b> drive them to the hospital. Call 9-1-1 right away.</p>
<p>To lose weight, eat smaller portions and be more active.</p>	<p>Food labels list the serving size and the number of calories in a serving.</p>
<p>Your BMI (body mass index) is one indicator of whether you're at a healthy weight.</p>	<p>Eat more fruit each day. Have a piece of fruit when you crave something sweet.</p>



# Heart Health Bingo Facts (continued)

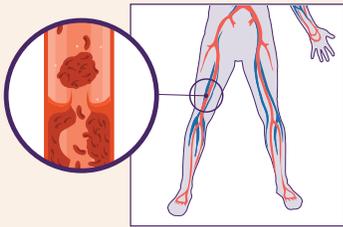
**(Photocopy and cut on the dotted lines.)**

✂ Eat more vegetables each day. Have a salad for lunch.	When eating out, order baked, broiled, or grilled foods to cut down on fat and calories.
To save food dollars, plan weekly menus. Shop with a list.	For a snack, have a piece of fruit or mix fruit into plain, fat-free yogurt.
Smoking causes serious health problems such as heart disease and lung cancer.	Pregnant women should not smoke.
Children of smokers are more likely to become smokers.	Ask your health care provider about whether your cholesterol levels are in the healthy range.
Prediabetes means that you're on the way to developing diabetes. Act now—lose weight if needed and be more active.	A diet high in saturated fat can lead to clogged arteries and a heart attack or stroke.
Some signs of diabetes are having to pee more often, especially at night; feeling very hungry; feeling very tired; and sores that heal slowly.	Trim visible fat from meat before cooking.
Use the food label to choose foods lower in saturated fat, sodium, and carbohydrates.	Saturated fat is in high-fat meat, cheese, milk, and butter.
High blood pressure makes your heart work harder.	Cook more food than you need and freeze the extra for when you're tired or short on time.
Vegetables and fruits are naturally low in fat.	Drain meat after cooking to get rid of some of the fat.
Ask your health care provider about whether your triglyceride levels are in the healthy range.	Lower your risk for diabetes by losing weight, eating healthy, and staying active.



# Heart Health Bingo Card 1

A stroke happens when a blood vessel bursts or when a clot blocks your arteries and damages brain cells.



Use herbs and spices instead of salt.



Children of smokers are more likely to become smokers.



Trim visible fat from meat before cooking.



Some signs of diabetes:



Having to pee a lot, often at night



Feeling very hungry



Feeling very tired



Sores that heal slowly

Use the food label to choose foods lower in saturated fat, sodium, and carbohydrates.

Nutrition Facts	
2 servings per container	
Serving size	8 fl oz (248g)
Amount Per Serving	
<b>Calories</b>	<b>70</b>
% Daily Value*	
Total Fat 0g	0%
Saturated Fat 0g	0%
Trans Fat 0g	0%
Cholesterol 0mg	0%
Sodium 10mg	0%

Eat more vegetables each day. Have a salad for lunch.



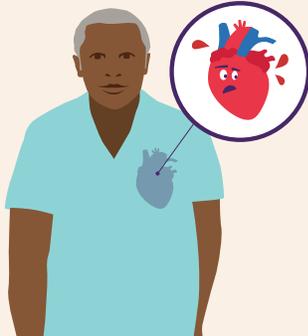
Cook more food than you need and freeze the extra for when you're tired or short on time.





# Heart Health Bingo Card 2

High blood pressure makes your heart work harder.



Vegetables and fruits are naturally low in fat.



Use the food label to choose foods lower in saturated fat, sodium, and carbohydrates.

Nutrition Facts	
2 servings per container	
Serving size	8 fl oz (248g)
Amount Per Serving	
<b>Calories</b>	<b>70</b>
% Daily Value*	
Total Fat 0g	0%
Saturated Fat 0g	0%
Trans Fat 0g	0%
Cholesterol 0mg	0%
Sodium 10mg	0%

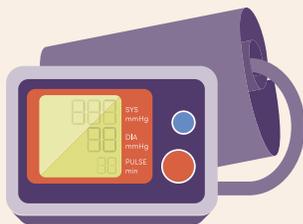
If someone is having a heart attack or stroke, do **not** drive them to the hospital. Call 9-1-1 right away.



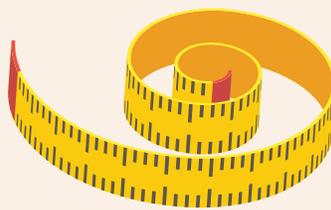
Saturated fat is in high-fat meat, cheese, milk, and butter.



Uncontrolled high blood pressure increases your risk of having a heart attack.



If your waist measurement is high, you're at risk for heart disease.



Pregnant women should not smoke.



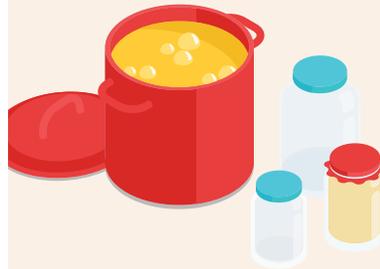


# Heart Health Bingo Card 3

Children of smokers are more likely to become smokers.



Cook more food than you need and freeze the extra for when you're tired or short on time.



Eat more vegetables each day. Have a salad for lunch.



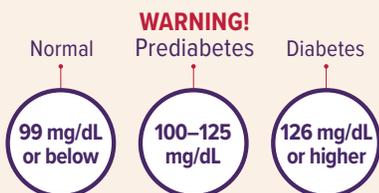
Protect your heart. When your heart stops, your life stops.



Eat less salt and sodium to help prevent high blood pressure.



Prediabetes means that you're on the way to developing diabetes. Act now—lose weight if needed and be more active.



To lose weight, eat smaller portions and be more active.



Lower your risk for diabetes by losing weight, eating healthy, and staying active.





# Heart Health Bingo Card 4

A diet high in saturated fat can lead to clogged arteries and a heart attack or stroke.



Eat more fruit each day. Have a piece of fruit when you crave something sweet.



Hypertension is another term for high blood pressure.



Smoking causes serious health problems such as heart disease and lung cancer.



Food labels list the serving size and the number of calories in a serving.

Nutrition Facts	
2 servings per container	
<b>Serving size</b>	8 fl oz (248g)
<b>Amount Per Serving</b>	
<b>Calories</b>	<b>70</b>
<small>% Daily Value*</small>	
Total Fat 0g	0%
Saturated Fat 0g	0%
Trans Fat 0g	
Cholesterol 0mg	0%
Sodium 10mg	0%

Two heart attack warning signs can be feeling dizzy and sick to your stomach.



Ask your health care provider about whether your cholesterol levels are in the healthy range.



Your BMI (body mass index) is one indicator of whether you're at a healthy weight.

Healthy Weight						
BMI	19	20	21	22	23	24
<b>Height</b>						
4' 10"	91	96	100	105	110	115
4' 11"	94	99	104	109	114	119
5' 0"	97	102	107	112	118	123



# Heart Health Bingo Card 5

Move more and encourage your family or friends to join you.



Being overweight increases your risk of heart disease and diabetes.



For a snack, have a piece of fruit or mix fruit into plain, fat-free yogurt.



When eating out, order baked, broiled, or grilled foods to cut down on fat and calories.



Ask your health care provider about whether your triglyceride levels are in the healthy range.



Trim visible fat from meat before cooking.



If your health care provider prescribes blood pressure or cholesterol medication, take it exactly how they tell you to.



To save food dollars, plan weekly menus. Shop with a list.





# Heart Health Bingo Card 6

Some signs of diabetes:



Feeling very thirsty



Blurry vision



Losing weight without trying



More infections than usual

Drain meat after cooking to get rid of some of the fat.



Talk to your health care provider about what your blood pressure should be.



Having diabetes increases your risk of heart disease and stroke.

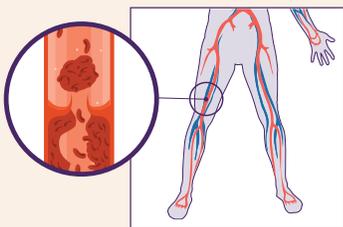


**FREE SPACE**

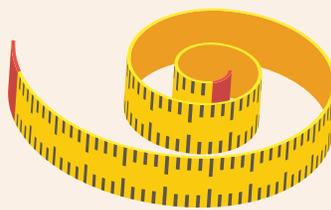
Use herbs and spices instead of salt.



A stroke happens when a blood vessel bursts or when a clot blocks your arteries and damages brain cells.



If your waist measurement is high, you're at risk for heart disease.



Hypertension is another term for high blood pressure.





# Heart Health Bingo Card 7

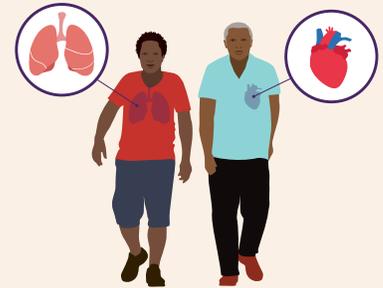
Ask your health care provider about whether your cholesterol levels are in the healthy range.



Uncontrolled high blood pressure increases your risk of having a heart attack.



Physical activity makes your heart and lungs stronger.



Eat more vegetables each day. Have a salad for lunch.



Ask your health care provider about whether your triglyceride levels are in the healthy range.



Hypertension is another term for high blood pressure.



Use herbs and spices instead of salt.



Pregnant women should not smoke.





# Heart Health Bingo Card 8

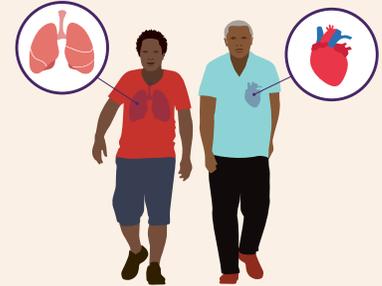
Vegetables and fruits are naturally low in fat.



Being overweight increases your risk of heart disease and diabetes.



Physical activity makes your heart and lungs stronger.



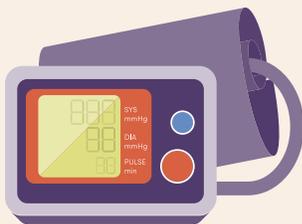
Smoking causes serious health problems such as heart disease and lung cancer.



Saturated fat is in high-fat meat, cheese, milk, and butter.



Uncontrolled high blood pressure increases your risk of having a heart attack.



To save food dollars, plan weekly menus. Shop with a list.



To lose weight, eat smaller portions and be more active.





# Heart Health Bingo Card 9

Pregnant women should not smoke.



Eat more vegetables each day. Have a salad for lunch.



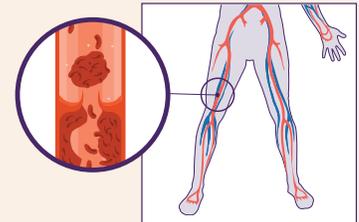
Drain meat after cooking to get rid of some of the fat.



Cook more food than you need and freeze the extra for when you're tired or short on time.



A stroke happens when a blood vessel bursts or when a clot blocks your arteries and damages brain cells.



If someone is having a heart attack or stroke, do **not** drive them to the hospital. Call 9-1-1 right away.



When eating out, order baked, broiled, or grilled foods to cut down on fat and calories.



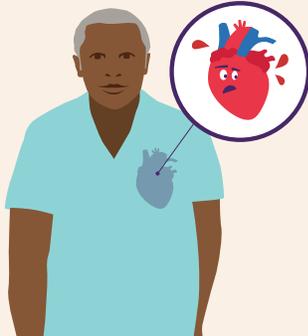
Protect your heart. When your heart stops, your life stops.





# Heart Health Bingo Card 10

High blood pressure makes your heart work harder.



Saturated fat is in high-fat meat, cheese, milk, and butter.



Eat less salt and sodium to help prevent high blood pressure.



Cook more food than you need and freeze the extra for when you're tired or short on time.



FREE SPACE

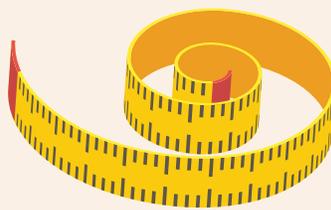
A heart attack warning sign can be pain in the arm.



Children of smokers are more likely to become smokers.



If your waist measurement is high, you're at risk for heart disease.



If someone is having a heart attack or stroke, do **not** drive them to the hospital. Call 9-1-1 right away.





# Heart Health Bingo Card 11

Talk to your health care provider about what your blood pressure should be.



Your BMI (body mass index) is one indicator of whether you're at a healthy weight.

Healthy Weight						
BMI	19	20	21	22	23	24
Height						
4' 10"	91	96	100	105	110	115
4' 11"	94	99	104	109	114	119
5' 0"	97	102	107	112	118	123

Smoking causes serious health problems such as heart disease and lung cancer.



To save food dollars, plan weekly menus. Shop with a list.



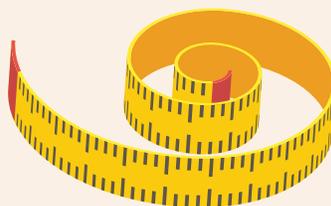
Eat more fruit each day. Have a piece of fruit when you crave something sweet.



Lower your risk for diabetes by losing weight, eating healthy, and staying active.



If your waist measurement is high, you're at risk for heart disease.



To lose weight, eat smaller portions and be more active.





# Heart Health Bingo Card 12

Being overweight increases your risk of heart disease and diabetes.



Move more and encourage your family or friends to join you.



For a snack, have a piece of fruit or mix fruit into plain, fat-free yogurt.



A diet high in saturated fat can lead to clogged arteries and a heart attack or stroke.



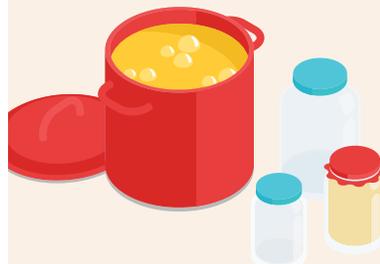
To lose weight, eat smaller portions and be more active.



Hypertension is another term for high blood pressure.



Cook more food than you need and freeze the extra for when you're tired or short on time.



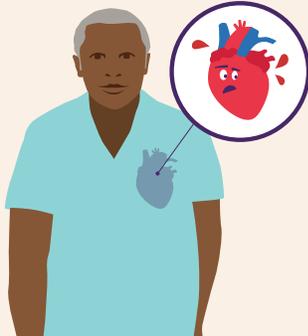
Two heart attack warning signs can be light-headedness and a cold sweat.





# Heart Health Bingo Card 13

High blood pressure makes your heart work harder.



Vegetables and fruits are naturally low in fat.



Use the food label to choose foods lower in saturated fat, sodium, and carbohydrates.

Nutrition Facts	
2 servings per container	
Serving size	8 fl oz (248g)
Amount Per Serving	
<b>Calories</b>	<b>70</b>
<hr/>	
	% Daily Value*
Total Fat 0g	0%
Saturated Fat 0g	0%
Trans Fat 0g	0%
Cholesterol 0mg	0%
Sodium 10mg	0%

If someone is having a heart attack or stroke, do **not** drive them to the hospital. Call 9-1-1 right away.



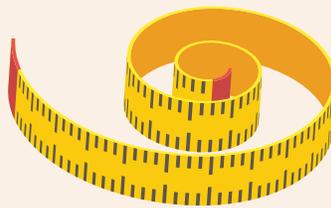
Saturated fat is in high-fat meat, cheese, milk, and butter.



Uncontrolled high blood pressure increases your risk of having a heart attack.



If your waist measurement is high, you're at risk for heart disease.



Pregnant women should not smoke.



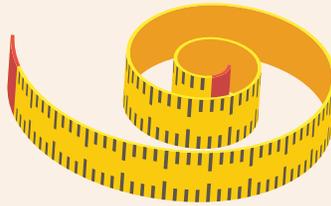


# Heart Health Bingo Card 14

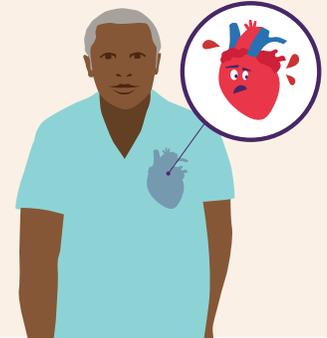
If your health care provider prescribes blood pressure or cholesterol medication, take it exactly how they tell you to.



If your waist measurement is high, you're at risk for heart disease.



High blood pressure makes your heart work harder.



Being overweight increases your risk of heart disease and diabetes.



Smoking causes serious health problems such as heart disease and lung cancer.



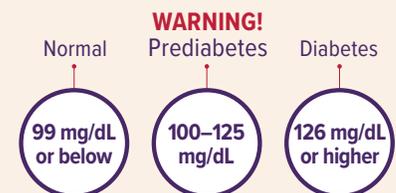
Food labels list the serving size and the number of calories in a serving.

Nutrition Facts	
2 servings per container	
Serving size	8 fl oz (248g)
Amount Per Serving	
<b>Calories</b>	<b>70</b>
% Daily Value*	
Total Fat 0g	0%
Saturated Fat 0g	0%
Trans Fat 0g	
Cholesterol 0mg	0%
Sodium 10mg	0%

Children of smokers are more likely to become smokers.



Prediabetes means that you're on the way to developing diabetes. Act now—lose weight if needed and be more active.





# Heart Health Bingo Card 15

Trim visible fat from meat before cooking.



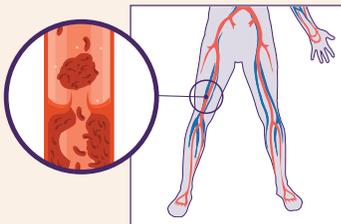
Pregnant women should not smoke.



Use the food label to choose foods lower in saturated fat, sodium, and carbohydrates.

Nutrition Facts	
2 servings per container	
Serving size	8 fl oz (248g)
Amount Per Serving	
<b>Calories</b>	<b>70</b>
<small>% Daily Value*</small>	
Total Fat 0g	0%
Saturated Fat 0g	0%
Trans Fat 0g	0%
Cholesterol 0mg	0%
Sodium 10mg	0%

A stroke happens when a blood vessel bursts or when a clot blocks your arteries and damages brain cells.



Saturated fat is in high-fat meat, cheese, milk, and butter.



Ask your health care provider about whether your triglyceride levels are in the healthy range.



Use herbs and spices instead of salt.



Drain meat after cooking to get rid of some of the fat.





## Letter to Myself: Sample

I've learned that I can make many changes to improve my health and lower my risk of having heart disease. I can help my family and friends make healthy choices too. During the next 3 months, I'll try to do the following:

1. At work, I'll take the stairs instead of the elevator.

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2. I'll eat 2 small pieces of fruit (an orange and an apple) every day.

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3. When eating out, I'll choose foods that are baked, broiled, or grilled.

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4. I'll switch to reduced-fat (2%) milk for 1 month, then to low-fat (1%) milk for 1 month, and then to fat-free milk.

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5. I'll have my blood pressure checked at the local clinic.

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Signed James Smith

Date 6/20/2020



# Letter to Myself

I've learned that I can make many changes to improve my health and lower my risk of having heart disease. I can help my family and friends make healthy choices too. During the next 3 months, I'll try to do the following:

1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed \_\_\_\_\_

Date \_\_\_\_\_

# CERTIFICATE *Of* ACHIEVEMENT

Awarded to:

For completing the *With Every Heartbeat Is Life Course on Heart Disease Prevention*



Instructor

Date

# Evaluation To Track Your Progress

(Only for Community Health Workers)

An illustration of two hands, one light brown and one dark brown, cupping a red heart. The hands are positioned as if holding the heart gently. The background is a solid red color at the top, transitioning into a dark purple at the bottom.

“I believe that every person is born  
with talent.”

–*Maya Angelou*

# Session 12



## Evaluation To Track Your Progress (Only for Community Health Workers)

### Objectives

**By the end of this session, community health workers will learn how to:**

- Create a vision for offering the With Every Heartbeat Is Life course in their community
- Know the basics of a project evaluation
- Choose strategies to implement the evaluation
- Learn the role of a community health worker in an evaluation
- Collect data to show the results from their evaluation
- Participate in the evaluation process
- Develop an evaluation workplan

---

### Materials and Supplies

**To conduct this session, you'll need:**

- *With Every Heartbeat Is Life* manual
- Blackboard and chalk, dry erase board, or several large pieces of paper, a marker, and tape
- 2 sets of color markers for participants to use

---

### Handouts

**Give each participant these handouts during this session:**

- Examples of Evaluations (pages 12.17-12.18)
- Types of Evaluations (page 12.19)
- Three Ways to Offer the With Every Heartbeat Is Life Course in Your Community (pages 12.20-12.22)
- Outcome Evaluation Strategies and Forms (page 12.23)
- Community Health Worker Train the Trainer Pretest and Posttest (pages 12.24-12.34)
- Feedback Form: What Did You Think About the Training? (for Strategy 1) (pages 12.35-12.39)

- My Health Habits Pretest and Posttest (pages 12.40-12.56)
- Screening Form (pages 12.57-12.58)
- Clinical Measures and Followup Form (pages 12.59-12.63)
- Community Health Worker Activities Form (pages 12.64-12.66)
- Recording Log (for Strategies 1, 2a, 2b, and 3) (pages 12.67-12.68)
- Tips for Collecting Data (page 12.69)
- Develop an Evaluation Workplan (pages 12.70-12.72)

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## Before This Session

Before doing any evaluation, check to see if the organization you work for has an Institutional Review Board (IRB). If so, check with it before collecting any data. Many organizations don't have an IRB. Also, some evaluations are exempt from IRB reviews.

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## Session Outline

### Introducing the Session

1. Welcome
2. About This Session

### Conducting the Session

1. Develop a Vision for Offering the With Every Heartbeat Is Life Course in Your Community
2. Basic Information on Evaluations
3. Three Strategies for Offering the With Every Heartbeat Is Life Course in Your Community
4. Data Collection
5. The Role of Community Health Workers in the Evaluation Process
6. How to Get on the Team
7. Group Activity: Develop an Evaluation Workplan

### Review of Today's Key Points

### Closing

# Introducing the Session

## 1. Welcome

DO **Welcome** participants to the session.

## 2. About This Session

SAY You've learned a lot of information while taking the With Every Heartbeat Is Life course. You've gained new skills and shown great progress and motivation. Now, you're ready to put your With Every Heartbeat Is Life training into action in your community. Congratulations!

SAY This session is for community health workers. It will teach you how to do a formal evaluation to assess the value of With Every Heartbeat Is Life or any project or program you implement.

### NOTE



You can modify any of the evaluation tools (pretest and posttest) provided in the session to fit your needs. If you would like to share any of your evaluation results and feedback, send them to [HealthEdu@nhlbi.nih.gov](mailto:HealthEdu@nhlbi.nih.gov).

## Conducting the Session

### 1. Develop a Vision for Offering the With Every Heartbeat Is Life Course in Your Community

**SAY** During this session, you'll develop a vision for With Every Heartbeat Is Life in your community.

**ASK** Can someone tell me what a vision is?

**NOTE**



Allow about 2 to 3 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

**DO** **Add** the following answers if they're not mentioned:

- A vision is your dream, an image, or a picture of what you want to do and what you imagine With Every Heartbeat Is Life will do for the people you serve.
- It's your direction or goal.
- It's what inspires, motivates, and engages people to take action.

**SAY** You can describe your vision in writing, as a drawing, or in other ways.

Some examples of vision statements are:

- "A heart healthy and stroke-free community"
- "An active, healthy, and informed community"

**SAY** Let's divide up into small groups, and each group will create a vision. Start by asking yourselves: "What do we want our community to be like after we implement With Every Heartbeat Is Life?" You'll have about 20 minutes. When you're done, one person will describe your group's vision.

## NOTE



**Divide** the participants into small groups. **Give** each group a set of color markers and a large piece of paper or poster board.

## SAY

Now, please share your visions.

## NOTE



Allow 2 to 3 minutes for someone from each group to present. Congratulate them for a job well done.

## 2. Basic Information on Evaluations

## SAY

When you offer the With Every Heartbeat Is Life course in your community, you'll want to know if it helped achieve your vision. An evaluation can help you do this.

## ASK

What are some benefits of an evaluation?

## NOTE



Allow about 2 minutes for participants to answer. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

## DO

**Add** the following answers if they aren't mentioned.

An evaluation offers you a way to:

- Find out if your plan is working as intended
- Learn if you're meeting specific goals
- Find out which areas you need to change or improve
- Get information about your plan to share with your community and funders

**DO** **Give** each participant the “Examples of Evaluations” handout (pages 12.17-12.18).



**SAY** Now we’ll look at how a few evaluations were used.

**DO** **Ask** volunteers to read each example and tip out loud.

**SAY** You now have some examples of evaluations. Let’s go over the seven steps for implementing and evaluating With Every Heartbeat Is Life.

- 1. Choose the activities.** Work with your agency or organization to choose and plan the activities you want to do. For example, you may offer to teach the With Every Heartbeat Is Life course.
- 2. Carry out those activities.** For example, you could recruit 20 parents from a local school to sign up for the course.
- 3. Collect data to show if the activities are helping.** You could use questionnaires to find out what participants learned in the sessions, how they used the information, and if they made heart healthy lifestyle changes.

But think creatively about how to collect data. Questionnaires aren’t the only way. Data can come from a lot of different places. For example, participants can give you testimonials (stories), photographs, or journal entries about how With Every Heartbeat Is Life has affected them. You could create a social media page for participants to post their information.

**Remember:** You need to protect participants’ privacy and get their consent when collecting any information about them.

- 4. Enter data.** Trained community health workers or staff can enter information you collect into a database.
- 5. Analyze the data.** An evaluator can analyze the data and summarize the findings. For example, an evaluator may find that the participants who are now walking for 60 minutes daily have lowered their blood pressure and lost weight.
- 6. Write a report about the results.** A report can show how the community has changed as a result of With Every Heartbeat Is Life. For example, the evaluator may describe how participants’ eating habits and physical activities changed while taking the course.

**7. Share the results.** Sharing results can increase community members' interest in *With Every Heartbeat Is Life* and motivate them to take action to improve their health. Consider using charts, infographics, social media, and videos to communicate your results.

**SAY** You've seen how evaluations can help you. Now, let's take a look at two types of evaluations: process and outcome.

**DO** **Give** each participant the "Types of Evaluations" handout (page 12.19).



HANDOUT

**DO** **Ask** a volunteer to read the handout out loud.

### 3. Three Strategies for Offering the *With Every Heartbeat Is Life* Course in Your Community

#### NOTE



Before the session, read the charts on pages 12.20-12.22. They list the strategies in more detail. Each strategy includes the following: goals, description of activities, setting, and target audience.

**SAY** Let's discuss three strategies for offering *With Every Heartbeat Is Life* in your community:

- 1. Train the Trainer.** Use the *With Every Heartbeat Is Life* manual to train a group of community health workers. They then train other community health workers or offer the course in their community.
- 2. Community Education.** Use the manual to teach the course in your community. With the help of other agencies or health professionals, you can also offer health screenings to course participants. If needed, refer participants with elevated numbers (such as for blood pressure, cholesterol, or blood sugar) to their health care provider or a clinic for followup.
- 3. Lifestyle and Clinical Management.** Clinic staff can teach the course to patients. During the course they can monitor the patients' blood pressure, cholesterol, body mass index (BMI), waist measurement, and blood sugar levels. They can offer support and encouragement in addition to making sure that patients are following their treatment plan.

**ASK** If you offer health screenings, why should you partner with other agencies, such as a clinic?

**NOTE**

Allow about 2 minutes for participants to respond.

**DO** **Add** the following answers if they're not mentioned:

- To have trained health care staff measure participants for blood pressure, cholesterol, or blood sugar
- So an authorized agency can get written permission from participants before the screening
- To refer participants with elevated numbers to their health care provider or a clinic

**NOTE**

Some community health workers may be working in clinical settings, and they may teach patients about conditions such as HIV/AIDS, substance abuse, or prenatal care. Community health workers can use these skills to work with patients who have risk factors for heart disease, such as high blood pressure, unhealthy cholesterol levels, or diabetes.

**DO** **Give** each participant the “Three Ways to Offer the With Every Heartbeat Is Life Course in Your Community” handout on pages 12.20-12.22.



**SAY** Please read the strategies to yourself. When you're done, we'll discuss how you could use these strategies.

**ASK** What do you think of the strategies? Do you have any questions?

**NOTE**

Allow about 2 minutes for participants to respond.

## 4. Data Collection

**NOTE**

Before the session, **read** the “Outcome Evaluation Strategies and Forms” on page 12.23. It describes each strategy, how to use data collection forms, and the type of information you can collect to evaluate With Every Heartbeat Is Life.

**SAY**

First, we’ll talk about how you begin collecting data.

**DO**

**Give** each participant the “Outcome Evaluation Strategies and Forms” handout on page 12.23. Also **give** participants copies of the data collection forms on pages 12.24–12.68 and **describe** each form. The data collection forms are:



- Community Health Worker Train the Trainer Pretest and Posttest (pages 12.24–12.34)
- Feedback Form: What Did You Think About the Training? (for Strategy 1) (pages 12.35–12.39)
- My Health Habits Pretest and Posttest (pages 12.40–12.56)
- Screening Form (pages 12.57–12.58)
- Clinical Measures and Followup Form (pages 12.59–12.63)
- Community Health Worker Activities Form (pages 12.64–12.66)
- Recording Log (for Strategies 1, 2a, 2b, and 3) (pages 12.67–12.68)

**SAY**

You’ll find the answers to the test questions at the bottom of the test pages, as needed.

On the data collection forms, you’ll see small (subscript) numbers next to some of the responses. Assigning numeric values to text responses makes it easier to tabulate the results. We recommend assigning these numbers or “numeric values” to the responses for analyzing the data.

Let’s start with the “Community Health Worker Train the Trainer Pretest and Posttest” forms. Use the pretest form at the beginning of the training and the posttest form at the end.

After the training, you'll also complete the "Feedback Form: What Did You Think About the Training?" questionnaire. It collects information on what you like and dislike about the training, how confident you feel about training others, and ideas for improving the training.

**SAY** For the second strategy, Community Education, you can use the "My Health Habits Pretest and Posttest" forms, which participants fill out, to find out if they're changing their health habits. If you also do health screenings, use the "Screening Form" to record participants' test results.

**SAY** For the third strategy, Lifestyle and Clinical Management, fill out the "My Health Habits Pretest and Posttest" form to record how they're changing their health habits. You also can use the "Clinical Measures and Followup Form" to record patients' test results.

Use the "Community Health Worker Activities Form" to make sure you're doing everything you can to help patients stay on their treatment plan.

**SAY** The "Clinical Measures and Followup Form" is useful for community health workers who work in a clinical setting.

**ASK** How many of you work in a clinic, hospital, or other medical setting?

**NOTE**



Allow 2 minutes for participants to respond.

**DO** **Ask** each participant to look at the "Community Health Worker Activities Form" again (pages 12.64-12.66).

**SAY** Keep track of what you do to help patients stay on their medicines. Also record the followup activities you do to help patients make lifestyle changes.

**ASK** Does anyone have questions about the "Community Health Worker Activities Form"?

## NOTE



Allow 2 minutes for participants to respond.

**SAY** By collecting data, we can show the important role community health workers have in helping patients stay on their treatment plans and control their risk factors.

**SAY** The last form, the “Recording Log,” focuses on process evaluation activities. It tells you which form to use and what type of information to collect for each strategy.

**SAY** Let’s review the “Recording Log” handout. The information you’ll collect for the Train the Trainer strategy is:

- Number of participants trained
- Number of sessions taught
- Number and percentage of participants who rate the training “good” or higher
- Number and percentage of participants who report that they “will” or “most likely will” change their health habits
- Number and percentage of participants using the *With Every Heartbeat Is Life* manual 30 days after the training
- Types of activities that participants are completing 30 days after the training

**DO** **Ask** a volunteer to read out loud the information for the Community Education strategy and the Lifestyle and Clinical Management strategy.

**ASK** Does anyone have questions?

**SAY** The results of the “Recording Log” show you which activities are being implemented and how. The log also gives you the feedback you need to improve your *With Every Heartbeat Is Life* course.

**SAY** Before using these data collection forms, review the “Tips for Collecting Data” handout on page 12.69.

## 5. The Role of Community Health Workers in the Evaluation Process

**SAY** Some of you may be thinking that doing an evaluation is too complicated and that there's no role in it for you. But that isn't true.

**ASK** Has anyone already worked on an evaluation? Can you share what you did?

### NOTE



Allow 3 minutes for participants to respond.

**SAY** Community evaluation teams may have the following members:

- A project manager
- An evaluator
- Community health workers
- Health professionals

And here are some examples of what community health workers can do:

- Help decide which evaluation activities to do and with whom.
- Hand out and collect questionnaires and other materials.
- Enter data into a computer.
- Provide feedback on what worked and what didn't work.
- Share results of the evaluation with community members.
- Attend training meetings about With Every Heartbeat Is Life evaluations.

**SAY** Your involvement in the evaluations can help show the value of having community health workers on the With Every Heartbeat Is Life team. Community health workers are key to tracking With Every Heartbeat Is Life activities in the community.

**SAY** With time and practice, you will become more confident about being part of an evaluation.

## 6. How to Get on the Team

**SAY** Let's talk about how to get on an evaluation team.

---

**ASK** First off, do you have an evaluator on your team or in your agency?

**NOTE**



Allow 2 minutes for participants to respond.

**ASK** Do you have any ideas about how to get involved with evaluations at your organization?

**NOTE**



Allow about 2 to 3 minutes for participants to respond. **Write** their answers on the blackboard, dry erase board, or large piece of paper taped to the wall.

**DO** **Add** the following if they're not mentioned:

As a community health worker, you can:

- Find out who does evaluations in your agencies.
- Share this session on evaluations with your supervisors.
- Ask your supervisors how you can be involved in evaluations.
- Ask your supervisors if you can attend trainings on evaluations.

---

**SAY** If your agency doesn't have an evaluator, try to link with an outside evaluator who supports community health workers.

- SAY** An evaluator can help you and your agency:
- Develop an evaluation plan
  - Make sure you carried out the evaluation as intended
  - Conduct an analysis
  - Write a report on the data collected

### More Information

Your agency can get the services of an outside evaluator by contacting:

- Other community health projects or workers
- A university's school of public health
- A foundation that has community health projects
- Your state health department

## 7. Group Activity: Develop an Evaluation Workplan



ACTIVITY

- SAY** We're going to develop evaluation workplans. Please work in the same group you did for the Developing a Vision activity.

- DO** **Give** each group a project from the "Develop an Evaluation Workplan" handout (pages 12.70-12.72).



HANDOUT

### NOTE



Group 1 will work on project 1, group 2 will work on project 2, and group 3 will work on project 3.

- SAY** Each group has a different project. Your handout describes each project. It also has questions to help you decide how to think about the project.

## NOTE



**Ask** one person from each group to present the group's evaluation plan to the entire group. Allow about 5 minutes for each presentation.

## SAY

Thank you for doing such a wonderful job!

## Review of Today's Key Points

## SAY

Let's review what we learned today.

**What's an evaluation?**

An evaluation is a formal process to assess the value of the With Every Heartbeat Is Life course or any project or program you implement. An evaluation helps you see if you're meeting your project goals.

**What do you learn from an evaluation?**

- If your project is working as planned
- If you're meeting your goals
- What needs to be changed and/or improved
- If your activities are helping people make healthy choices
- Information you can share with the community and funders

**What's the role of community health workers in the evaluation process?**

- Helping to decide which activities should be carried out
- Administering questionnaires and other instruments
- Collecting the instruments
- Entering data into computers
- Providing feedback on how activities are done and how they can be improved
- Sharing the results with the community

**What strategies can you evaluate by using this session of the *With Every Heartbeat Is Life* manual?**

- You can evaluate the training of community health workers to promote heart health in the community.
- You can evaluate what community members have learned and which changes they have made to have heart healthy lifestyles.
- You can evaluate how the course has helped patients manage their risk factors and change their lifestyles.

**Who forms the community evaluation team?**

- A project manager
- An evaluator
- Community health workers
- Health professionals

## Closing

**SAY** Thank you for coming today. What did you think of today's session?

**NOTE**

Allow a moment for participants to respond.

**SAY** Community health workers play an important role in the evaluation of *With Every Heartbeat Is Life*. We hope this session helps you achieve positive results in your work with the community. I wish you success in implementing *With Every Heartbeat Is Life* in your community.



# Examples of Evaluations

## Example 1

In May, doctors from a community clinic referred 45 patients to the With Every Heartbeat Is Life course taught by community health workers. Thirty participants attended all of the sessions and 15 participants attended only a few sessions.

The health workers' followup visits to participants' homes found that those who attended all the classes were using the project's heart healthy recipes, doing physical activities, and taking their medicines. The other participants weren't taking any of these steps.

The followup visits showed that taking part in all of the sessions is closely related to how much the course helps participants.

### Tip

Plan to track participation at every stage of your project. Track referrals, class attendance, and follow up after the classes.

## Example 2

A community health clinic offered classes about the importance of physical activity. Before the class, participants were walking less than 30 minutes a day. By the end of the course, the participants who went to at least six of the classes were walking 30 minutes or more per day.

The community health clinic learned that people who regularly attended the sessions increased their physical activity.

### Tip

Know your project goals and review them throughout your project. Make sure that project activities are making sense and are helping you to reach the goals of the project.



## Examples of Evaluations (continued)

### Example 3

A group of community health workers posted flyers in the community about a cholesterol screening event. Few people showed up to the event. The community health workers talked with community leaders and developed a new recruitment strategy. They went door to door, talking to people about the importance of cholesterol screening.

They asked them to share the information with friends and family.

The community health workers held a second screening and had a much better turnout.

By finding out what didn't work and getting input from others, the health workers successfully changed how they recruited participants.

#### Tip

Don't focus only on the positive results of the project. You can learn a great deal by looking at what went wrong and what didn't work.

### Example 4

Community health workers held several heart health sessions for community members. A participant at one of the sessions talked about her experience lowering her blood pressure.

She described how her doctor told her that she had high blood pressure, and she talked about all of the healthy changes that she made. After 3 months, she had lost 10 pounds, and her blood pressure got under control.

The community health workers asked this participant to share her story at a community gathering. Now more people are interested in taking part in the heart health sessions.

#### Tip

Be creative. Evaluations are about more than just numbers. Participants' stories, pictures, and journals can be very powerful tools that describe how your project has affected them.



# Types of Evaluations

## Process Evaluation

A process evaluation looks at your project's activities and whether you're doing the activities as planned. It also tells you who's participating in the activities. You can track the specifics, such as the time spent on activities and how many participants attended.

The results of a process evaluation show you which activities were more successful than others. Process evaluations give you the feedback you need to improve your project.

### Example

You can collect information about the number of sessions you taught from the *With Every Heartbeat Is Life* manual and how much time you spent on activities during the sessions.

## Outcome Evaluation

Outcome evaluation describes the effect your project had on your participants. You can learn how participants' knowledge, feelings (attitudes), or actions (behaviors) changed after taking part in the project. You also can track changes in clinical values, such as blood pressure and weight.

### Example

You give a questionnaire to participants before the first class and after the last class. You compare the results of the two questionnaires to see how much participants learned or how much they changed their behaviors.



# Three Ways To Offer the With Every Heartbeat Is Life Course in Your Community

Strategy	Goals	Description of Activities	Settings	Target Audience
<b>1. Train the Trainer</b>				
Learn how to teach the course	<ul style="list-style-type: none"> <li>▪ Increase the number of community health workers who are prepared to train others</li> <li>▪ Increase the use of the <i>With Every Heartbeat Is Life</i> manual by trained community health workers</li> <li>▪ Increase knowledge about heart health</li> <li>▪ Increase positive attitudes about a healthy lifestyle and behaviors</li> <li>▪ Increase participants' ability to identify risk factors for heart disease</li> </ul>	<p>Trained community health workers train others by:</p> <ul style="list-style-type: none"> <li>▪ Recruiting community health workers</li> <li>▪ Teaching the With Every Heartbeat Is Life course</li> <li>▪ Administering the pretest and posttest</li> <li>▪ Doing followups to make sure the community health workers are teaching all or parts of the course</li> </ul>	<p>Clinical and nonclinical:</p> <ul style="list-style-type: none"> <li>▪ Community-based organizations</li> <li>▪ Clinics</li> <li>▪ Hospitals</li> <li>▪ Public library</li> </ul>	<ul style="list-style-type: none"> <li>▪ Community health workers</li> <li>▪ Other health professionals like nurses, registered dietitians, nutritionists, and public health educators</li> </ul>
<b>2. Community Education</b>				
a. Teach the With Every Heartbeat Is Life course only	<ul style="list-style-type: none"> <li>▪ Increase knowledge about heart health</li> <li>▪ Increase positive attitudes about making healthy changes</li> <li>▪ Increase the adoption of healthy lifestyle behaviors</li> </ul>	<p>Trained community health workers who work in nonclinical settings:</p> <ul style="list-style-type: none"> <li>▪ Recruit members of the community</li> <li>▪ Teach the With Every Heartbeat Is Life course</li> <li>▪ Administer the "My Health Habits Pretest and Posttest"</li> </ul>	<p>Nonclinical:</p> <ul style="list-style-type: none"> <li>▪ Community-based organizations</li> <li>▪ Resource centers</li> <li>▪ Homes</li> <li>▪ Schools</li> <li>▪ Faith-based organizations</li> <li>▪ Senior centers</li> </ul>	<ul style="list-style-type: none"> <li>▪ Families and community members with signed informed consent forms</li> </ul>



# Three Ways To Offer the With Every Heartbeat Is Life Course in Your Community (continued)

Strategy	Goals	Description of Activities	Settings	Target Audience
<p><b>b.</b> Teach the With Every Heartbeat Is Life course and screen program participants</p>	<ul style="list-style-type: none"> <li>▪ Increase knowledge about heart health</li> <li>▪ Increase positive attitudes about making healthy changes</li> <li>▪ Increase the adoption of healthy lifestyle behaviors</li> <li>▪ Track participants' clinical data</li> <li>▪ Refer participants with elevated clinical measures to health care professionals</li> </ul>	<p>Trained community health workers working in nonclinical settings:</p> <ul style="list-style-type: none"> <li>▪ Recruit members of the community</li> <li>▪ Teach the With Every Heartbeat Is Life course</li> <li>▪ Administer the “My Health Habits Pretest and Posttest”</li> <li>▪ Take height, weight, and waist measurements</li> <li>▪ Measure participants' blood pressure, cholesterol, and blood sugar levels</li> <li>▪ Refer participants with elevated clinical measures to health care professionals</li> </ul>	<ul style="list-style-type: none"> <li>▪ Nonclinical but in partnership with a health care professional</li> </ul>	<ul style="list-style-type: none"> <li>▪ Families and community members with signed informed consent forms</li> </ul>



# Three Ways To Offer the With Every Heartbeat Is Life Course in Your Community (continued)

Strategy	Goals	Description of Activities	Settings	Target Audience
<b>3. Lifestyle and Clinical Management</b>				
Teach the With Every Heartbeat Is Life course; screen and manage program participants	<ul style="list-style-type: none"> <li>▪ Increase knowledge about heart health</li> <li>▪ Increase positive attitudes about making healthy changes</li> <li>▪ Increase adoption of healthy lifestyle behaviors</li> <li>▪ Lower BMI, blood pressure, cholesterol, and blood sugar levels</li> </ul>	<p>Trained community health workers who participate as members of the health care team:</p> <ul style="list-style-type: none"> <li>▪ Teach the With Every Heartbeat Is Life course to patients with heart disease risk factors and to patients interested in learning about heart health</li> <li>▪ Administer the “My Health Habits Pretest and Posttest”</li> <li>▪ Take patients’ height, weight, and waist measurements</li> <li>▪ Work with health care professionals to track patients’ blood pressure, cholesterol, and blood sugar</li> <li>▪ Do followup activities (home visits and phone calls) to make sure patients are following their treatment plans and making lifestyle changes</li> <li>▪ Provide social support and encouragement</li> </ul>	<ul style="list-style-type: none"> <li>▪ Clinics</li> <li>▪ Hospitals</li> <li>▪ Managed care programs</li> <li>▪ Health centers</li> <li>▪ Private health care providers’ offices</li> <li>▪ Health departments</li> </ul>	<ul style="list-style-type: none"> <li>▪ Patients with heart disease risk factors</li> <li>▪ Patients interested in learning about heart health</li> </ul>



# Outcome Evaluation Strategies and Forms

Strategy	Forms	Use This Form	Outcome Evaluation
<b>1. Train the Trainer</b>			
Learn how to teach the course	Community Health Workers Train the Trainer Pretest and Posttest	Before and after the training	<ul style="list-style-type: none"> <li>▪ Number and percentage of participants who learned more</li> <li>▪ Number and percentage of participants who changed their skills</li> </ul>
<b>2. Community Education</b>			
<b>a.</b> Teach the With Every Heartbeat Is Life course only	My Health Habits Pretest and Posttest	Before and after teaching the course	Number and percentage of participants who learned more and changed their attitudes and behaviors
<b>b.</b> Teach the With Every Heartbeat Is Life course and screen program participants	My Health Habits Pretest and Posttest	Before and after teaching the course	Number and percentage of participants who learned more and changed their attitudes and behaviors
	Screening Form	Before and after teaching the course	<ul style="list-style-type: none"> <li>▪ Number and percentage of participants referred to a health care professional</li> <li>▪ Number and percentage of participants who followed up with a health care professional</li> </ul>
<b>3. Lifestyle and Clinical Management</b>			
Teach the With Every Heartbeat Is Life course; screen and manage program participants	My Health Habits Pretest and Posttest	<ul style="list-style-type: none"> <li>▪ Before and after teaching the course</li> <li>▪ 12 months after collecting initial (baseline) data</li> </ul>	Number and percentage of patients who learned more and changed their attitudes and behaviors
	Clinical Measures and Followup	<ul style="list-style-type: none"> <li>▪ Before teaching the course (baseline)</li> <li>▪ 6 months after baseline</li> <li>▪ 12 months after baseline</li> </ul>	<ul style="list-style-type: none"> <li>▪ Number and percentage of patients whose clinical values changed</li> <li>▪ Number and percentage of patients who are taking their medications</li> </ul>
	Community Health Worker Activities Tracking	<ul style="list-style-type: none"> <li>▪ First followup encounter (after the course is taught)</li> <li>▪ 3-month followup</li> <li>▪ 6-month followup</li> <li>▪ 12-month followup</li> </ul>	Number and percentage of patients contacted for followup



# Community Health Worker Train the Trainer

## Pretest and Posttest

FOR INTERNAL USE ONLY

### For Strategy 1

**Participant identification (ID) number:** \_\_\_\_\_

**Name of teacher:** \_\_\_\_\_

- |  |                               |                |
|--|-------------------------------|----------------|
| <input type="checkbox"/> Pretest         | Start date (MM/DD/YYYY):      | ____/____/____ |
| <input type="checkbox"/> Posttest        | End date (MM/DD/YYYY):        | ____/____/____ |
| <input type="checkbox"/> 30-day followup | Date of contact (MM/DD/YYYY): | ____/____/____ |

**Was the participant contacted 30 days after training ended to get information about how they are using the *With Every Heartbeat Is Life* manual?**

- <sub>1</sub> Yes
- <sub>2</sub> No

**What activities is the participant doing?** \_\_\_\_\_

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# Community Health Worker Train the Trainer

## Pretest and Posttest (continued)

### Participant Information

Please tell us some information about yourself by completing this form **before the training**. Ask for assistance if you need it.

**1. Today's date** (MM/DD/YYYY): \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**2. Date of birth** (MM/DD/YYYY): \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**3. Age (in years):** \_\_\_\_\_

**4. Sex**

<sub>1</sub> Male

<sub>2</sub> Female

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**5. Do you consider yourself Latino or Hispanic?**

<sub>1</sub> Yes

<sub>2</sub> No

---

**6. Which race do you consider yourself to be?**

<sub>1</sub> Alaska Native

<sub>2</sub> American Indian

<sub>3</sub> Asian

<sub>4</sub> Black or African American

<sub>5</sub> Native Hawaiian or other Pacific Islander

<sub>6</sub> White

<sub>7</sub> Mixed race



# Community Health Worker Train the Trainer

## Pretest and Posttest (continued)

### Participant Information (continued)

#### 7. How many years of school have you completed?

- <sub>1</sub> Some elementary school
- <sub>2</sub> Finished elementary school
- <sub>3</sub> Some high school
- <sub>4</sub> Graduated from high school or received high school equivalency diploma (GED)
- <sub>5</sub> Some technical/vocational school
- <sub>6</sub> Graduated from technical/vocational school
- <sub>7</sub> Some college/university
- <sub>8</sub> Graduated from college/university
- <sub>9</sub> Some postgraduate school
- <sub>10</sub> Graduated from postgraduate school

---

#### 8. Have you worked as a community health worker before?

- <sub>1</sub> Yes
- <sub>2</sub> No

---

#### 9. If yes, for how long?

\_\_\_\_\_ years \_\_\_\_\_ months



# Community Health Worker Train the Trainer

## Pretest and Posttest (continued)

### Participant Information (continued)

**10. What health topics have you taught?** *(You may select more than one answer.)*

- <sub>1</sub> None
- <sub>2</sub> Asthma
- <sub>3</sub> Diabetes
- <sub>4</sub> Cancer
- <sub>5</sub> HIV/AIDS
- <sub>6</sub> Heart disease
- <sub>7</sub> Others (please specify): \_\_\_\_\_

**11. Have you used manuals to teach community members?**

- <sub>1</sub> Yes
- <sub>2</sub> No

If yes, please write the name(s) of the manual(s) that you have used.

---

---

---

**12. Is this your first training with the *With Every Heartbeat Is Life* manual?**

- <sub>1</sub> Yes
- <sub>2</sub> No



# Community Health Worker Train the Trainer

## Pretest and Posttest (continued)

**Please circle only one answer for each question.**

Mrs. Jones, who is 65 years old, is Gloria's mother. Mrs. Jones has diabetes and her blood pressure is 148/98 mmHg (millimeters of mercury). Her cholesterol level is 250 mg/dL (milligrams per deciliter). Mrs. Jones often buys microwave meals, gets breakfast at a fast food restaurant on her way to work, and salts the food she makes at home.

### 1. What are the factors that put Mrs. Jones at risk for heart disease?

- a. Using small amounts of salt at home, being physically inactive, and being overweight
- b. Having high blood pressure, having high cholesterol, and having low blood sugar
- c. Being an older woman, having high blood pressure, having high cholesterol, having diabetes, and eating a high-sodium diet
- d. Having high cholesterol, having low blood pressure, using lots of salt, and being physically inactive

---

### 2. A community health worker explains to Mrs. Jones what high blood pressure is, as follows:

- a. High blood pressure is the number that you get when you add 100 to your age.
- b. High blood pressure is when the body circulates more blood based on your height and weight.
- c. Talk to your health care provider if your blood pressure numbers are high for you.
- d. High blood pressure is when the blood suddenly stops going to the brain.

Answers: 1-c, 2-c



# Community Health Worker Train the Trainer

## Pretest and Posttest (continued)

**Please circle only one answer for each question.**

Gloria, the daughter of Mrs. Jones, is 30 years old and 25 pounds overweight. She likes to cook and likes to make fried food. When she doesn't have time to cook, she gets the special meals at fast food restaurants. Because of pain in her legs, Gloria drives her car everywhere. She enjoys watching TV and playing computer games with her friends. Gloria's cholesterol level is 240 mg/dL.

### **3. What are the factors that put Gloria at risk for heart disease?**

- a.** Having high cholesterol, walking, and being age 30 and overweight
- b.** Being overweight, having high blood pressure, and having a family history of heart disease
- c.** Being overweight, being physically inactive, and eating foods high in fat
- d.** Being age 30, having had a heart attack, and having low blood pressure

Answers: 3-b



# Community Health Worker Train the Trainer

## Pretest and Posttest (continued)

### 4. Which of these lifestyle changes can help people prevent heart disease?

Mark your answer with an X.

**a.** Reading the food label and choosing foods with less sodium, saturated fat, and sugar

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>3</sub> Don't know

**b.** Preparing foods by baking, broiling, or boiling, instead of frying

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>3</sub> Don't know

**c.** Drinking a lot of whole milk

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>3</sub> Don't know

**d.** Stocking the kitchen with potato chips

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>3</sub> Don't know

**e.** Cooking with lard

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>3</sub> Don't know

**f.** Eating large portions of food

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>3</sub> Don't know

**Answers:** 4 a,b-yes; 4 c,d,e, f-no



# Community Health Worker Train the Trainer

## Pretest and Posttest (continued)

### 5. This question is about food serving sizes.

Mark your answer with an X.

**a.** Is 1 cup of cooked oatmeal one serving?

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>3</sub> Don't know

**b.** Is 1 cup of cantaloupe one serving?

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>3</sub> Don't know

**c.** Is  $\frac{1}{2}$  cup of orange juice one serving?

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>3</sub> Don't know

**d.** Is 1 ounce of low-fat American cheese one serving?

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>3</sub> Don't know

**e.** Is 1 English muffin one serving?

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>3</sub> Don't know

**Answers:** 5 b,d,e-yes; 5 a, c-no



# Community Health Worker Train the Trainer

## Pretest and Posttest (continued)

### 6. Do you think the following actions are healthy?

*Mark your answer with an X.*

**a.** Removing the skin from chicken

- <sub>1</sub> Agree
- <sub>2</sub> Disagree
- <sub>3</sub> Don't know

**b.** Cooking with lard instead of canola, olive, or corn oil

- <sub>1</sub> Agree
- <sub>2</sub> Disagree
- <sub>3</sub> Don't know

**c.** Eating canned vegetables instead of fresh or frozen vegetables

- <sub>1</sub> Agree
- <sub>2</sub> Disagree
- <sub>3</sub> Don't know

**d.** Choosing regular sandwiches instead of super-sized sandwiches when eating out

- <sub>1</sub> Agree
- <sub>2</sub> Disagree
- <sub>3</sub> Don't know

**e.** Adding fruits and vegetables to your meals

- <sub>1</sub> Agree
- <sub>2</sub> Disagree
- <sub>3</sub> Don't know

**Answers:** 6 a, d, e-agree; 6 b,c-disagree



# Community Health Worker Train the Trainer

## Pretest and Posttest (continued)

### 7. Mark your answer with an X for the following statements.

a. Secondhand smoke isn't dangerous to your heart health.

- <sub>1</sub> Agree
- <sub>2</sub> Disagree
- <sub>3</sub> Don't know

b. The desirable level for LDL, the bad cholesterol, is less than 100 mg/dL.

- <sub>1</sub> Agree
- <sub>2</sub> Disagree
- <sub>3</sub> Don't know

c. Having a waist measurement greater than 35 inches is healthy for a woman.

- <sub>1</sub> Agree
- <sub>2</sub> Disagree
- <sub>3</sub> Don't know

d. Adults need about 2.5 hours of moderate to vigorous physical activity per week.

- <sub>1</sub> Agree
- <sub>2</sub> Disagree
- <sub>3</sub> Don't know

e. The A1C (blood) test shows the average blood sugar level during the last 3 months.

- <sub>1</sub> Agree
- <sub>2</sub> Disagree
- <sub>3</sub> Don't know

f. People know when they have high cholesterol because they begin to gain weight.

- <sub>1</sub> Agree
- <sub>2</sub> Disagree
- <sub>3</sub> Don't know

**Answers:** 7 b, d, e-agree; 7 a, c, f-disagree



# Community Health Worker Train the Trainer

## Pretest and Posttest (continued)

### 8. A heart healthy diet should be followed by the following people:

*Circle the answer below that you think correctly completes this statement.*

- a. Only people who have high cholesterol
- b. Only adults who have heart disease
- c. Everyone (after age 2) for their whole life
- d. Everyone between 40 and 65 years old

---

### 9. How important is it to you to reduce your risk of heart disease?

*Mark your answer with an X.*

- <sub>1</sub> Not important
- <sub>2</sub> Somewhat important
- <sub>3</sub> Important
- <sub>4</sub> Very important

---

### 10. How confident are you about teaching the With Every Heartbeat Is Life course to community members? *Mark your answer with an X.*

- <sub>1</sub> I am not confident.
- <sub>2</sub> I am somewhat confident.
- <sub>3</sub> I am confident.
- <sub>4</sub> I am very confident

**Answers:** 8-c



# Feedback Form

## What Did You Think About the Training?

### For Strategy 1

**Participant identification (ID) number** (Optional): \_\_\_\_\_

**Date (MM/DD/YYYY):** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_

*Mark your answer with an X.*

**1. The training you attended was:**

- (1) Poor
- (2) Fair
- (3) Good
- (4) Very Good
- (5) Excellent
- (6) N/A

**3. The picture cards were:**

- (1) Poor
- (2) Fair
- (3) Good
- (4) Very Good
- (5) Excellent
- (6) N/A

**2. The handouts in the manual were:**

- (1) Poor
- (2) Fair
- (3) Good
- (4) Very Good
- (5) Excellent
- (6) N/A

**4. The demonstrations were:**

- (1) Poor
- (2) Fair
- (3) Good
- (4) Very Good
- (5) Excellent
- (6) N/A



# Feedback Form

## What Did You Think About the Training? (continued)

### For Strategy 1 (continued)

#### 5. The visuals were:

- (1) Poor
- (2) Fair
- (3) Good
- (4) Very Good
- (5) Excellent
- (6) N/A

#### 7. The educational materials were:

- (1) Poor
- (2) Fair
- (3) Good
- (4) Very Good
- (5) Excellent
- (6) N/A

---

#### 6. The content presented was:

- (1) Poor
- (2) Fair
- (3) Good
- (4) Very Good
- (5) Excellent
- (6) N/A

---

#### 8. The trainer's knowledge of the course content was:

- (1) Poor
- (2) Fair
- (3) Good
- (4) Very Good
- (5) Excellent
- (6) N/A



# Feedback Form

## What Did You Think About the Training? (continued)

### For Strategy 1 (continued)

#### 9. The way the trainer taught the course was:

- (1) Poor
- (2) Fair
- (3) Good
- (4) Very Good
- (5) Excellent
- (6) N/A

#### 10. The activities you participated in (role plays, pledges, etc.) were:

- (1) Poor
- (2) Fair
- (3) Good
- (4) Very Good
- (5) Excellent
- (6) N/A

---

Write your answers to the following questions:

#### 11. What did you like best about the training?

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---

#### 12. What did you like least about the training?

---

---

#### 13. Are there any areas that should be improved for future trainings?

---

---



# Feedback Form

## What Did You Think About the Training? (continued)

### For Strategy 1 (continued)

**14. Will you teach the With Every Heartbeat Is Life course to community members?**

- (1) I will not
- (2) Most likely I will not
- (3) May or may not
- (4) Most likely I will
- (5) I will

**17. Will you share the information from the training with friends?**

- (1) I will not
- (2) Most likely I will not
- (3) May or may not
- (4) Most likely I will
- (5) I will

**15. Will you change your health habits?**

- (1) I will not
- (2) Most likely I will not
- (3) May or may not
- (4) Most likely I will
- (5) I will

**18. Will you share the information from the training with community health workers?**

- (1) I will not
- (2) Most likely I will not
- (3) May or may not
- (4) Most likely I will
- (5) I will

**16. Will you share the information from the training with your family?**

- (1) I will not
- (2) Most likely I will not
- (3) May or may not
- (4) Most likely I will
- (5) I will



# Feedback Form

## What Did You Think About the Training? (continued)

### For Strategy 1 (continued)

#### 19. Are there other ways that you can share the information?

<sub>1</sub> Yes

<sub>2</sub> No

a. If yes, please explain:

---

#### 20. What changes will you make as a result of participating in the training?

---

---

#### 21. Other comments:

---

---



# My Health Habits

## Pretest and Posttest

FOR INTERNAL USE ONLY

### For Strategies 2a, 2b, and 3

- <sub>1</sub> Pretest                      Start Date (MM/DD/YYYY):      \_\_\_\_/\_\_\_\_/\_\_\_\_
- <sub>2</sub> Posttest                      End Date (MM/DD/YYYY):      \_\_\_\_/\_\_\_\_/\_\_\_\_

**Name of person administering the “My Health Habits” questionnaire:**

---

#### Location:

- <sub>1</sub> Clinic:  
Patient identification (ID) number: \_\_\_\_\_
- <sub>1</sub> Community-based organization:  
Participant identification (ID) number: \_\_\_\_\_
- <sub>1</sub> Other: \_\_\_\_\_  
Participant identification (ID) number: \_\_\_\_\_



# My Health Habits

## Pretest and Posttest (continued)

### Participant Information

1. **Today's date** (MM/DD/YYYY): \_\_\_\_ / \_\_\_\_ / \_\_\_\_

2. **Date of birth** (MM/DD/YYYY): \_\_\_\_ / \_\_\_\_ / \_\_\_\_

3. **Age (in years):** \_\_\_\_\_

#### 4. Sex

<sub>1</sub> Male

<sub>2</sub> Female

---

#### 5. Do you consider yourself Latino or Hispanic?

<sub>1</sub> Yes

<sub>2</sub> No

---

#### 6. Which race do you consider yourself to be?

<sub>1</sub> Alaska Native

<sub>2</sub> American Indian

<sub>3</sub> Asian

<sub>4</sub> Black or African American

<sub>5</sub> Native Hawaiian or other Pacific Islander

<sub>6</sub> White

<sub>7</sub> Mixed race



# My Health Habits

## Pretest and Posttest (continued)

### Participant Information (continued)

#### 7. Have you been told by a health care professional that you have diabetes?

- <sub>1</sub> Yes
  - <sub>2</sub> No
  - <sub>3</sub> Don't know
- 

#### 8. Does your family have a history of heart disease?

- <sub>1</sub> Yes
  - <sub>2</sub> No
  - <sub>3</sub> Don't know
- 

#### 9. Do you have any heart disease risk factors?

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>3</sub> Don't know



# My Health Habits

## Pretest and Posttest (continued)

### Salt and Sodium

How often do you do the following? *Mark your answer with an X.*

**1. Do you buy fresh vegetables or low- or no-sodium canned vegetables?**

- <sub>1</sub> Never
- <sub>2</sub> Sometimes
- <sub>3</sub> Most of the time
- <sub>4</sub> All the time

**4. Do you cook from scratch to avoid high-sodium prepackaged foods?**

- <sub>1</sub> Never
- <sub>2</sub> Sometimes
- <sub>3</sub> Most of the time
- <sub>4</sub> All the time

**2. Do you use bouillon cubes when you cook?**

- <sub>1</sub> Never
- <sub>2</sub> Sometimes
- <sub>3</sub> Most of the time
- <sub>4</sub> All the time

**5. Do you add salt to the water when you cook beans, rice, pasta, or vegetables?**

- <sub>1</sub> Never
- <sub>2</sub> Sometimes
- <sub>3</sub> Most of the time
- <sub>4</sub> All the time

**3. Do you read labels to choose low- or no-sodium foods?**

- <sub>1</sub> Never
- <sub>2</sub> Sometimes
- <sub>3</sub> Most of the time
- <sub>4</sub> All the time

**6. Do you buy meats such as ham, bologna, hot dogs, or sausage?**

- <sub>1</sub> Never
- <sub>2</sub> Sometimes
- <sub>3</sub> Most of the time
- <sub>4</sub> All the time



# My Health Habits

## Pretest and Posttest (continued)

### Salt and Sodium (continued)

How often do you do the following? *Mark your answer with an X.*

#### 7. Do you use a salt shaker at the table?

- <sub>1</sub> Never
- <sub>2</sub> Sometimes
- <sub>3</sub> Most of the time
- <sub>4</sub> All the time

#### 9. Do you choose fruits and vegetables instead of potato chips, French fries, and pork rinds?

- <sub>1</sub> Never
- <sub>2</sub> Sometimes
- <sub>3</sub> Most of the time
- <sub>4</sub> All the time

---

#### 8. Do you fill the salt shaker with a mixture of herbs and spices instead of salt?

- <sub>1</sub> Never
- <sub>2</sub> Sometimes
- <sub>3</sub> Most of the time
- <sub>4</sub> All the time



# My Health Habits

## Pretest and Posttest (continued)

### Saturated Fat

How often do you do the following? *Mark your answer with an X.*

**1. Do you choose fat-free milk or 1% milk when you have milk?**

- <sub>1</sub> Never
- <sub>2</sub> Sometimes
- <sub>3</sub> Most of the time
- <sub>4</sub> All the time

**3. Do you use vegetable oil to grease baking pans and skillets instead of using lard or butter?**

- <sub>1</sub> Never
- <sub>2</sub> Sometimes
- <sub>3</sub> Most of the time
- <sub>4</sub> All the time

---

**2. Do you choose low-fat cheese?**

- <sub>1</sub> Never
- <sub>2</sub> Sometimes
- <sub>3</sub> Most of the time
- <sub>4</sub> All the time

---

**4. Do you read the food label to help you choose foods lower in saturated fat, sugar, and sodium?**

- <sub>1</sub> Never
- <sub>2</sub> Sometimes
- <sub>3</sub> Most of the time
- <sub>4</sub> All the time



# My Health Habits

## Pretest and Posttest (continued)

### Saturated Fat (continued)

How often do you do the following? *Mark your answer with an X.*

**5. Do you remove the skin before cooking chicken?**

- <sub>1</sub> Never
- <sub>2</sub> Sometimes
- <sub>3</sub> Most of the time
- <sub>4</sub> All the time

**7. Do you choose fat-free or low-fat salad dressing or mayonnaise?**

- <sub>1</sub> Never
- <sub>2</sub> Sometimes
- <sub>3</sub> Most of the time
- <sub>4</sub> All the time

---

**6. Do you drain the fat and throw it away when you cook ground meat?**

- <sub>1</sub> Never
- <sub>2</sub> Sometimes
- <sub>3</sub> Most of the time
- <sub>4</sub> All the time

---

**8. Do you use vegetable oil to prepare your food instead of using lard?**

- <sub>1</sub> Never
- <sub>2</sub> Sometimes
- <sub>3</sub> Most of the time
- <sub>4</sub> All the time



# My Health Habits

## Pretest and Posttest (continued)

### Weight Management

How often do you do the following? *Mark your answer with an X.*

**1. Do you read labels to choose foods lower in calories?**

- <sub>1</sub> Never
- <sub>2</sub> Sometimes
- <sub>3</sub> Most of the time
- <sub>4</sub> All the time

**3. Do you put more vegetables on your plate than you do meat?**

- <sub>1</sub> Never
- <sub>2</sub> Sometimes
- <sub>3</sub> Most of the time
- <sub>4</sub> All the time

---

**2. Do you bake or grill chicken or other foods instead of frying them?**

- <sub>1</sub> Never
- <sub>2</sub> Sometimes
- <sub>3</sub> Most of the time
- <sub>4</sub> All the time

---

**4. Do you serve yourself large portions of food?**

- <sub>1</sub> Never
- <sub>2</sub> Sometimes
- <sub>3</sub> Most of the time
- <sub>4</sub> All the time



# My Health Habits

## Pretest and Posttest (continued)

### Weight Management (continued)

How often do you do the following? *Mark your answer with an X.*

#### 5. Do you drink water or unsweetened tea instead of regular soda?

- <sub>1</sub> Never
- <sub>2</sub> Sometimes
- <sub>3</sub> Most of the time
- <sub>4</sub> All the time

#### 7. Do you eat fruit instead of desserts or snacks that have a lot of sugar?

- <sub>1</sub> Never
- <sub>3</sub> Sometimes
- <sub>3</sub> Most of the time
- <sub>4</sub> All the time

---

#### 6. Do you drink lemonade with sugar or powdered drinks with sugar?

- <sub>1</sub> Never
- <sub>2</sub> Sometimes
- <sub>3</sub> Most of the time
- <sub>4</sub> All the time

---

#### 8. Do you eat more when you feel stressed?

- <sub>1</sub> Never
- <sub>2</sub> Sometimes
- <sub>3</sub> Most of the time
- <sub>4</sub> All the time



# My Health Habits

## Pretest and Posttest (continued)

### Physical Activity

Mark your answer with an X.

**1. Do you do any type of physical activity at your job?**

- <sub>1</sub> Yes
- <sub>2</sub> No

**2. Not including what you do at your job, do you do any other physical activity?**

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>3</sub> If yes, answer the following questions. If no, go to **Smoking**

**a.** What type of physical activity do you do?  
*You may select more than one answer.*

- <sub>1</sub> Walking
- <sub>2</sub> Aerobic exercise
- <sub>3</sub> Playing sports
- <sub>4</sub> Other (please specify): \_\_\_\_\_

**c.** How many minutes per day do you do physical activity?

- <sub>1</sub> Less than 30 minutes
- <sub>2</sub> 30 to 59 minutes
- <sub>3</sub> 60 minutes or more

**b.** How often do you do physical activity?

- <sub>1</sub> Rarely (1 day a week)
- <sub>2</sub> Several times a week  
(2 to 6 days a week)
- <sub>3</sub> Every day



# My Health Habits

## Pretest and Posttest (continued)

### Smoking

Mark your answer with an X.

#### 1. Do you smoke?

<sub>1</sub> Yes

<sub>2</sub> No

---

#### 2. Does anyone else in your family smoke?

<sub>1</sub> Yes

<sub>2</sub> No

---

#### 3. Do you allow people to smoke in your home?

<sub>1</sub> Yes

<sub>2</sub> No



# My Health Habits

## Pretest and Posttest (continued)

### Alcohol

Mark your answer with an X.

**NOTE**



One drink is one beer (12 ounces) OR one glass of wine (5 ounces) OR 1½ ounces of distilled spirits (liquor, straight or in a mixed drink). Moderate drinking is up to 1 drink per day for women and up to 2 drinks per day for men.

#### 1. Do you drink alcohol?

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>3</sub> If yes, answer the following questions. If no, go to **Knowledge**.

---

##### a. How often do you drink?

- <sub>1</sub> Rarely (on special occasions)
- <sub>2</sub> Occasionally (once a month)
- <sub>3</sub> Once a week
- <sub>4</sub> Regularly (several times a week)
- <sub>5</sub> Every day

---

##### c. How often do you drink more than three drinks in one day?

- <sub>1</sub> Never
- <sub>2</sub> Once or twice a week
- <sub>3</sub> Three to six times per week
- <sub>4</sub> Every day

---

##### b. When you drink, how many drinks do you have per occasion?

- <sub>1</sub> One to two drinks
- <sub>2</sub> Three to four drinks
- <sub>3</sub> Five or more drinks



# My Health Habits

## Pretest and Posttest (continued)

### Knowledge

Mark your answer with an X.

**1. Can your waist measurement indicate that you have a high risk of heart disease?**

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>3</sub> Don't know

**4. Can eating foods that are high in sodium increase your risk of high blood pressure?**

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>3</sub> Don't know

---

**2. Can the BMI chart tell you if you're overweight?**

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>3</sub> Don't know

---

**5. Does lard have a low amount of saturated fat?**

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>3</sub> Don't know

---

**3. Does your liver make all of the cholesterol your body needs to be healthy?**

- <sub>1</sub> Yes
- <sub>3</sub> No
- <sub>3</sub> Don't know

---

**6. Can eating too much saturated fat raise your cholesterol level?**

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>3</sub> Don't know

**Answers:** 1, 2, 3, 4, 6 -yes; 5-no



# My Health Habits

## Pretest and Posttest (continued)

### Knowledge (continued)

Mark your answer with an X.

**7. Is a consistent blood pressure of 140/90 mmHg considered high?**

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>3</sub> Don't know

**9. Is being physically active a way to reduce your risk for heart disease?**

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>3</sub> Don't know

---

**8. If you haven't gained weight, does that mean your cholesterol is fine?**

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>3</sub> Don't know

---

**10. Is it only people with high cholesterol who need to follow a heart healthy diet?**

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>3</sub> Don't know

**Answers:** 7, 9-yes; 8, 10-no



# My Health Habits

## Pretest and Posttest (continued)

### Knowledge (continued)

Mark your answer with an X.

**11. Can nonsmokers die from secondhand smoke?**

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>3</sub> Don't know

**13. Is having a waist measurement greater than 35 inches healthy for a woman?**

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>3</sub> Don't know

---

**12. Is having a fasting blood sugar of 126 mg/dL or higher considered diabetes?**

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>3</sub> Don't know

---

**14. How confident are you in your ability to cook heart healthy foods?**

- <sub>1</sub> Not confident
- <sub>2</sub> Somewhat confident
- <sub>3</sub> Confident
- <sub>4</sub> Very confident

**Answers:** 11, 12-yes; 13-no



# My Health Habits

## Pretest and Posttest (continued)

### A Day With the Harris Family

People act in different ways when they learn they need to make lifestyle changes to lower their chances of getting heart disease.

Read about how the members of the Harris family react to the news about their risks for heart disease. Then place an X next to the name of the family member with whom you identify the most.



#### **The Disbeliever**

It takes awhile and some convincing for Darnell to decide to take care of his heart. At first he says he isn't concerned that he's at risk for heart disease. He doesn't intend to change. "Nothing's going to happen to me," he says.



#### **The Frustrated**

James is frustrated because he's aware of his risk factors for heart disease, he's made some changes, but he can't control all of them. "Sometimes you try as hard as you can, but if there's a brick wall standing between you and your goal, what can you do?" says James.



#### **The Well Intentioned**

When Pam first learns that she's at risk for heart disease, she's going to take action right away to improve her health. But instead, for a long time, she puts it off. "It's harder walking the walk than talking the talk," she says.



#### **The Active**

Ms. Diane (Grandma Harris) learns that she's at risk for heart disease and quickly makes a plan. She gets information and attends classes to learn how to improve her health. She makes healthy lifestyle changes, sets reasonable goals, and helps others to do the same. "Once you know better, you owe it to yourself to do better," says Ms. Diane.



#### **The Believer**

Kayla is very motivated to make changes to improve her health. She knows it's easy to fall back into old habits. She makes plans to prevent setbacks, but starts over again when they happen. Kayla believes she and her family can achieve a heart healthy lifestyle. She has a positive attitude, asks for help when needed, and doesn't give up. "If I just believe it, then I can do it!" says Kayla.



# My Health Habits

## Posttest Only (continued)

Please answer these questions after completing all of the sessions of the With Every Heartbeat Is Life course. *Mark your answer with an X.*

### 1. How satisfied are you with the With Every Heartbeat Is Life sessions presented by community health workers?

- <sub>1</sub> Not satisfied
- <sub>2</sub> Somewhat satisfied
- <sub>3</sub> Satisfied
- <sub>4</sub> Very satisfied

---

### 2. With whom have you shared the information from the sessions?

*Mark your answer with an X. You can select more than one answer.*

- <sub>1</sub> Friends
- <sub>2</sub> Family
- <sub>3</sub> Coworkers
- <sub>4</sub> Others (please specify): \_\_\_\_\_



# Screening Form

FOR INTERNAL USE ONLY

## For Strategy 2b

**Participant identification (ID) number:** \_\_\_\_\_

**Name of person completeing the form:** \_\_\_\_\_

**Community health worker identification (ID) number:** \_\_\_\_\_

**Location:**

<sub>1</sub> Community-based organization: \_\_\_\_\_

<sub>2</sub> Other setting (please specify): \_\_\_\_\_

**Name of partnering organization:** \_\_\_\_\_



# Screening Form (continued)

Use this chart to record the screening information from each participant

Measurement	Pretest Date (MM/DD/YY) ____ / ____ / ____	Posttest Date (MM/DD/YY) ____ / ____ / ____
<b>Blood Pressure (Average of two readings)</b>		
Systolic (top number)	_____ mmHg	_____ mmHg
Diastolic (bottom number)	_____ mmHg	_____ mmHg
<b>Overweight and Obesity</b>		
Height	_____ feet _____ inches	_____ feet _____ inches
Weight	_____ pounds	_____ pounds
BMI	_____ BMI	_____ BMI
Waist measurement	_____ inches	_____ inches
<b>Cholesterol</b>		
Total	_____ mg/dL	_____ mg/dL
LDL	_____ mg/dL	_____ mg/dL
HDL	_____ mg/dL	_____ mg/dL
Triglycerides	_____ mg/dL	_____ mg/dL
<b>Blood Sugar</b>		
A1C	_____ %	_____ %
Blood sugar level (nonfasting)	_____ mg/dL	_____ mg/dL
Blood sugar level (fasting)	_____ mg/dL	_____ mg/dL

**Refer all participants with elevated levels for further evaluation.**

1. Does participant have elevated level(s)?

- <sub>1</sub> Yes
- <sub>2</sub> No

2. Did the participant go for followup care?

- <sub>1</sub> Yes
- <sub>2</sub> No

If yes, participant was referred to:

\_\_\_\_\_



# Clinical Measures and Followup Form

FOR INTERNAL USE ONLY

## For Strategy 3

**Participant identification (ID) number:** \_\_\_\_\_

**Name of person completing the form:** \_\_\_\_\_

**Community health worker identification (ID) number:** \_\_\_\_\_

**Location:**

Clinic



# Clinical Measures and Followup Form (continued)

## Participant Information

1. **Today's date** (MM/DD/YYYY): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

2. **Age (in years):** \_\_\_\_\_

3. **Sex**

- <sub>1</sub> Male  
 <sub>2</sub> Female

---

4. **Do you consider yourself Latino or Hispanic?**

- <sub>1</sub> Yes  
 <sub>2</sub> No

---

6. **Does your family have a history of heart disease?**

- <sub>1</sub> Yes  
 <sub>2</sub> No  
 <sub>3</sub> Don't know

---

5. **Which race do you consider yourself to be?**

- <sub>1</sub> Alaska Native  
 <sub>2</sub> American Indian  
 <sub>3</sub> Asian  
 <sub>4</sub> Black or African American  
 <sub>5</sub> Native Hawaiian or other Pacific Islander  
 <sub>6</sub> White  
 <sub>7</sub> Mixed race

---

7. **Do you have any heart disease risk factors?**

- <sub>1</sub> Yes  
 <sub>2</sub> No  
 <sub>3</sub> Don't know



# Clinical Measures and Followup Form (continued)

## Participant Information (continued)

Measurement	Baseline Date: ___ / ___ / ___	6 months after baseline Date: ___ / ___ / ___	12 months after baseline Date: ___ / ___ / ___
<b>8. Cholesterol</b>			
Have you been told by a health care provider that you have high cholesterol?	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
Are you on medication?	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
Total	_____ mg/dL	_____ mg/dL	_____ mg/dL
LDL	_____ mg/dL	_____ mg/dL	_____ mg/dL
HDL	_____ mg/dL	_____ mg/dL	_____ mg/dL
Triglycerides	_____ mg/dL	_____ mg/dL	_____ mg/dL
<b>9. Blood Pressure</b>			
Have you been told by a doctor or other health professional that you have high blood pressure?	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
Are you on medication?	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
Systolic	_____ mmHg	_____ mmHg	_____ mmHg
Diastolic	_____ mmHg	_____ mmHg	_____ mmHg



# Clinical Measures and Followup Form (continued)

## Participant Information (continued)

Measurement	Baseline Date: ___ / ___ / ___	6 months after baseline Date: ___ / ___ / ___	12 months after baseline Date: ___ / ___ / ___
<b>10. Diabetes</b>			
Have you been told by a health care provider that you have prediabetes?	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
Have you been told by a health care provider that you have high blood sugar levels?	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
Are you on medication?	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
A1C	_____ %	_____ %	_____ %
Blood sugar level (fasting)	_____ mg/dL	_____ mg/dL	_____ mg/dL
<b>11. Overweight and Obesity</b>			
Weight	_____ pounds	_____ pounds	_____ pounds
Height	_____ feet _____ inches	_____ feet _____ inches	_____ feet _____ inches
BMI	_____ BMI	_____ BMI	_____ BMI
Waist measurement	_____ inches	_____ inches	_____ inches
<b>12. Medication</b> <i>(If the patient is on medication[s], ask the question below.)</i>			
Do you take your medication as prescribed by your health care provider?	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No



# Clinical Measures and Followup Form (continued)

## Participant Information (continued)

Measurement	Baseline Date: ___ / ___ / ___	6 months after baseline Date: ___ / ___ / ___	12 months after baseline Date: ___ / ___ / ___
<b>13. If the answer to question 12 is “no,” please ask the patient: “Can you tell me why you’re not taking your medication?”</b> <i>(Based on the patient’s response, please check all the answers that apply.)</i>			
<b>a.</b> I believe taking medication every day isn’t good for me.	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
<b>b.</b> I forget to take my medication.	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
<b>c.</b> My provider’s directions were confusing.	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
<b>d.</b> I stopped taking medication when I felt better.	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
<b>e.</b> I feel sick when I take the medication.	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
<b>f.</b> I don’t have anyone to help me.	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
<b>g.</b> The medication is too expensive.	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
<b>h.</b> Other reason (please specify):	_____	_____	_____



# Community Health Worker Activities Form

FOR INTERNAL USE ONLY

## For Strategy 3

Please complete this form after the course is taught, to record the encounters with the patient.

**Participant identification (ID) number:** \_\_\_\_\_

**Name of person completing the form:** \_\_\_\_\_

**Community health worker identification (ID) number:** \_\_\_\_\_

**Name of person who taught the course:** \_\_\_\_\_

**Location:**

Clinic



# Community Health Worker Activities Form (continued)

## For Strategy 3 (continued)

Which of the following activities do you do for your patients? *Mark your answer with an X.*

Activities	First followup encounter Date: ___/___/___	3 month followup Date: ___/___/___	6 month followup Date: ___/___/___	12 month followup Date: ___/___/___
1. Listen to their concerns	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
2. Make appointments for them	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
3. Remind them to keep appointments	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
4. Make transportation arrangements	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
5. Serve as interpreter	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
6. Provide counseling/educational materials	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
7. Go over counseling/educational materials	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
8. Ask if they have any questions about their medication	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
9. Encourage them to stay on their treatment plan	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
10. Give suggestions for how to remember to take their medicine	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No



# Community Health Worker Activities Form (continued)

## For Strategy 3 (continued)

Which of the following activities do you do for your patients? *Mark your answer with an X.*

Activities	First followup encounter Date: ___/___/___	3 month followup Date: ___/___/___	6 month followup Date: ___/___/___	12 month followup Date: ___/___/___
11. Ask about difficulties with changing their lifestyle habits	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
12. Explain the benefits of changing their lifestyle	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
13. Encourage them to participate in support groups	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
14. Refer them to health and community services	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
15. Conduct followup home visit	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
16. Make followup phone calls	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
17. Write down what you discussed during the home visit or phone call	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
18. Meet with your supervisor on a regular basis	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
19. File notes in their chart	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No
20. Other: _____	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No	<input type="checkbox"/> <sub>1</sub> Yes <input type="checkbox"/> <sub>2</sub> No



# Recording Log

## Strategies 1, 2a, 2b, and 3

Strategy	Use This Form	Information
<b>1. Train the Trainer</b>		
Learn how to teach the course	Attendance record	<ul style="list-style-type: none"> <li>Number of participants trained _____</li> <li>Number of sessions taught _____</li> </ul>
	Feedback Form	<ul style="list-style-type: none"> <li>Number and percentage of participants who rate the training “good” or higher _____</li> <li>Number and percentage of participants who report that they “will” or “most likely will” change their health habits _____</li> </ul>
	Community Health Workers Train the Trainer (Posttest Only)	<ul style="list-style-type: none"> <li>Number and percentage of participants using the <i>With Every Heartbeat Is Life</i> manual 30 days after the training _____</li> <li>Types of activities that participants are completing 30 days after the training _____</li> </ul>
<b>2. Community Education</b>		
a. Teach the course only	Attendance record	<ul style="list-style-type: none"> <li>Number of participants trained _____</li> <li>Number of sessions taught _____</li> </ul>
	My Health Habits Posttest	<ul style="list-style-type: none"> <li>Number of participants satisfied with the course _____</li> <li>Number of participants who shared information about the course _____</li> </ul>
b. Teach the course and screen program participants	My Health Habits Posttest	<ul style="list-style-type: none"> <li>Number of participants satisfied with the course _____</li> <li>Number of participants who shared information about the course _____</li> </ul>
	Screening Form	<ul style="list-style-type: none"> <li>Number of participants screened _____</li> <li>Number of participants with elevated clinical values _____</li> <li>Number of participants referred to a health care professional _____</li> <li>Number of participants who followed up with a health care professional _____</li> </ul>



# Recording Log (continued)

## Strategies 1, 2a, 2b, and 3 (continued)

Strategy	Use This Form	Information																																																												
<b>3. Lifestyle and Clinical Management</b>																																																														
Teach the With Every Heartbeat Is Life course; screen and manage program participants	Attendance Record	<ul style="list-style-type: none"> <li>Number of patients counseled/taught _____</li> <li>Number of sessions taught _____</li> </ul>																																																												
	My Health Habits Posttest	<ul style="list-style-type: none"> <li>Number of participants satisfied with the With Every Heartbeat Is Life course _____</li> <li>Number of participants who shared information about the With Every Heartbeat Is Life course _____</li> </ul>																																																												
	Clinical Measures and Followup Form	<table border="1"> <thead> <tr> <th>Information</th> <th>Baseline</th> <th>6 months</th> <th>12 months</th> </tr> </thead> <tbody> <tr> <td>Number of patients screened</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Number of patients with:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>▪ Prehypertension</td> <td></td> <td></td> <td></td> </tr> <tr> <td>▪ High blood pressure</td> <td></td> <td></td> <td></td> </tr> <tr> <td>▪ High cholesterol</td> <td></td> <td></td> <td></td> </tr> <tr> <td>▪ Prediabetes</td> <td></td> <td></td> <td></td> </tr> <tr> <td>▪ High blood sugar</td> <td></td> <td></td> <td></td> </tr> <tr> <td>▪ BMI of 25 or more</td> <td></td> <td></td> <td></td> </tr> <tr> <td>▪ Waist measurement greater than 35 inches (for women)</td> <td></td> <td></td> <td></td> </tr> <tr> <td>▪ Waist measurement greater than 40 inches (for men)</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Number of patients taking medications for:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>▪ High blood pressure</td> <td></td> <td></td> <td></td> </tr> <tr> <td>▪ High cholesterol</td> <td></td> <td></td> <td></td> </tr> <tr> <td>▪ Diabetes</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Information	Baseline	6 months	12 months	Number of patients screened				Number of patients with:				▪ Prehypertension				▪ High blood pressure				▪ High cholesterol				▪ Prediabetes				▪ High blood sugar				▪ BMI of 25 or more				▪ Waist measurement greater than 35 inches (for women)				▪ Waist measurement greater than 40 inches (for men)				Number of patients taking medications for:				▪ High blood pressure				▪ High cholesterol				▪ Diabetes			
	Information	Baseline	6 months	12 months																																																										
Number of patients screened																																																														
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Number of patients taking medications for:																																																														
▪ High blood pressure																																																														
▪ High cholesterol																																																														
▪ Diabetes																																																														
Community Health Worker Activities Form	<ul style="list-style-type: none"> <li>Number of patients contacted at first encounter _____</li> <li>Number of patients contacted at 3 months _____</li> <li>Number of patients contacted at 6 months _____</li> <li>Number of patients contacted at 12 months _____</li> <li>Listed the activities community health workers conducted at first encounter, at 3 months, at 6 months, and at 12 months _____</li> </ul>																																																													



# Tips for Collecting Data

## Before you begin:

- Check with your organization. It or its Institutional Review Board may need to approve the data collection forms before you use them. You need to protect participants' privacy and get their consent when doing evaluations. You'll need to follow the policies of your organization and your funding agency.
- Make sure you understand how to fill out a questionnaire before you ask others to fill it out. Know the form well, so you can answer any questions participants may have.

## When you administer a questionnaire:

- Bring plenty of forms and pens with you.
- Ask participants to answer each question completely. Missing information will make it hard for you to analyze the data.
- If the budget allows, give a small prize to thank people who sign up for the program or fill out your form.
- Always remember to thank participants.

### NOTE



During the pretest and posttest, you can **read** the questions out loud if people need help with their forms. Don't give answers to the questions.



# Develop an Evaluation Workplan

Write your workplan to evaluate With Every Heartbeat Is Life. Here are three examples of what to do. These examples can help you think through your own evaluation plan.

## Example 1: Training Community Health Workers To Promote the With Every Heartbeat Is Life Course in Your Community

- Your agency has agreed to conduct a With Every Heartbeat Is Life Train the Trainer workshop for 25 community health workers from community agencies.
- Your supervisor asks you and two other community health workers to plan a Train the Trainer workshop and develop the evaluation plan.

Who is your target audience?	What strategy will you use?	Which forms will you use to collect the data?	What activities will you use to conduct the evaluation?	Who will manage the data?	Who will write the evaluation report?
			<p>How will you recruit participants?</p> <p>When will you schedule the workshop?</p> <p>Who will teach the workshop?</p>	<p>Who will collect the data?</p> <p>Who will enter the data?</p> <p>Who will analyze the collected data?</p>	



# Develop an Evaluation Workplan (continued)

## Example 2: Helping Community Members Make Heart Healthy Lifestyle Changes

- Your community-based organization is in Baltimore.
- Your supervisor asks you to help develop the evaluation plan for the With Every Heartbeat Is Life course.
- The course is for adults ages 30 to 60.
- The goal is to recruit, teach, and increase the knowledge, attitudes, and skills of the community members attending the course.

Who is your target audience?	What strategy will you use?	Which forms will you use to collect the data?	What activities will you use to conduct the evaluation?	Who will manage the data?	Who will write the evaluation report?
			<p>How will you recruit participants?</p> <p>When will you schedule the classes?</p> <p>Who will teach the classes?</p>		



# Develop an Evaluation Workplan (continued)

## Example 3: Helping Patients Manage Their Risk Factors for Heart Disease and Make Lifestyle Changes

- Your clinic is located in Southeast Washington, D.C.
- Your clinic has decided to get involved in a comprehensive project on heart health to help patients change their behaviors and lower their clinical levels (such as blood pressure, cholesterol, and blood sugar).
- You and two other community health workers attended a community health workers conference and received the *With Every Heartbeat Is Life* manual.
- Now, your supervisor wants your group to develop activities and an evaluation plan for the project.

Who is your target audience?	What strategy will you use?	Which forms will you use to collect the data?	What activities will you use to conduct the evaluation?	Who will manage the data?	Who will write the evaluation report?
			<p>How will you recruit participants?</p> <p>When will you schedule the classes?</p> <p>Who will teach the classes?</p>		

# Activities for Training Community Health Workers

An illustration of two hands, one light brown and one dark brown, cupping a red heart. The hands are positioned as if holding the heart gently. The background is a solid red color at the top, transitioning into the hands and heart, and then a dark purple color at the bottom.

“Growing is the reward of learning.”

– *Malcolm X*



## Activities for Training Community Health Workers

You can use the *With Every Heartbeat Is Life* manual to teach community health workers about heart health and to train them to teach the course to community members or other community health workers.

### About This Appendix

This appendix covers:

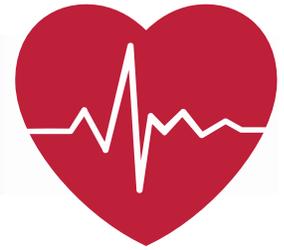
- Preparing To Make a Presentation (pages A.2-A.6)
- Tips To Teach the *With Every Heartbeat Is Life* course (page A.7)
- 12 Ground Rules for Teaching Groups (page A.8)
- *With Every Heartbeat Is Life: Topics for Practice* (page A.9)
- *Join the Fight Against Heart Disease in the African American Community* flyer (page A.10)

**Part 1** of this appendix has activities to help community health workers develop skills needed to teach *With Every Heartbeat Is Life*, including to make presentations to community groups. You'll find suggestions for leading a group, as well as opportunities for community health workers to practice presenting. Part 1 also suggests topics you can teach about.

Use the flyer on [page A.10](#) as one of your tools to publicize your community health worker training. Post the flyer in local clinics and organizations, and ask community leaders for help in finding people for your training

**Part 2** of this appendix has four activities that community health workers can offer as part of the course.

# Appendix Part 1



## Preparing To Make a Presentation

### At the end of Session 1

#### NOTE



You'll cover the Preparing To Make a Presentation material after you finish Session 1 (*Knowledge Is Power: Know Your Risk for Heart Disease*).

#### SAY

Community health workers shouldn't give medical advice. Instead, give information and support to encourage people to live healthier lives and to get health care.

#### NOTE



**Give** each participant the "Tips To Teach the With Every Heartbeat Is Life Course" handout (page A.7) and the "12 Ground Rules for Teaching Groups" handout (page A.8).

#### SAY

You'll have the opportunity to practice teaching the material in the manual during a later session. Now we're going to discuss how to present the With Every Heartbeat Is Life course effectively.

Please read the handouts, and when you're done we'll talk about their suggestions. I recommend using these handouts when you teach.

#### SAY

What do you think of the tips and the 12 rules? Does anyone have any questions?

#### NOTE



**Give** participants a few minutes to respond.

## Teaching Practice

Community health workers can gain confidence as presenters by practicing. Here are two ways for your group to get practice. Choose the method you think works best for your group:

1. Present a session. They will teach a complete session from the *With Every Heartbeat Is Life* manual.
2. Present a topic. They will make short presentations on topics from several sessions.

## Present a Session

### At the end of Session 7

If you decide to have the group practice by presenting a session:

At the end of Session 7 (*Protect Your Heart From Diabetes*), divide the participants into two groups. Ask one group to present Session 9 (*Eat Heart Healthy—Even When Time or Money Is Tight*) and the other to present Session 10 (*Take Control of Your Health—Enjoy Living Tobacco Free*).

---

**DO** **Allow** the groups 30 minutes to practice at the end of Session 7 (*Protect Your Heart From Diabetes*) and Session 8 (*Make Traditional African American Dishes Heart Healthy*). **Give** each group the handouts and other supplies they'll need to teach their session. The group that isn't teaching will offer suggestions on what the other group did well and what needs improvement.

---

**SAY** Now each of you will have the chance to be the teacher. Let's divide into two groups. One group will practice teaching Session 9. The other group will practice teaching Session 10.

---

**SAY** Each group now has 30 minutes to review the assigned session and decide how to present the activities. You can use this time to divide sections of the session among group members.

---

**SAY** You'll also have 30 minutes at the end of Session 8, which is next week, to continue practicing. Then each group will teach its session in one of the following 2 weeks. You'll have 1 hour to teach each session.

## Presenting a Topic

Instead of teaching an entire session, participants individually or with another person can give a 5- to 10-minute presentation on a topic from a session. If you choose this option, at the end of Session 7 you'll ask participants to choose the topic they'll present.

### At the end of Session 7

**SAY** At the end of Sessions 8, 9, and 10, each of you will make a short presentation on your own or with a partner. Each presentation will cover a topic from the manual and will last 5 to 10 minutes.

**DO** **Give** participants the “With Every Heartbeat Is Life: Topics for Practice” handout (page A.9).



**SAY** Here's a list of topics you can choose from. I'll give you a few minutes to select your topic and choose partners if you decide to work in pairs. Then we'll make a list of the topics and presenters. We're all here to learn and practice in a friendly environment, so don't be nervous.

**NOTE**



**Allow** a few minutes for participants to select their topics and partners.

**SAY** If you're ready, please tell me what topic you'll present.

**DO** **Write** each participant's name (and their partner's name, if applicable) beside the topic.

**NOTE**



If too many people choose the same topics, ask them to choose others.

**SAY** When you present your topics, remember to use the handouts I gave you.

**NOTE**

**Decide** which group members will present their topics at the end of Sessions 8, 9, and 10.

**DO** **Allow** 30 minutes for them to review their topics, ask questions, or practice their presentations.

### At the end of Sessions 8, 9, and 10

**NOTE**

Participants should present their topics after you're done teaching the session.

**SAY** Now it's time to present your topics. Each person or team will present for about 5 minutes. This exercise will give you a chance to practice your teaching skills and get feedback. Each time you present, you'll become more comfortable and learn new ways to get people involved. So relax and have fun.

**DO** **Ask** for a volunteer to present first. After the presentation, allow 3 to 5 minutes for questions or comments.

**Thank** them, **give** positive comments, **correct** any wrong information, and **end** with a compliment. Then **ask** another participant or team to present. **Follow** these instructions for each presentation, until everyone has presented their topics.

**SAY** Your presentations show how much you've learned about heart health. I hope you'll use every opportunity to spread the word—African Americans can make changes now to reduce their risk for heart disease. Community health workers like you can help everyone live healthier lifestyles.

## You May Want To Practice More

**SAY** Here are some ideas to build your confidence and give you more practice:

- Observe an experienced trainer or community health worker while they teach.
- Practice presenting a full session to other community health workers. I can provide contact information for other health workers.
- Team-teach a session or the entire course to a community group with the help of a more experienced trainer.



# Tips To Teach the With Every Heartbeat Is Life Course

## Before Each Session

- Review the manual carefully several times.
- Review information about your audience (for example, their levels of education, areas of expertise, or how open they are to new health information).
- Practice teaching in front of family or friends using all your materials.
- Gather materials and equipment listed at the beginning of each session that you'll need, such as posters, handouts, extension cords, laptop computer, picture cards, markers, measuring tape, masking tape, and food items. If the room has a blackboard, make sure there's plenty of chalk and an eraser. If no blackboard is available, you'll need flipchart-size pieces of paper and additional markers or a dry erase board.

## The Day of the Session

- Arrive at least 30 minutes before the start of the session.
- Set up chairs and tables in a U-shape so you can get the group more involved.
- Find electrical outlets and light switches.
- Set up audiovisual equipment, if needed
- Place posters where the participants can see them. Don't damage the walls.
- Put the handouts in the order you'll give them out. Make sure you have enough copies for everyone.
- Set up any activities you have planned or snacks.

## After the Session

- Thank everyone for coming.
- Collect all forms.
- Leave the room clean and arranged the way you found it.



## 12 Ground Rules for Teaching Groups

1. Make eye contact with each participant.
2. Speak loudly so everyone can hear. Talk with a clear, strong, and kind voice.
3. Show your enthusiasm. Move around, use hand gestures.
4. Keep track of time. Wear a watch or have a clock in the room. Plan your presentation so you don't have to rush. Don't let the class run too long.
5. Stay calm and use humor. Focus on the positive.
6. Show interest in participants.
  - Greet them when they come in.
  - Tell them you value their time and attendance.
  - Listen to what they say.
  - Help them to set goals.
  - Thank them for coming.
7. Try to have everyone participate. People tend to learn more when they're involved. Try not to lecture.
8. Ask questions. Praise correct answers. Politely correct incorrect ones.
9. Answer participants' questions with clear, short answers. Be honest—say you'll find the answer if you don't know it.
10. Talk simply and to the point.
11. Pay attention to content. Your information must be accurate.
12. End with a review of the most important points.



## With Every Heartbeat Is Life: Topics for Practice

- How the Heart Works (Session 1)
- Risk Factor Activity (Session 1)
- What Are the Warning Signs of a Heart Attack? (Session 2)
- Benefits of Physical Activity (Session 3)
- Types of Physical Activity (Session 3)
- Understanding Blood Pressure and Stroke (Session 4)
- Lowering High Blood Pressure (Session 4)
- Shake the Salt and Sodium Habit (Session 4)
- Facts About Cholesterol (Session 5)
- Metabolic Syndrome and Your Health (Session 5)
- Food Label Activity: Fats (Session 5)
- Cooking With Less Saturated Fat (Session 5)
- What Is a Healthy Weight? Activity (Session 6)
- The Healthy Way To Lose Weight (Session 6)
- ABCs of Diabetes Control (Session 7)
- Think Before You Drink: Sweeteners in Drinks Activity (Session 7)
- African American and Soul Food Dishes (Session 8)
- Eating in a Heart Healthy Way When You're Short on Time (Session 9)
- Tips for Eating Out the Heart Healthy Way (Session 9)
- Saving Money on Your Food Bill (Session 9)
- Smoking Harms All of You (Session 10)
- Quitting Smoking (Session 10)

# Join the Fight Against Heart Disease in the African American Community



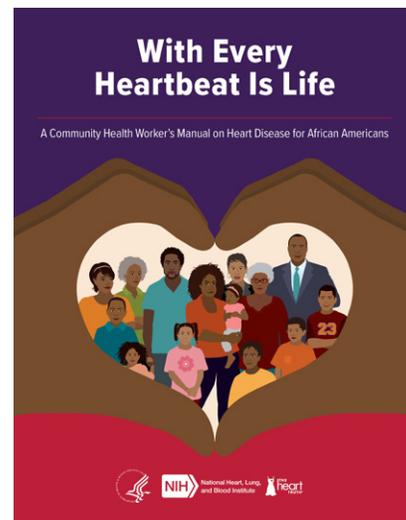
## Participate in a **With Every Heartbeat Is Life Training Workshop** for Community Health Workers

### Learn About Heart Health

The *With Every Heartbeat Is Life* training workshop will give you the knowledge, skills, and motivation to take action against heart disease.

### Teach Others About Heart Health

The workshop trains you to use the *With Every Heartbeat Is Life* manual to teach members of your community about heart health.



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## Sign up today!

**The next training will be held:**

**Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**Location:** \_\_\_\_\_

**To register, contact:** \_\_\_\_\_



Upon completion of training, each participant will receive a certificate.

# Appendix Part 2



## Activity 1: Face The Heart Truth

### NOTE



**Review** the following information about *The Heart Truth*<sup>®</sup>, a national health education program that raises awareness about heart disease among populations at highest risk.

### The Heart Truth

- Heart disease is the leading cause of death in the United States. However, women and minorities are disproportionately affected. One in four African Americans dies of heart disease. It's the leading cause of death in women, regardless of race. It affects more women at younger ages than most people realize. More than 75 percent of women aged 40 to 60 have one or more risk factors for heart disease.
- Some risk factors affect women differently than men. For example, diabetes raises the risk of heart disease more in women than it does in men. Women have risk factors—like using birth control pills and going through menopause—that men don't.

### Act Now To Protect Your Heart

- Learn about *The Heart Truth* at [www.hearttruth.gov](http://www.hearttruth.gov). You'll find educational materials about heart disease and resources to help promote American Heart Month and National Wear Red Day.
- *The Heart Truth* established the red dress as the national symbol for raising awareness about women and heart disease. You can raise awareness about heart disease by showing off your favorite red dress, shirt, or tie or wearing one of *The Heart Truth's* red dress pins available to order at [www.nhlbi.nih.gov](http://www.nhlbi.nih.gov).

## Activity 2: How To Organize a Walking Club

Walking can improve our health, mood, and energy level. Walking is inexpensive and safe, and requires no special equipment. Having regular walking buddies or being part of a walking club can help us stay motivated. In this activity, we'll talk about starting a walking club. You'll need to plan ahead, organize activities for the group, and promote the benefits of joining the club.

### The benefits of walking as a group

- Many people find it fun to walk with others.
- Club members help each other to keep the pace and stick to the program.
- You get to spend time with friends or make new friends who also want to be active.
- Club members develop and achieve fitness goals together.
- Your club can plan fun activities and themes, which will increase participation.

### How to organize a walking club

- Tell your family members, friends, and neighbors that you're starting a walking club. Use your social media accounts, like Facebook, to reach people. Or ask your employer about organizing a walking club at work. Advertise your club through your religious organization, community center, or neighborhood bulletins and online listservs. Put up posters.
- When you reach out to people, tell them the time and location of your first meeting. At that meeting, you'll share ideas and set goals. You'll also decide on the day, place, and time you'll meet and the distance you'll walk each day. Brainstorm a slogan or catchy name for your club. Think of fun and challenging activities that will keep members motivated.
- When your club is organized, invite your With Every Heartbeat Is Life course participants to join. Ask them to bring their friends and family.
- Encourage different members to lead the group.

### Where to walk

- Pick a location that is well-lit and has sidewalks. The neighborhood where you hold your classes or the track at a local school might be options. You may change the route to keep it fun, but you should always meet at the same time and place.
- Have a backup plan for when the weather isn't good, such as walking in a mall.

## Activity 2: How To Organize a Walking Club (continued)

### Keep it fun!

- Have special walk days each month to celebrate events, such as:
  - Martin Luther King Day (third Monday in January)
  - National Wear Red Day® (first Friday in February) to raise awareness about heart disease in women
  - Asthma Awareness Month (May)
  - First day of a new season
  - Other important or fun celebrations
- Create theme walks, such as:
  - Nature walks—everyone tries to identify a bird or flower on a walk in a park.
  - Crazy outfit walks—everyone wears their silliest t-shirt or socks.
  - Dance walks—each person stops once to show off a dance move.
  - Use your imagination!

### Stay on target

- Encourage everyone to warm up, stretch, and cool down. (See the “Walking and Stretching” handout in Session 3, page 3.28).
- Say that it’s great to chat and have fun, but you need to keep walking at a brisk pace.
- Suggest that members track their progress on paper, online, or with a fitness app on their phone or computer. Record dates, distance, number of steps (if they want), and how they felt after walking. Keeping track can motivate everyone to improve.

### Health and safety

- Stay alert. Be familiar with your surroundings.
- Stay in well-lit and well-maintained places.
- When exercising outdoors, remind members to use sunscreen or wear protective clothing. Watch for stinging insects, such as bees and wasps.
- Keep an eye on the weather and the air quality, especially if anyone has asthma.
- Encourage members to wear comfortable, supportive shoes and bring a reusable bottle of water.
- Start slowly. Gradually increase the time and effort you put into any activity.

## Activity 3: Nutrition Displays

Nutrition displays make a class or presentation more interesting and can help participants better understand important information. Here are three nutrition displays that you can create and use during the *With Every Heartbeat Is Life* course:

- 1. Fat Matters—But Calories Count**  
Use in Session 5, *Keep Your Cholesterol in Check*.
- 2. How Much Sweetener and How Many Calories Are in Your Favorite Drink?**  
Use in Session 7, *Protect Your Heart From Diabetes*.
- 3. Making the Best Choice in Fast Food Places**  
Use in Session 9, *Eat Heart Healthy—Even When Time or Money Is Tight*.

You can also use these displays at health fairs; waiting rooms; schools; worksite cafeterias; community health centers; and sites of Women, Infants, and Children (WIC) programs.

### What you need:

- One sheet of poster board (20 inches by 30 inches)
- Food pictures or food models
- Spoons
- White clay, Velcro, glue, markers
- Sugar cubes and manila file folders (for use in the sugar displays, as shown in the picture on page A.16)

# Activity 3: Nutrition Displays (continued)

## 1. Fat Matters — But Calories Count

This display demonstrates the actual number of teaspoons of fat in foods. Calculate the number of teaspoons by dividing the number of fat grams by 4. For example, a food with 20 fat grams has 5 teaspoons of fat.

### Compare these foods

---

3 ounces of pork sausage .....	<b>5¾ teaspoons of fat (23 grams)</b>
3 ounces of lean pork tenderloin .....	<b>1 teaspoon of fat (4 grams)</b>

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3½ ounces of chicken breast with skin (fried).....	<b>3½ teaspoons of fat (14 grams)</b>
3½ ounces of skinless chicken breast (broiled) .....	<b>1 teaspoon of fat (4 grams)</b>

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## Fat Matters — But Calories Count!

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<p><b>Pork Sausage</b> (3 ounces)</p> <p><b>Calories:</b> 277 <b>Total Fat:</b> 23 g <b>Saturated fat:</b> 8 g</p>  <hr/> <p><b>23 grams of total fat =</b> <b>5¾ teaspoons of fat</b></p> 	<p><b>Lean Pork Tenderloin</b> (3 ounces)</p> <p><b>Calories:</b> 131 <b>Total Fat:</b> 4 g <b>Saturated fat:</b> 1 g</p>  <hr/> <p><b>4 grams of total fat =</b> <b>1 teaspoons of fat</b></p> 
<p><b>Fried Chicken with Skin</b> (3.5 ounces)</p> <p><b>Calories:</b> 240 <b>Total Fat:</b> 14 g <b>Saturated fat:</b> 3 g</p>  <hr/> <p><b>14 grams of total fat =</b> <b>3½ teaspoons of fat</b></p> 	<p><b>Broiled Skinless Chicken Breast</b> (3.5 ounces)</p> <p><b>Calories:</b> 160 <b>Total Fat:</b> 4 g <b>Saturated fat:</b> 1 g</p>  <hr/> <p><b>4 grams of total fat =</b> <b>1 teaspoon of fat</b></p> 

## Activity 3: Nutrition Displays (continued)

### 2. How Much Sweetener and How Many Calories Are in Your Favorite Drink?

(You can also find online resources, including posters and YouTube videos, to show the amount of sugar in drinks.)

1. Use drawings, empty cans, or bottles to represent the drinks you're featuring.
2. Prepare five displays, each featuring one drink.
3. To prepare each display:
  - Cut a manila file folder in half and fold each half to make a tent.
  - Write the name of the drink on one side. On the other side, write the number of calories and the grams (or teaspoons) of sweetener in the drink.
  - Glue the sugar cubes to the folder.
  - To find the number of teaspoons, divide the grams of sugar listed on the nutrition label by 4.
  - The “How Much Sweetener and How Many Calories Are in Your Favorite Drink?” handout in Session 7, page 7.40, lists the sugar content of common drinks, including alcoholic beverages.



## Activity 3: Nutrition Displays (continued)

### Rethink Your Drink

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**Q: If you drank one 12-ounce can of regular soda every day how much sugar did you have in a year just from soda?**

A: 30 pounds of sugar



**Q: How much weight would you lose in a year after switching from regular soda to water or another calorie-free drink?**

A: About 15 pounds\*

\* Based on 150 calories for an average can of soda

## Activity 3: Nutrition Displays (continued)

### 3. Making the Best Choice in Fast Food Places

This display shows you how to make healthy choices at fast food restaurants. Most fast food and take-out restaurants list the calories on their company’s website, on their menus, or in a brochure in the restaurant.

**Here are two sample meals:**

(You can make the food choice sign into a table tent sign by gluing the sign to a manila folder.)

### Making the Best Choice: How to choose a healthier fast food meal



#### High-calorie menu choice

86 grams of total fat = 21½ teaspoons of fat

Food	Calories	Total Fat	Saturated Fat
Double meat cheeseburger	585	32 g	11 g
Medium French fries	406	19 g	3 g
Medium chocolate milkshake	789	35 g	21 g
<b>Total</b>	<b>1,780</b>	<b>86 g</b>	<b>35 g</b>



#### Lower-calorie menu choice

22 grams of total fat = 5½ teaspoons of fat

Food	Calories	Total Fat	Saturated Fat
Grilled chicken sandwich, no mayonnaise	330	7 g	1 g
Garden salad with egg and cheese	116	7 g	3 g
Light dressing	70	6g	1g
Low-fat (1%) milk	110	2 g	2 g
<b>Total</b>	<b>626</b>	<b>22 g</b>	<b>7 g</b>

## **Making the Best Choice:** How to choose a healthier fast food meal

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- ♥ Choose your sandwich without mayonnaise or special sauce.
- ♥ Order sandwiches without cheese.
- ♥ Choose smaller portions by sharing or ordering small sizes.
- ♥ Have water, low-fat (1%) milk, or unsweetened iced tea instead of a regular soft drink or milkshake.
- ♥ Choose low-fat or fat-free dressing.
- ♥ Plan ahead—have a healthy, low-fat breakfast and lunch if you plan to eat out for dinner.

## Activity 4: Heart Healthy Cooking Demonstrations

Cooking demonstrations can be an important part of group discussions. A cooking demonstration can show people how to prepare healthy foods that taste good. Most people like to eat, and they'll be interested in learning how to prepare food in a heart healthy way. Here's how to do a cooking demonstration.

### Recruiting a Food Demonstration Facilitator

You don't have to conduct the food demonstration yourself. Instead, you can recruit a registered dietitian to do the cooking. Contact your local health department or county extension office. The Academy of Nutrition and Dietetics ([www.eatright.org/find-an-expert](http://www.eatright.org/find-an-expert)) lists registered dietitians in the United States.

### Choosing the Facility

Here are some questions you need to ask before deciding where you'll hold the cooking demonstration.

- **What food does the facility permit?**

The facility may have restrictions concerning food. It may allow only prepared food, or it may not allow certain types of food. If food may be brought in for tasting but not cooking, you may have to bring a prepared dish. The type of food you can bring may be limited. Some organizations have special dietary restrictions. Find out beforehand. If you're doing a cooking demonstration at a festival or an outdoor fair, you may need a special permit to use cooking equipment. Be sure to visit the facilities before the day of the demonstration so you know what to expect!

- **Is water accessible?**

Having a sink in the same room as the demonstration is ideal. You'll need to wash your hands frequently. You may also need large amounts of water for the recipes.

## **Activity 4: Heart Healthy Cooking Demonstrations**

(continued)

- **Is electricity accessible?**

If outlets aren't close to where you're giving your demonstration or if your demonstration is outside, bring heavy-duty extension cords. If there's no electricity available, you'll need a small generator.

- **Is lighting adequate?**

Make sure there's enough light for participants to see your demonstration.

- **Is the location convenient and accessible?**

Your location should be wheelchair accessible, preferably have parking, and be near public transportation.

- **Are tables and chairs available?**

You'll need at least one table. If your demonstration is fairly long, you'll need chairs for your audience.

## Activity 4: Heart Healthy Cooking Demonstrations

(continued)

### Choosing the Recipes

The recipes you choose depend on which principle of heart healthy cooking you want to show; the amount of time you have to prepare for and give the demonstration; and your budget, facility, and equipment. Be very familiar with your recipes and prepare them at least once before the demonstration.

For ideas about what to cook, see the recipes in the *With Every Heartbeat Is Life* manual. The “Strawberry-Banana Yogurt Parfait Recipe” below (page A.24) is simple and tasty.

#### ▪ **What’s your message?**

If you want to demonstrate how to reduce the saturated fat in food, look for a vegetarian recipe, or a recipe that uses lean beef, skinless chicken, or low-fat (1%) or fat-free milk or milk products. If you want to demonstrate low-sodium cooking, look for recipes that use small amounts of salt, low-sodium ingredients, or lots of herbs and spices for flavor.

#### ▪ **How much time do you have?**

If you don’t have much time before the demonstration, use recipes that require little preparation (chopping or slicing), or get ingredients that are already prepared. Find recipes that won’t take more time than you have for the demonstration and followup questions. Demonstrate the dish with the longest cooking time first, so all the food is ready as close to the same time as possible.

#### ▪ **Demonstrate just one concept.**

If you don’t have the time or resources to demonstrate a whole recipe, consider demonstrating just one concept. For example, to demonstrate draining off fat:

- Open a can of soup and skim off the fat with a spoon.
- Brown ground beef in a skillet and carefully drain the fat into a cup or can.

#### ▪ **Preparing in Advance**

Make a list of what you need to buy, including the food and tools. Shop for the food as close to the demonstration date as possible.

## Activity 4: Heart Healthy Cooking Demonstrations

(continued)

### Careful About Food Safety!

- **Wash your hands frequently using soap and warm water.** Wash your hands whenever you touch an unclean surface, raw meat, or any part of your body. Cover your mouth and nose if you cough or sneeze, and immediately wash your hands.
- **Keep all food that needs to be cold or frozen in a refrigerator or freezer before the demonstration.** When it's time to go to the demonstration, put the food in a cooler with ice or freezer packs and go directly to where you'll be cooking.
- **Wrap prepared dishes and ingredients tightly.** Don't let raw ingredients touch or run onto cooked ingredients. For example, keep raw meat, poultry, and fish separate from raw or cooked vegetables. Use separate utensils, bowls, and cutting boards for these foods. Wash all utensils and cutting boards in hot soapy water immediately after cutting raw ingredients.
- **Have a handy supply of wet paper towels to wipe up spills as they happen.** Cover your cooking area with a vinyl tablecloth so you can wipe up spills easily. Keep a trash can and recycling container nearby so you can easily toss in used items (such as empty cans and plastic wrap) and keep the table clear.
- **Make sure you are neat and clean.** Participants will be eating the food you're preparing. Consider wearing an apron and a hairnet or scarf while cooking.

### Setting Up the Demonstration

- **Give yourself enough time.** Allow more time than you think you'll need for setup.
- **Arrange the room.** Make sure everyone can see and hear you. Check for access to electricity and water. Be sure all surfaces are clean.
- **Set up the food.** Shortly before you start, put out your food in the order you'll be preparing it. Group each recipe's food together.
- **Keep cool.**
  - If you forget an ingredient or a pot doesn't boil quickly enough, let your audience know.
  - Give them examples of ingredients that you could use in place of the one you forgot.
  - While the pot boils, talk about the changes you made to the recipe to make it more heart healthy.

**Have fun!**

## Strawberry-Banana Yogurt Parfait Recipe

This recipe can be used as a part of a cooking demonstration. For variety, substitute fruit or plain yogurt. If strawberries aren't available, try another fruit. Thawed frozen fruit or canned fruit packed in fruit juice is fine to use.

If time permits, invite participants to make their own parfait. Line up the glasses, and supply the amounts of the ingredients for each parfait. The recipe makes 8 servings. Reduce or increase the ingredient amounts as needed, so each participant has one serving.

Everyone will enjoy making their own desserts and eating the tasty treat!

- 4 cups** light (no sugar added) vanilla Greek yogurt
- 2 cups** sliced bananas (2 large)
- 2 cups** fresh, frozen, or canned strawberries (unsweetened)
- 32** reduced-fat vanilla wafers

### For 8 servings, each parfait will have:

- ½ cup** light (no sugar added) vanilla Greek yogurt
- ¼ cup** sliced banana
- ¼ cup** cup of strawberries (or other fruit if you choose)
- 4** wafers, crumbled

### Instructions

Layer the ingredients in a glass, starting with the yogurt. Make two layers.

### Makes 8 servings

<b>Serving size:</b> 1 cup	<b>Sodium:</b> 89 mg
<b>Calories:</b> 195	<b>Total Fiber:</b> 3 g
<b>Total Fat:</b> 2 g	<b>Protein:</b> 12 g
<b>Saturated Fat:</b> 1 g	<b>Carbohydrates:</b> 33 g
<b>Cholesterol:</b> 10 mg	<b>Potassium:</b> 360 mg



## For More Information

For more information on diseases, conditions, and procedures related to heart disease, visit the NHLBI website at [www.nhlbi.nih.gov](http://www.nhlbi.nih.gov) or contact the NHLBI Center for Health Information:

P.O. Box 30105

Bethesda, MD 20824-0105

Phone: 1-877-NHLBI4U (1-877-645-2448)

TRS: 7-1-1

Email: [NHLBIinfo@nhlbi.nih.gov](mailto:NHLBIinfo@nhlbi.nih.gov)



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