

**Title of Intervention:** Florence Heart to Heart Program

**Intervention Strategies:** Campaigns and Promotions, Provider Education, Group Education, Individual Education

**Purpose of the Intervention:** To reduce risk factors of cardiovascular disease; to reduce cardiovascular disease morbidity and mortality

**Population:** Adults over the age of 18

**Setting:** Bi-racial community of Florence, South Carolina; community-based

**Partners:** Worksites, grocery stores, community groups, churches

**Intervention Description:**

- Campaigns and Promotions: Project staff distributed a health promotion programs resource inventory to local worksites to help them establish worksite wellness programs. Health promotion messages were placed in local newspapers and community and church bulletins. Live health promotion discussions were held on local radio stations. Grocery stores implemented point of purchase programs. Restaurants implemented labeling programs. Community campaigns included a month-long physical fitness campaign (Florence Spring into Shape), a walking plan commitment campaign, a smoking cessation campaign (Quit and Win); a supermarket campaign to increase awareness of fat and sodium (Shop Smart) and a campaign encouraging collective exercise for sedentary adults (Florence Walks Around the World, Florence Shoots the Moon).
- Provider Education: Health care providers were educated on the strategies and activities of the Heart to Heart program.
- Group Education: The program offered live and televised nutrition education classes and cooking demonstrations at worksites, churches and other community settings.
- Individual Education: Ongoing blood cholesterol screenings were offered at worksites, select public areas and special events in the community. The program distributed self-help kits for smoking cessation.
- Supportive Relationships: Walking groups were established to encourage collective exercise among sedentary adults.

**Theory:** Not mentioned

**Resources Required:**

- Staff/Volunteers: Media specialists, staff to lead individual, provider and group education sessions
- Training: Not mentioned
- Technology: Computers, printers
- Space: Space for education sessions
- Budget: Not mentioned
- Intervention: Inventory of existing resources, media (tv and radio spots, newspaper articles, campaign materials), cooking class supplies, health education class supplies, stop smoking kits, taste test supplies
- Evaluation: Trained interviewers, blood pressure measurement device, spring scale, cloth tape measure, mounted height chart, gloves, needle, hazard disposal, blood collection tubes, refrigerator, cold shipping ability, laboratory access, questionnaire forms, telephones

**Evaluation:**

- Design: Cross sectional
- Methods and Measures:
  - Questionnaire assessed behaviors, program awareness and participation, knowledge, morbidity, family history, demographics and indices for hypertension, smoking, high cholesterol, obesity and exercise

- Physical assessment using blood sample (total cholesterol, HDL, LDL, triglycerides, blood glucose, lipoprotein A-I and lipoprotein B, glycosylated hemoglobin), pulse measurement, blood pressure measurement, anthropometric measurements (weight, height, girth) and medication use

**Outcomes:**

- Short term Impact: There was a significant net intervention effect for knowledge about good cholesterol levels. The prevalence of current smoking declined significantly among men in the intervention group.
- Long Term Impact: Not measured

**Maintenance:** Not mentioned

**Lessons Learned:** The results generally support the hypothesis that community-based interventions, conducted in a public health setting, can substantially increase cholesterol awareness. Findings suggest efforts targeting black people were not as successful as efforts in general public. Further efforts need to be developed that are more culturally sensitive and more successful in including minority communities in planning, implementation and evaluation of community-based intervention programming.

**Citation(s):**

Goodman, R. M., F. C. Wheeler, et al. (1995). "Evaluation of the Heart To Heart Project: lessons from a community-based chronic disease prevention project." *Am J Health Promot* 9(6): 443-55.

Heath, G. W., R. Fuchs, et al. (1995). "Changes in blood cholesterol awareness: final results from the South Carolina Cardiovascular Disease Prevention Project." *Am J Prev Med* 11(3): 190-6.

Wheeler, F. C., D. T. Lackland, M. L. Mace, A. Reddick, G. Hogelin, P. L. Remington. (1991). "Evaluating South Carolina's Community Cardiovascular Disease Prevention Project." *Public Health Reports* 106(5):536-543.