**Title of Intervention:** Role of parents and older peers in school-based cardiovascular prevention programs

**Intervention Strategies:** Group Education, Supportive Relationships

**Purpose of the Intervention:** To compare reduce risk for heart disease

**Population:** Children in grades 5 to 8

**Setting:** Schools in the Williamsport Consolidated School District; school-based

**Partners:** School districts

**Intervention Description:**
- **Group Education:** Peer leaders led four 45-minute classroom-based educational sessions. Each session began with a presentation to the class by all instructors. Next peer leaders facilitated small group discussions and practice sessions. The nutrition sessions included practice in choosing a low-fat low-salt lunch, selecting a healthful versus less healthful meal from the menus of local fast food restaurants, reading a food label to understand the order and corresponding amount of ingredients and asserting a healthful food preference when pressured by others. Participants made a public pledge to make one change to improve eating habits. The smoking curriculum included a review of advertisements in order to recognize and counter argue media pressure and practice in resisting peer pressure. Participants made a public commitment to not smoking. The blood pressure curriculum was adapted from the 3Rs program developed by the Georgia Heart Association. Children learned about the behaviors associated with high blood pressure prevention including exercise and a low sodium diet. They practiced taking their pulse, listened to their hearts and practiced taking an actual blood pressure reading.
- **Supportive Relationships:** All sessions included a focus on the influence of parents as role models. Children and parents completed homework assignments together. Parents were viewed as enablers of health behavior change rather than the direct targets for change. Children’s individual risk factors were mailed to the parents to enable them to support their children in behavior change.

**Theory:** Social Learning Theory

**Resources Required:**
- **Staff/Volunteers:** Peer leaders
- **Training:** All peer counselors participated in a four-day training session led by two high school counselors during the summer. In the first two days of training, they were taught general helping skills. They received an additional two days of training on the curriculum with some role-play. On the final day, a small group of children attended the training session and the older peer leaders taught the curriculum as a dress rehearsal.
- **Technology:** Not mentioned
- **Space:** Classroom space
- **Budget:** Not mentioned
- **Intervention:** Transportation for the peer leaders, the smoking curriculum (adapted from the Project CLASP curriculum), the blood pressure curriculum (adapted from the 3Rs program developed by the Georgia Heart Association), nutrition curriculum, homework assignments
- **Evaluation:** Questionnaires

**Evaluation:**
- **Design:** Randomized controlled trial
- **Methods and Measures:**
  - Two survey instruments (parents and child) included questions about the health habits of children such as smoking, exercise, dieting, fast food consumption and family discussions of health
  - Blood pressure was measured
Outcomes:
- Short Term Impact: The peer led blood pressure group demonstrated a greater increase in behavioral capabilities than the comparison group. The smoking groups did not have any significant effects. In general, both peer led and comparison has significant positive effects.
- Long Term Impact: Not measured

Maintenance: During the school year, the older peers attended a two-hour refresher course.

Lessons Learned: The findings associated with the use of older peers as health educators are encouraging and warrant further study with health-enhancing behaviors in adolescence. The authors' program capitalized on an already existing mechanism for recruitment and training of peer counselors. The task of organizing an older peer program would be much greater if it was done without such a program already in place.

Citation(s):