Title of Intervention: Hearts For Life: A Community Program on Heart Health Promotion

Intervention Strategies: Group Education

Purpose of the Intervention: To increase knowledge of cardiovascular risk factors and induce healthy cardiovascular behaviors

Population: Healthy residents aged 20 or older

Setting: Thunder Bay, Ontario, Canada; community-based

Partners: The Heart and Stroke Foundation, local health agency, an advisory committee made up of community agencies

Intervention Description:
- Group Education: Verbal presentations using overheads addressed heart disease, risk factors and risk reduction strategies. Presentations were delivered by trained public health nurses. A video on healthy eating was used as well as a selection of printed resources.

Theory: Stages of Change

Resources Required:
- Staff/Volunteers: Trained public health nurses
- Training: Not mentioned
- Technology: Audiovisual equipment
- Space: Meeting space
- Budget: Not mentioned
- Intervention: Presentation materials, video, printed resources (pamphlets, library books, lists of agencies that assist with risk factor reduction), learning guide
- Evaluation: Computerized coronary risk profile (CRP), knowledge and behavior questionnaires, height, weight, and blood pressure measurement instruments, postage-paid envelopes

Evaluation:
- Design: Cohort
- Methods and Measures:
  - Height, weight, and blood pressure measurements
  - Coronary risk profile (CRP) identified overall risk for development of heart disease and placement on risk scale for a variety of risk factors
  - Questionnaire assessed coronary risk knowledge and behavior

Outcomes:
- Short term Impact: There was a significant increase in knowledge about coronary risk issues. There were significant behavior changes in individuals with multiple cardiovascular risks and those with initial inactivity risk factors. There were improved nutrition and exercise patterns in overweight individuals.
- Long Term Impact: Not measured

Maintenance: Not mentioned

Lessons Learned: Not mentioned

Citation(s):