

WISEWOMAN WORKS

A COLLECTION OF SUCCESS STORIES
FROM PROGRAM INCEPTION THROUGH 2002



WISEWOMAN™



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Join Us as We Reach Out to Underserved Women Across America

Heart disease is the leading killer of U.S. women. Women who engage in behaviors such as smoking, eating unhealthy foods, or leading sedentary lifestyles are at increased risk for having a heart attack, stroke, or other serious health problem. Many women do not know that they are at risk for these health problems or that there are steps they can take to prevent or delay the onset of cardiovascular disease and other medical conditions.

Since 1995, WISEWOMAN projects have provided access to much-needed health care such as hypertension screening and cholesterol screening to thousands of women who would otherwise go without these services. Across the country, women receive reliable health advice, help with setting goals for healthy eating and physical activity, and social support from WISEWOMAN project staff. They also take part in skill-building activities such as cooking classes, taste-testings, and strategies for building physical activity into their daily lives. Such activities help women make lasting lifestyle changes that improve their health. Although WISEWOMAN focuses mainly on preventing heart disease and promoting cardiovascular health, many projects also address other diseases linked to nutrition and physical activity such as diabetes and osteoporosis.

WISEWOMAN Works: A Collection of Success Stories From Program Inception Through 2002 highlights some of the ways that CDC-funded WISEWOMAN projects are making a difference for women. We hope the ideas in this book inspire you to adopt some of these strategies in your programs. By working together, we can help countless women in need, one success at a time.

Julie Louise Gerberding, MD, MPH
Director
Centers for Disease Control and Prevention



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WISEWOMAN Works

A Collection of Success Stories From Program Inception Through 2002

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Success at the Grassroots Level

This publication gives you only a glimpse of the many ways that WISEWOMAN projects are helping women across the country. The women in these stories are part of a much larger group of women—more than 12,000—who participate in WISEWOMAN projects funded by the Centers for Disease Control and Prevention (CDC). These stories tell of success in the clinics that deliver WISEWOMAN services to financially disadvantaged women. This kind of grassroots-level success will pave the way for us to reach even more women in need.

How You Can Use These Success Stories

At the CDC, one of our roles is to serve as a broker of ideas and lessons learned. Success stories such as the ones featured in WISEWOMAN Works are one way you can share information about your efforts to promote the health of women in need. In turn, as you learn about other programs' successes, you can adopt ideas relevant to your program and adapt them as needed. You can then begin to generate new ideas for your own projects. If you plan to compile success stories, here are some of the ways you can use this information:



- **To gain support for your successful efforts.** Success stories can help demonstrate how much your project has improved the quality of life for women, their friends, and their families. By writing your success stories in an interesting, easy-to-read style, you can provide key decision makers with useful, relevant information that they are likely to read.
- **To make women aware of the benefits that your program can offer.** When they see what your program has done for others, women will be encouraged and motivated as they begin to make lifestyle changes to improve their health. If you identify a participant who is a leader, you can use success stories to help other women identify with her and market your program.
- **To complement other sources of information.** Success stories complement quantitative data by providing rich details needed to understand how a process occurred and, more importantly, *how* to replicate that process. Numbers alone can't do that. Success stories also can help you look at your program and find ways to improve the program by adopting or adapting strategies that others have used successfully.



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■ **To support qualitative research.** Success stories also can be analyzed as part of a qualitative research study. For example, you could analyze several stories to find common themes in programs that work.

■ **To educate others.** Stories are an excellent teaching device. Law and medical schools use case studies to support concepts described in textbooks to enhance student learning experiences, and many religious texts are based on parables. A story allows students to examine a real-life problem and its solution. They can then draw insights from something that is relevant to their lives. Capturing individual experiences helps others better understand your program and see how public health occurs in real-world settings in order to achieve positive outcomes.



■ **To recognize the accomplishments of your staff, partners, or participants.** People's accomplishments can be measured in terms of outcomes, but they can also be measured by highlighting more intrinsic qualities such as commitment, persistence, patience, and willingness to advocate for the program. Stories acknowledge that these personal efforts make a difference, motivate program staff and women taking part in the program, and can often highlight the value of your partnerships.



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About the WISEWOMAN Program

Well-Integrated Screening and Evaluation for Women Across the Nation

WISEWOMAN is a CDC-funded program that helps women without insurance gain access to screening and lifestyle interventions that can reduce their risk for heart disease and other chronic diseases. WISEWOMAN demonstration projects across the nation help women become more physically active, adopt healthy eating habits, lead smoke-free lives, and target high blood pressure and high cholesterol.

In 1993, Congress authorized the CDC to establish the WISEWOMAN program. Congresswoman Rosa L. Delauro sponsored the WISEWOMAN legislation, which expands the services offered within the National Breast and Cervical Cancer Early Detection Program (NBCCEDP). As a result, women who qualify

for NBCCEDP services are also eligible to receive WISEWOMAN services. Women who qualify for WISEWOMAN are 40–64 years old and have little or no health insurance coverage. Many women are from ethnic or minority populations and have risk factors for heart disease and stroke. WISEWOMAN adds value to the NBCCEDP by

- Screening women for high blood pressure and cholesterol.
- Assessing women's knowledge, attitudes, and behaviors regarding lifestyle risk factors such as sedentary behavior, unhealthy eating habits, and tobacco use.
- Conducting lifestyle interventions that promote healthy nutrition, physical activity, and smoking cessation.
- Providing appropriate medical follow-ups and referrals, as needed.
- Conducting research to determine which lifestyle interventions are most effective.

WISEWOMAN projects allow us to measure how such services are helping low-income and uninsured women. The first three WISEWOMAN projects, launched in 1995, were evaluated, and the findings were promising:

- Offering screening tests for chronic disease risk factors to women in the NBCCEDP was feasible and well accepted by providers and participants.
- Participants reported reducing the fat in their diets and becoming more physically active.





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By 2002, more than 12,000 medically underserved women participating in the NBCCEDP had received preventive services through WISEWOMAN's 12 demonstration projects (see U.S. map on the inside back cover). WISEWOMAN has bridged the gap to give these underserved women access to services they normally would not receive. In the success stories that follow, you will see examples of four strategies that build strong WISEWOMAN projects:

- Expanding access.
- Reaching culturally diverse women.
- Women helping women.
- Developing partnerships.





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Expanding Access





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Success Story 1 South Dakota Women Learn About Diabetes, Thanks to WISEWOMAN's *All Women Count!* Collaboration

Diabetes Education Reaches Women Where They Live

Location Rural and frontier areas of South Dakota

Focus Diagnose diabetes early among low-income women living in rural or frontier areas and teach them about the disease so that devastating complications can be prevented.

Strategy Partners in the community collaborate to give underserved women access to high-quality diabetes education and screening.

Levels of Success Many organizational changes have occurred. Partnerships with the diabetes program, health department, and WISEWOMAN program have been developed. Partnering with the Diabetes Prevention and Control Program to offer diabetes training for nurse/dietitian teams allows more providers to receive the training they need to deliver high-quality diabetes care and receive funding for providing this care to WISEWOMAN participants.

Results Over 250 sites will receive training through this program to deliver high-quality diabetes education in 2003, and 1,500 women are expected to be screened.

Story Developed By Patty K. Lihs, BS
Public Education Coordinator
All Women Count!
South Dakota Department of Health

Colette R. Beshara, RN, BSN
Diabetes QA Nurse Consultant
South Dakota Department of Health

For program contact information, see South Dakota in Appendix C or visit <http://www.cdc.gov/wisewoman>.

South Dakota Women Learn About Diabetes, Thanks to WISEWOMAN's *All Women Count!* Collaboration

Diabetes Education Reaches Women Where They Live

Diabetes is a major health problem in South Dakota, where more than 6% of people have diabetes and many do not know it. In addition, many women live in rural or frontier areas, where access to quality diabetes education is limited. These critical needs prompted South Dakota to add diabetes screening and education to the cardiovascular risk factor screening and education already provided by the WISEWOMAN program, known as *All Women Count!* Nearly 750 providers at 259 facilities participate in the program. The goal is to diagnose diabetes early on and prevent devastating complications, particularly among women who have limited incomes or live in rural or frontier areas.

During the pilot phase, *All Women Count!* participants who had diabetes diagnoses or problems controlling their blood sugar were offered diabetes education at the 21 sites recognized by the South Dakota Department of Health or the American Diabetes Association as providing high-quality education. When the pilot phase was initiated, *All Women Count!* staff knew that these 21 sites could not possibly provide geographic access to all of the many women participating in the WISEWOMAN program.

All Women Count! staff wanted to eliminate this problem and other barriers that were preventing women from accessing diabetes health professionals. After speaking with health care providers, diabetes educators, and other clinic staff at pilot locations, they found some women were resistant to receiving education at a facility other than their normal clinic. Since most existing diabetes education programs are based in hospitals, the change in environment was enough to prevent some women from attending diabetes classes.

All Women Count! staff agreed they needed to offer uninsured women high-quality diabetes education in their own communities. So they collaborated with the state's Diabetes Prevention and Control Program (DPCP) to develop the *All Women Count!* diabetes education program. This program offers any of the 259 *All Women Count!* facilities the opportunity to be reimbursed for high-quality diabetes education, to get expert training, and to receive continuing education. Once a facility meets *All Women Count!* diabetes education program requirements, it can deliver diabetes education to women with newly diagnosed diabetes or a history of diabetes with problems controlling blood sugar. The facility can then be reimbursed by *All Women Count!* To be part of this program, facilities must have nurse/dietitian teams and complete a brief application detailing their existing diabetes

education program. Diabetes education providers must attend training in diabetes management and counseling skills at a Department of Health sponsored 2-day training session or submit proof that they attended 16 hours of study in diabetes management, behavioral interventions, teaching skills, and learning skills. Yearly continuing education for providers is also required. The facility must then use the "Life with Diabetes" curriculum and standardized education forms to document continuing education.

In fall 2002, *All Women Count!* and the DPCP held a training session in Pierre, and 120 professionals attended. This was the first time the DPCP marketed its training to *All Women Count!* providers. The goal is access to high-quality diabetes education to women screened at all 259 *All Women Count!* sites.

Importance of Success

The expanded partnership between *All Women Count!* and the state DPCP provides underserved women with greater access to diabetes screening and high-quality diabetes education. The partnership also allows women with pre-diabetes to be identified and referred to nutrition and physical activity programs. In addition, women with problems controlling their blood sugar can get help managing this condition. Women also benefit through better access to medication. Most importantly, at-risk women in rural and frontier areas now have greater access to care.

To date, *All Women Count!* has screened 776 women and identified 30 women as needing diabetes education. By the end of 2003, *All Women Count!* expects to screen 1,500 women and provide comprehensive diabetes education for women who previously did not have access to this care.

Lessons Learned

- Collaborate to expand your resources.
- Recognize that clinic staff members at existing facilities know their patients best. A satellite location might not be appropriate.
- Develop firm partnerships with your diabetes program, health department, and WISEWOMAN program. Add peer-review organizations as the quality improvement arm if your program focuses on older women and you are seeking Medicare reimbursement.
- Increase people's awareness of the need for and value of comprehensive diabetes education.

South Dakota relies on partnerships to provide high-quality care to women in remote areas.



The woman is at the center of a wheel. The clinic is the wheel's hub, and the spokes are supportive partners.



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Success Story 2 WISEWOMAN Program Gives South Dakota Women Access to Much-Needed Heart and Diabetes Medications

Barriers Are Removed as Underserved Women Gain Access to Low-Cost or Free Medications

Location South Dakota

Focus Help low-income women get the medications they need for heart disease or diabetes.

Strategy Partners in the community collaborate and use existing pharmacy databases to help underserved women access free and low-cost medications for heart disease and diabetes.

Levels of Success Many organizational accomplishments have been made. By working with partners, WISEWOMAN uses an established system to provide low-cost or free medications to women who most need them. Using a computer-based program gives clinic staff ready access to pharmaceutical programs. This way, women quickly get the medications they need, without having to make another visit to their provider.

Results Hundreds of women could receive access to low-cost or free medications for heart disease and diabetes.

Story Developed By Patty K. Lihs, BS
Public Education Coordinator
All Women Count!
South Dakota Department of Health

Colette R. Beshara, RN, BSN
Diabetes QA Nurse Consultant
South Dakota Department of Health

For program contact information, see South Dakota in Appendix C or visit <http://www.cdc.gov/wisewoman>.

WISEWOMAN Program Gives South Dakota Women Access to Much-Needed Heart and Diabetes Medications

Barriers Are Removed as Underserved Women Gain Access to Low-Cost or Free Medications

Women who have high blood pressure, cholesterol, or glucose are at risk for serious health complications. In South Dakota's WISEWOMAN program, known as *All Women Count!*, more than 700 women have been screened for cardiovascular disease and high glucose levels. Most of the women who qualify for the program do not have insurance, and many of the women who have been screened need prescription medications. WISEWOMAN funds cannot be used to purchase medications. Therefore, the program teamed up with two partners to help women get the medications they need at a low cost or for free.

About Rx Access

The South Dakota Department of Social Services administers Rx Access, a database of pharmaceutical patient assistance programs that offer medications at no or low cost. The database includes enrollment information including income and age requirements for each assistance program. Some assistance programs even provide downloadable applications, making it easier to enroll a patient in the assistance program. After a woman submits information including all medications she currently takes, a pharmacist reviews the medications, makes appropriate substitutions, and generates appropriate applications that are sent to the woman for completion and submission to assistance programs. Once a woman has completed this process, medications are sent to her health care provider for her to pick up. Rx Access also knows when a prescription needs to be renewed and generates applications based on each patient assistance program's process for renewing existing prescriptions. Access to these services is provided at no cost to the women.

About eMedSample

A second way *All Women Count!* ensures that women have access to much-needed medications is through a program called eMedSample, which is administered by MedManage Systems, Inc. As soon as a woman is found to have high blood glucose, she can get immediate help. Currently, insulin produced by one drug company is the only product available. Within this program, physicians register with MedManage Systems, Inc., via www.emedsample.com. They can then print a voucher after filling in the patient's

name, date, strength, and directions for use. Physicians sign the voucher, which the patient can take to any participating pharmacy and receive the medication (currently a vial of insulin) free of charge.

Importance of Success

More at-risk women are getting potentially life-saving medications—on an immediate and long-term basis—through these two programs. By using systems already in place and building on partnerships, *All Women Count!* has eased a barrier for women unable to pay for medications. In addition, no money was spent to set up or maintain these programs because the programs were already in place. Some providers were already using the programs and most clinic sites had access to the programs. Thus, minimal staff time was *All Women Count!*'s only investment.

Having a convenient system in place that allows providers to gain access through a computer makes it easy to ensure women get the medications they need.

Staff members with varied backgrounds working at different facilities each offer a small contribution that, together, makes a big difference for women in need. Case managers help the women complete the application. Pharmacists with the South Dakota Department of Social Services review medications and access pharmaceutical programs. Medical providers complete the vouchers. Pharmacists check medications and educate women about effective use. This network of providers makes accessing low- or no-cost medications easier for at-risk women.

Lessons Learned

- Use partnerships to create a safety net of providers and services. By partnering with existing programs, you can add valuable, life-saving services at a minimal cost.
- Consider computer-based programs to ensure clinic staff members have easier access to pharmaceutical programs. Providers can get immediate help for women in need during the same visit, reducing the possibility that these women will slip through the cracks.
- Realize the benefits of providing services at the clinics where women routinely receive their care. This ensures their care is individualized and easy to access.



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Success Story 3 More North Carolina Women Have Access to Care, Thanks to WISEWOMAN Partnership

Partners Reach Out to Working, Underserved Women

Location Cabarrus Health Alliance in Kannapolis, North Carolina

Focus Reach underserved, working women who otherwise would not have access to preventive care.

Strategy Community partners collaborated to provide screenings for heart disease and cancer, health education, and medications to underserved, working women during hours convenient for them.

Levels of Success Many positive community benefits have occurred because of this partnership. More underserved, working women now have access to preventive care, and many health care providers have provided support for WISEWOMAN services.

Organizational benefits also have resulted. Because the partners are referring women to each other, demand for these potentially life-saving services has increased. More importantly, the organizations are providing health care to underserved women who previously were hard to reach.

Results WISEWOMAN funds allow underserved and minority women who already receive breast and cervical cancer screenings to also be screened for heart disease, to receive education, and to get free medications as needed. Through the WISEWOMAN project, the Cabarrus Health Alliance was able to provide vital preventive services to about 400 women in 3 years.

Story Developed By Priscilla J. Wilson, RN
Breast Health Program Director
Cabarrus Health Alliance

For program contact information, see North Carolina in Appendix C or visit <http://www.cdc.gov/wisewoman>.

More North Carolina Women Have Access to Care, Thanks to WISEWOMAN Partnership

Partners Reach Out to Working, Underserved Women

In Kannapolis and Concord, working women who are struggling to make ends meet now have access to potentially life-saving health services at a diverse number of clinics that have hours convenient for them. A county health department nurse brought together WISEWOMAN and other partners so they could offer these women screenings for heart disease and cancer, free medications, and health advice about healthy eating, fitness, and other ways to improve health.

Priscilla J. Wilson, RN, came up with the idea and made it happen. She works with the Cabarrus Health Alliance (the county health department), in both the WISEWOMAN Program and the North Carolina Breast and Cervical Cancer Control Program (NCBCCCP). She also has volunteered at the Community Free Clinic, a facility in Concord that has a small paid staff but is supported by grants, donations, and volunteer health professionals. She wondered what would happen if the clinic, the WISEWOMAN program, and NCBCCCP teamed up to provide hard working, underserved women with direly needed health services. When Priscilla shared her ideas with the health department's administrative staff and the clinic director, everyone was enthusiastic about this new opportunity to help underserved, working women.

The Cabarrus Health Alliance now provides WISEWOMAN services in their Kannapolis location and collaborates with partners to provide these services at other locations during hours that are convenient for working women. For example, the Community Free Clinic in Concord provides space for a clinic once each month and offers follow-up services to women who have abnormal test results. A team of family nurse practitioners, nurses, a health educator, a lab technician, and a receptionist help run the clinic.

Other partners providing services are the NorthEast Medical Center and its Mobile Mammography Unit as well as Ask First, a community health line that refers women to supportive services in the community. Free medications for

high blood pressure, high cholesterol, and other serious conditions also are available through the Community Free Clinic's partnership with pharmacy programs.

The Community Free Clinic also refers eligible women to the county's WISEWOMAN Program and NCBCCCP so they can receive heart disease screening and education as well as breast and cervical exams and mammograms. As a

result, participation in both county programs has consistently increased, with a 64% increase in the number of women served by WISEWOMAN. Over the past 3 years, about 400 underserved and minority women in these locations have received WISEWOMAN services. This is the first time many of these have received such services. Having a referral system in place and offering WISEWOMAN services to all eligible NCBCCCP participants were key factors for getting new women enrolled.

Importance of Success

This partnership allows women with breast cancer, cervical cancer, high blood pressure, and high cholesterol levels to get much-needed care, education, and medications that they might not otherwise receive. This experience is a model of how partners can work together to reach more women in need.

Lessons Learned

- Get to know your community resources and health care providers. If you see an opportunity for creative problem-solving, present your ideas with enthusiasm.
- Develop your program one step at a time. Once each step is finished, move on to the next step until you are ready to begin the program.
- Many clients do not fully understand the WISEWOMAN Program, so take the time to explain the program and all of its services. For example, let clients know up front how long they should plan for their clinic visit. Some visits may take longer than others.
- Find an innovative way—through incentives or other methods—to encourage patients to keep appointments.



“Women screened at the county health department used to be referred to private providers, but they had no access to medications. Now, with a partnership at the Community Free Clinic, eligible women can get the medications they need for free.”

— Priscilla Wilson, RN,
WISEWOMAN Service Coordinator



WISEWOMAN

Reaching Culturally Diverse Women





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Success Story 4 *Traditions of the Heart Promotes Wellness Among Alaska Native Women*

Staff and Lay Health Advisors Lead Lessons on Nutrition, Exercise, Stress, and Tobacco

Location Southcentral Foundation in Anchorage, Alaska

Focus Help Alaska Native women adopt a wide range of healthy behaviors that can improve their cardiovascular health and overall wellness.

Strategy WISEWOMAN staff members at Southcentral Foundation found a well-developed, successful nutrition and physical activity intervention and tailored the materials to be culturally appropriate for Alaska Native women. They tested the materials and got feedback from women in the intended audience.

Levels of Success This adaptation provides a model that other programs can use to develop culturally appropriate health materials. The Southcentral Foundation staff collaborated with the author of *A New Leaf... Choices for Healthy Living* to adapt the materials, sought input from Alaska Native women, and tailored the materials by adding foods and activities relevant to these women.

Results *Traditions of the Heart* is used for lifestyle interventions and counseling provided by WISEWOMAN projects in both Southcentral Foundation and SouthEast Alaska Regional Health Consortium. Other WISEWOMAN projects and public health initiatives hope to use these materials in their efforts to promote the health of Alaska Native women.

Story Developed By Julie M. Witmer, BS, MS
WISEWOMAN Project Coordinator
Southcentral Foundation

For program contact information, see Alaska in Appendix C or visit <http://www.cdc.gov/wisewoman>.

Traditions of the Heart Promotes Wellness Among Alaska Native Women

Staff and Lay Health Advisors Lead Lessons on Nutrition, Exercise, Stress, and Tobacco

WISEWOMAN staff at Southcentral Foundation in Alaska recognized the need for an easy-to-understand lifestyle intervention that could be used in diverse settings by professional and lay staff. After reviewing the literature for existing interventions, staff members could not find any interventions that provided enough lessons to promote long-term healthy habits and that were designed specifically for Alaska Natives. They decided to tailor an existing intervention to meet their needs. Staff members knew they needed materials, written at or below the sixth-grade reading level, that provided consistent nutrition and physical activity messages, could be used with groups or individuals, and could be used by women at home following the sessions.

They found a well-designed, successful intervention that fit the bill. Developed by Alice Ammerman, DrPH, RD, at the University of North Carolina-Chapel Hill, *A New Leaf . . . Choices for Healthy Living* is written at the sixth-grade reading level, contains sound lessons promoting nutrition and physical activity, and does not require an expert to deliver the messages. To adapt the materials for Alaska Native women, staff at Southcentral Foundation worked with a multidisciplinary work group that included Dr. Ammerman, registered dietitians, nurse practitioners, registered nurses, exercise specialists, and graphic artists. They surveyed eligible Alaska Native women aged 40–64 to identify topics of interest to them and effective ways to reach them with health messages. Findings from the survey led to these adaptations:

- The project was named *Traditions of the Heart* to reflect the cultural emphasis of the adaptation.
- A Native artist created a heart-shaped design (above) that tells a story and reflects the diverse cultural heritage and traditions of Alaska Native women.
- A stress management/traditional wellness program was developed that helps women with relaxation, imagery, laughter, and time management.
- Culturally appropriate language is used in all materials.
- Dietary assessments used affordable and available foods commonly eaten in Alaska and included traditional or subsistence food choices.
- The cookbook used in *A New Leaf* was adapted to include traditional Alaska Native recipes and recipes with foods commonly available in the area, including salmon and berries.



The Traditions of the Heart design tells a story of Alaska Native women's lives and reflects their many traditions.

- Exercise lessons were adapted to reflect popular Alaskan activities, which are dictated by climate, accessibility, cost, and environment. Photos of Alaska Native women exercising replaced graphic designs that were in the original *A New Leaf* lessons.
- To promote total wellness among Alaska Native women, *Traditions of the Heart* developed a 12-week series of sessions that cover nutrition, exercise, stress management, and tobacco use.
- Information on tobacco use was expanded so that all forms of tobacco are now addressed.

Traditions of the Heart was pilot-tested with women in the Southcentral Foundation WISEWOMAN program. The staff then used the pilot test findings to refine and strengthen the intervention. The adaptation, started in May 2000, took 4 months to complete and required over 660 hours of staff and consultant time. Costs included personnel, consultant, and materials fees.

Importance of Success

The 12-week series offered by *Traditions of the Heart* is tailored to meet the needs of Alaska Native women. The sessions convey messages that are culturally acceptable and can be easily disseminated by lay health advisors. *Traditions of the Heart* is now used by another WISEWOMAN project, led by SouthEast Alaska Regional Health Consortium (SEARHC). Nancy C. Knapp, MPH, WISEWOMAN Project

Director at SEARHC said that *Traditions of the Heart* has made a difference in women's lives. "Because it references local subsistence foods and locally available physical activity options, women in the SEARHC WISEWOMAN program can relate to the materials," she noted.

Lessons Learned

- Consider basing your program on a well-developed model like *A New Leaf*. By collaborating with the designer, you can save time and effort and keep your project on schedule.
- Learn about the needs and interests of women in your target population through surveys with the women and people who will lead the intervention. This information is essential if you are to design a culturally appropriate program.



WISEWOMAN

Success Story 5 WISEWOMAN Partners With Chilkat Indian Village, Incorporates Cultural Traditions To Promote Fitness

Alaska Native Women Are More Active as a Result

Location Rural southeastern Alaska

Focus Remove the barriers that block underserved women from being physically active.

Strategy WISEWOMAN staff with the SouthEast Alaska Regional Health Consortium developed partnerships that give underserved women access to a fitness center where they can be physically active.

Levels of Success Many community benefits have resulted. Collaborating with partners stretched the WISEWOMAN program's resources and allowed more women to use the fitness center. Activities that build on cultural traditions and messages that link lifestyle changes with lower blood pressure and cholesterol contribute to healthier communities.

Interpersonal changes also have occurred. Reducing the cost of passes to the fitness center encouraged women to be more physically active and use the fitness center. As they participated in Ravens Versus Eagles activities and recorded the time they were active, daily and over time, the women became more aware of how lifestyle changes could lower their blood pressure and cholesterol levels.

Results So far, 10 women have received and used their fitness center passes, and 15 women have participated in the Ravens Versus Eagles competition.

Story Developed By Ellen Carey-Starr, BA
Community Wellness Advocate
SouthEast Alaska Regional Health Consortium

For program contact information, see Alaska in Appendix C or visit <http://www.cdc.gov/wisewoman>.

WISEWOMAN Partners With Chilkat Indian Village, Incorporates Cultural Traditions To Promote Fitness

Alaska Native Women Are More Active as a Result

Klukwan is an ancient Tlingit village of about 100 residents located on the banks of the Chilkat River. With about 60 inches of snow, rain, or sleet falling each year, Klukwan has only 3 months of mild weather each year. The village has no sidewalks, but there is an eagle-watching path just south of the village where some residents walk on mild weather days. However, concerns about dogs and bears keep some residents from walking outside. The lack of sidewalks, harsh weather, and threat of dogs and bears were preventing many people from being physically active outdoors. Klukwan Fitness Center staff worked with the SouthEast Alaska Regional Health Consortium's WISEWOMAN project (SEARHC) to address this problem.

It all started when the fitness center offered a spacious room where SEARHC Health Educator Ellen Carey-Starr could hold lifestyle classes. Ellen also saw a chance to encourage women to become physically active by offering them access to the center's fitness equipment and classes. She met with members of the Chilkat Indian Village in Klukwan, Alaska. They liked her ideas and formed a partnership to allow women participating in SEARHC's WISEWOMAN project to use Klukwan Fitness Center for half price. The Chilkat Indian Village printed passes allowing the women to use the center for half price. SEARHC bought the passes and sold them to women in the WISEWOMAN project so they could begin using the fitness center.

The SEARHC staff and the Chilkat Indian Village Tribal Services staff also collaborated to create Ravens Versus Eagles, an annual fitness competition that builds on cultural traditions and encourages women to be physically active. The competition's name has special meaning for women in Klukwan, because every member of the Tlingit Tribe is linked to either the Raven or Eagle moiety. SEARHC staff members use posters and monthly calendars to promote the 3-month event. Women participating in the competition receive a monthly calendar to record the

amount of time they spend being active each day. Women get 1 point for every 30 minutes they are physically active.

At the end of the 3-month competition, SEARHC staff host a dinner celebration to honor the women who complete and turn in their calendars. Each woman receives a wrapped gift such as a sandwich cooler bag or water bottle. Many women attending the dinner say the competition has had a positive effect on their health. Some women say they feel better, whereas others talk about losing inches around their waist. One woman lowered her cholesterol level by 30 points. Other women have been motivated by these successes.



Working out at the Klukwan Fitness Center

Importance of Success

Sponsoring reduced-cost passes to the fitness center has allowed more women to have access to facilities that promote physical activity. The Chilkat Indian Village partnership has helped SEARHC's WISEWOMAN enrollees afford the fitness center, improved use of the facility, and encouraged women to walk more during the Ravens Versus Eagles competition. Such partnerships are cost-beneficial because they can increase use of community

fitness facilities and provide participants with low-cost access to these facilities.

Lessons Learned

- Consider offering reduced-cost passes to a fitness center as a way to promote physical activity for low-income participants and get more women to use the fitness center.
- Look for partners who can help you stretch your existing resources.
- Consider creative ways to develop activities that build on cultural traditions and that link lifestyle changes to lower blood pressure and cholesterol. Ravens Versus Eagles activities encourage women to record the time they are active, both daily and over time. Such activities help women become more aware of how lifestyle changes lower their blood pressure and cholesterol levels.



WISEWOMAN

Success Story 6 ¡Vida Saludable, Corazón Contento!

*Promoting Healthy Living and a Happy Heart
Among Latina Women*

Location Chapel Hill, North Carolina

Focus Help Latina women make healthy changes in their diet and become more physically active.

Strategy WISEWOMAN staff at the University of North Carolina—Chapel Hill developed culturally appropriate, Spanish-language materials to help Latina women make dietary and physical activity changes that will reduce their risk for heart disease and stroke.

Levels of Success This successful strategy can serve as a model for others wanting to develop culturally appropriate materials. Rigorous reviews by bilingual health professionals and Latina women were essential to ensuring that these materials would be culturally sensitive.

Results These culturally targeted materials have the potential to reach many Latina women across the country. They are being pilot-tested in North Carolina and other states that need help reaching Latina women at risk for heart disease and stroke.

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¡Vida Saludable, Corazón Contento!

Promoting Healthy Living and a Happy Heart Among Latina Women

Greater numbers of Latina women began to seek cardiovascular disease health services through the North Carolina WISEWOMAN Project. Staff members recognized the need to use culturally relevant Spanish-language materials, yet few were available. To address this need, the University of North Carolina-Chapel Hill Center for Health Promotion and Disease Prevention adapted the WISEWOMAN lifestyle intervention *A New Leaf...Choices for Healthy Living* for Latina women. The cultural adaptation and translation of *A New Leaf* materials into Spanish was funded through a CDC special interest project and took almost 18 months to complete.

WISEWOMAN staff members began by doing research to learn about the eating and physical activity behaviors of North Carolina's Latina women and find out what these women knew about cardiovascular disease. After reviewing the literature and existing Spanish-language health promotion materials, staff members gained insight into the Latina culture, health habits, and the need for adapted materials. A bicultural public health educator conducted three focus groups with older, low-income Latina women to discuss their cultural practices and their knowledge, attitudes, and behaviors related to diet, physical activity, and cardiovascular disease.

The focus group's feedback guided the creation of a 75-page Spanish-language lifestyle assessment and counseling manual that aims to help Latina women reduce their risk for cardiovascular disease. Here are some of the ways that the original *A New Leaf* materials were adapted:

- Focus groups chose the title, *¡Vida Saludable, Corazón Contento!* (*Healthy Living, Happy Heart*), because it was more relevant to Latina women than the concept of "turning over a new leaf."
- Dietary assessment and health tips include foods common in the Latino community. For example, health tips encourage eating beans seasoned without lard.
- The dietary risk assessment tool is user-friendly for Latina women and can be easily used by health counselors with minimal Spanish-language skills.
- Physical activities reflect Latinos' daily and leisure time activities and sports, including soccer and dancing.

- A cookbook was developed that includes 78 culturally appropriate, heart-healthy recipes.
- A glossary lists common Latino food terms in multiple Spanish dialects.
- Culturally relevant graphics are used.

After the Spanish-language manual was developed, the materials were reviewed for cultural relevance, suitability of graphics and content, readability, and grammar. The materials were first tested by three focus groups of lay Latina women in North Carolina who immigrated and have lived in the United States for varying lengths of time. Next, Arizona WISEWOMAN partners reviewed the Spanish cookbook with their Hispanic program participants. Finally, bicultural public health professionals at federal, state, and local levels reviewed the materials. *¡Vida Saludable, Corazón Contento!* is currently being pilot-tested in North Carolina health departments and will also be tested by the California WISEWOMAN project.



Importance of Success

¡Vida Saludable, Corazón Contento! is a Spanish-language lifestyle assessment and counseling manual designed to

guide Latina women as they make changes in their dietary and physical activity behaviors in order to reduce their risk for cardiovascular disease.

New partnerships were formed with WISEWOMAN states to adapt the *New Leaf* manual to meet the cultural needs of their populations. Other public health agencies across the country are recognizing the need for culturally adapted materials and requesting WISEWOMAN's assistance with the tailoring process.

Lessons Learned

- When developing culturally tailored health education materials for Latina women, allow adequate time to collaborate with and get input from bicultural health professionals and the women served.
- Recognize that evaluation and revision of materials at multiple levels are essential for developing culturally sensitive materials.



WISEWOMAN

Women Helping Women





WISEWOMAN

Success Story 7 Mary Ellen's Story: Right on Time for Her Health

*Alaska Woman Works Out Often, Eats Healthier Foods,
Tackles Stress*

Location Rural southeastern Alaska

Focus Empower women to take charge of their health and begin making healthy changes in diet, physical activity, and dealing with stress.

Strategy Project staff members empowered women and helped them as they moved toward improving their health, and they became role models and champions, encouraging more women to enroll in WISEWOMAN.

Levels of Success Many intrapersonal benefits have resulted. Knowing about and having access to WISEWOMAN prompts women to take action and is a starting place for them to turn their intentions into a course of action.

Interpersonal accomplishments also have been made. Positive and encouraging staff members with a cultural background similar to those in your target audience can empower women to take steps to improve their health. Teaching women how to build their skills and helping them set goals aid them in making informed decisions.

Results Mary Ellen's empowerment and leadership have the potential to positively affect her, her friends and family, and hundreds of women.

Story Developed By Evelyn Williams
Community Wellness Advocate
Alicia Roberts Medical Center
SouthEast Alaska Regional Health Consortium

For program contact information, see Alaska in Appendix C or visit <http://www.cdc.gov/wisewoman>.

Mary Ellen's Story: Right on Time for Her Health

Alaska Woman Works Out Often, Eats Healthier Foods, Tackles Stress

Mary Ellen is an active participant in the SouthEast Alaska Regional Health Consortium (SEARHC) WISEWOMAN program. Before Mary Ellen enrolled in WISEWOMAN, she had begun the process of being healthy but did not cope well with stress. Mary Ellen enrolled in the SEARHC WISEWOMAN program soon after it began. The WISEWOMAN Program gave her the chance to take steps to improve her health.

When she came to WISEWOMAN, Mary Ellen met with Deneise, the patient health educator, who made her more aware of her heart health, including her cholesterol and blood pressure. In a caring and positive manner, Deneise worked on a plan with Mary Ellen to improve her health. Mary Ellen chose the goals she wanted to work on. This empowered her to start taking gradual steps toward a healthy lifestyle.

In Mary Ellen's Words

"The WISEWOMAN Program came at a time when I needed to actively focus on my overall health needs: physical exercise, nutrition, and facing stress head on and dealing with it. Initially, I met with Deneise for my health screening. She went over the results with me, told me about my present health status, and set goals with me to improve my health. We worked on a plan together—a course of action. Her positiveness and encouragement were contagious. I went home determined to begin making changes in my life."

"Evelyn, the program's community wellness advocate, enthusiastically encouraged me to have more fitness in my life. I now work out 4 to 6 days a week. It has been exciting to see what increased physical activity does to my body. I'm learning to be honest with myself when stress happens; face it and get on to other parts of my life. I have also started to work on eating more veggies and fruit each day instead of just occasionally."

About SEARHC's WISEWOMAN Program

Women who participate in the SEARHC WISEWOMAN program have their blood pressure, cholesterol, and glucose levels checked and undergo some other tests. Once her lab results are in, the woman is referred to a patient health educator for health counseling. Deneise was Mary Ellen's patient health educator. This visit takes about an

hour and a half. Women are then invited to attend health initiatives and "gatherings." Health initiatives promote physical activity or nutrition and may include group sports challenges. Gatherings focus on health topics such as stress management. At gatherings, women share their stories and help each other maintain their new, healthy habits.

Importance of Success

Mary Ellen seeks ways to improve her health and encourages others to do the same. She is friendly, helpful, and encouraging. She is an advocate for health and a WISEWOMAN program champion. She even made suggestions for gatherings that were used to make the program even better.

Mary Ellen now approaches health in a holistic way: she works out regularly each week,

is starting to have healthier eating habits, and is learning to honestly face the things that cause stress in her life.

Lessons Learned

- Joining WISEWOMAN gave Mary Ellen the chance to take steps to improve her health.
- Positive and encouraging staff, made up of women who were like Mary Ellen, provided the support she needed to take these steps.
- Mary Ellen took one step at a time toward health and wellness.



Mary Ellen, WISEWOMAN Champion



WISEWOMAN

Success Story 8 The Many Roles of Vicki Jackson: Salvation Army Captain, Friend, and WISEWOMAN Champion

She Leads Other Women Down a Path to a Healthier, More Active Life

Location Klawock, in rural southeastern Alaska

Focus Encourage Alaska Native women to be more physically active and reduce their risk for diabetes and heart disease.

Strategy WISEWOMAN staff enroll women in the community who are role models and use their influence and social support to help more underserved women become physically active.

Levels of Success Many interpersonal accomplishments have resulted. Women receive social support by going to the aquatic center together. Through her leadership and outreach in the community, Captain Vicki has influenced other women to make lifestyle changes and enroll in the WISEWOMAN program. She has also given women rides to the aquatic center; this reduces the transportation barrier that many women in rural locations face.

Results Hundreds of women aged 40 and older, their families, Salvation Army volunteers, and children could benefit from Captain Vicki's leadership, positive influence in the community, and efforts to bring more women into the WISEWOMAN project.

Story Developed By Evelyn Williams
Community Wellness Advocate
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SouthEast Alaska Regional Health Consortium

For program contact information, see Alaska in Appendix C or visit <http://www.cdc.gov/wisewoman>.

The Many Roles of Vicki Jackson: Salvation Army Captain, Friend, and WISEWOMAN Champion

She Leads Other Women Down a Path to a Healthier, More Active Life

Vicki Jackson, 43, is Captain of the Prince of Wales Salvation Army Church in Alaska. After enrolling in the WISEWOMAN project at the SouthEast Alaska Regional Health Consortium (SEARHC), she has taken advantage of many opportunities offered by the project. She has received a pedometer and is working toward her goal of taking 10,000 steps each day. She also has a discount pass for the local aquatic center and is going three times a week. She has diabetes and is monitoring her blood sugar.

Captain Vicki's quest to improve her health began when she turned 40, which she dreaded. Although she enrolled in SEARHC just a short while ago, she is very excited and proud to be part of WISEWOMAN: "I'm a WISEWOMAN!" declares Vicki. Her excitement and joy radiate to everyone she is around. She credits her faith for her current leadership position location and desire to be active in SEARHC's WISEWOMAN. She wanted to help Tlingit and Haida women, the women of her tribal affiliation. By working in the Klawock area, she is able to reach out to other women she knows who are also enrolled in or eligible for SEARHC. For example, in her ministerial role, she has access to a van. SEARHC provides discount passes to the local aquatic center, which is located about 7 miles away from the SEARHC location. The women come to the aquatic center to swim, take water aerobics classes, and work out. Other women who have taken advantage of the aquatic center discount passes offered by SEARHC lack access to transportation. In the afternoons and evenings, Captain Vicki picks these women up and takes them with her to the aquatic center. Going together provides social support and keeps them motivated to be physically active.

Captain Vicki has also offered to promote some of the programs that SEARHC offers to women who shop at the Salvation Army Thrift Store. She places materials for the

physical activity program and HUGS, a nondiet way of learning to eat healthy foods, on the counter near the register. Captain Vicki also has encouraged one of the cashiers at the thrift store to enroll in the SEARHC program.

Importance of Success

Captain Vicki is a role model for other women whom she has contact with. She is physically active, takes care of her own health, and encourages others to do the same. Vicki is in a position to influence many women, their friends, and family members. Captain Vicki has access to transportation and is willing to help others in need. Vicki is a creative problem-solver and partner for SEARHC's Prince of Wales location. Through her relationships and position, she champions the program, reduces transportation barriers for other women, and builds social support among these women.

Vicki takes care of herself and others as she uses SEARHC's WISEWOMAN services, models the behavior she wants others to replicate, and builds relationships with women in need. She not only uses her influential position to help others, but

she also taps into her resources to provide outreach for SEARHC and social support for women.

Lessons Learned

- Encourage women of all ages to get started on improving their health. Health is not age-dependent, and 40 is not too old to begin making changes.
- Let women know that they can have a strong influence on people with whom they work, play, and live.
- Look for opportunities to solve problems creatively. If you are in a position where you can give someone a ride or get her a discount, go ahead and do it. Each effort to help adds up. These actions make it easier for a woman to be healthy.



Vicki Jackson, Captain of the Prince of Wales Salvation Army Church and participant in WISEWOMAN



WISEWOMAN

Success Story 9 Massachusetts Women Help Each Other Follow a Healthy Path by Joining Social Support Group

One Woman in the Community Leads the Group, Builds Strong Support Among Members

Location Ware, Massachusetts

Focus Help underserved women in this rural town make lasting lifestyle changes that will reduce their risks for diabetes, heart disease, and stroke.

Strategy A support group tailored to women's interests and needs gives women the tools they need to make healthy changes in their lives. It also empowers women and allows them to be leaders and role models for other women in the community.

Levels of Success Many interpersonal benefits have resulted. Women are motivated to make health changes as they are exposed to other women's successes and encouragement. The willingness of members to share and help each other in a peer-led group promotes a setting where women can share.

Results Each year, 250 women can be helped through the Women's Health Support Group, which serves Women's Health Network members including WISEWOMAN participants.

Story Developed By Michelle Holmgren
Mary Lane Hospital

For program contact information, see Massachusetts in Appendix C or visit <http://www.cdc.gov/wisewoman>.

Massachusetts Women Help Each Other Follow a Healthy Path by Joining Social Support Group

One Woman in the Community Leads the Group, Builds Strong Support Among Members

In rural Ware, Massachusetts, women needed help improving their health at a price they could afford. They also needed health advice. Out of these needs was born the Women's Health Support Group, started in October 2001. The Women's Health Network, which offers WISEWOMAN services, started the support group for network members. Each month, women attend group meetings for health tips and help in managing blood sugar, blood pressure, and cholesterol. The women feel as if the support group truly belongs to them, and one woman has become the group's leader and champion.

Heather Ursini, RN, the Woman's Health Network Nurse Case Manager, first led the group and took the time to find out what the women wanted from these meetings. At first, she tried lectures and quickly saw this was not working. When they began asking for advice on reading food labels, and losing weight, Heather invited a registered dietitian to speak for 10 weeks at the meetings. The women were pleased that Heather had listened to them and tailored group meetings to reflect their interests. As a result, they began to share their stories with each other and invited their friends to join them.

More women returned each week because the meetings were interesting and fun. They learned how to prepare healthy, tasty foods through taste testing and recipe sharing. They also had access to helpful health information through the health library at Mary Lane Hospital, where they meet. Some women began to lose weight. They could see the physical, emotional, and spiritual changes in themselves and other women. Hands-on activities and meeting as a group to share ideas increased each woman's belief that a person can make changes in their lifestyle to promote a healthier life for them and their families.

The support group and the Women's Health Network refer women to each other as a way of ensuring that underserved women in Ware can get the care they need to be healthy and fit. Women in the support group receive a wide range of services offered by WISEWOMAN and other Women's Health Network programs. In turn, women participating in the network who have high cholesterol, high blood pressure, high blood glucose, or weight problems are referred to the Women's Health Support Group for social support and education. Women in the support group invite other women in the community to attend these sessions. At first, only 8 women attended regularly, but this has jumped to 12 women. The 10-week nutrition program draws about 20–25

women who are eager to learn about nutrition and healthy lifestyles.

WISEWOMAN participant Verna DeAngelis is a great example of how support groups can blossom when members become committed to the group and make it their own. After losing 60 pounds and seeing her cholesterol and glucose levels drop, Verna became a champion of the Women's Health Support Group. Over time, she began to open up at the

meetings and share advice on how she had made these amazing changes in her life. She was then asked to lead a few sessions. She now leads the group.

"I was motivated because of my high blood levels. My mother passed away because she was overweight, and had high cholesterol as well as high blood sugar," Verna recalled. "I also believe God was instrumental in my success. I often prayed for strength to make the changes necessary to maintain good health and to be a benefit to my community, my family, and friends. I have never felt stronger and more energetic!"

"I knew I needed to make some changes in my life or I would follow in the footsteps of my mother's poor health. The WISEWOMAN program at the Women's Health Network identified my health problems and I began to make changes to better myself."

— Verna DeAngelis,
WISEWOMAN participant and
Women's Health Support Group champion

Importance of Change

Verna invites friends and co-workers to meetings, but she doesn't stop there. She recently invited a woman she works with to attend the meetings and took the woman under her wing. Verna is mentoring this co-worker as she works to lower her weight. This example shows how a group led by its members built social support for women enrolled in WISEWOMAN and the Women's Health Network.

Lessons Learned

- For your support group to succeed, members must be willing to share and help each other. Peer-led groups promote a setting where it is easy for women to share.
- Organize fun, hands-on activities such as taste testings and recipe swaps, where women can learn how to prepare healthy meals.
- Realize that as women see changes in themselves and others, they become even more motivated to make healthy changes.
- Take steps to ensure that women feel their interests are driving the support group. When women feel that the meetings belong to them, their interest increases.
- To boost attendance and participation, ask women what they want, listen to them, and change the format to reflect their needs and concerns.



WISEWOMAN

Developing Partnerships





WISEWOMAN

Success Story 10 Partners Pool Resources To Give Rural Alaska Women Higher Quality of Care, More Life-Saving Services

Multicultural Care Reflects the Community's Needs

Location Rural southeastern Alaska

Focus Provide women in this isolated, rural area with much-needed preventive services such as programs on nutrition, physical activity, and smoking cessation.

Strategy Community partners pooled their resources to provide multicultural health care services to underserved women in rural Alaska.

Levels of Success Many organizational benefits have resulted. By coordinating their funding sources, agencies have been able to offer more extensive services, including preventive care, to low-income women who previously were unable to receive the care needed to stay healthy.

Results Because this WISEWOMAN project has pooled resources with other agencies in the community, more Alaska Native as well as non-Native women are receiving preventive care. About 500 women in isolated communities have received preventive services through this WISEWOMAN project in the first year of operation.

Sroty Developed BY Nancy C. Knapp, MPH
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For program contact information, see Alaska in Appendix C or visit <http://www.cdc.gov/wisewoman>.

Partners Pool Resources To Give Rural Alaska Women Higher Quality of Care, More Life-Saving Services

In rural southeastern Alaska, programs to help women stop smoking, eat healthier foods, and be physically active often took second place to dealing with the more immediate priorities of providing much-needed primary health care to isolated Alaska Native communities. Two clinics run by the SouthEast Alaska Regional Health Consortium (SEARHC) were struggling financially and provided only limited curative services—one on the isolated Prince of Wales Island and the other at the end of southeast Alaska. Adding to the problem was the fact that non-Native women were having difficulty getting preventive services.

SEARHC tackled these problems by pooling its resources with those of two strong partners: the Centers for Disease Control and Prevention's WISEWOMAN Program and the Health Resources and Services Administration (HRSA)-funded Community Health Centers. Here's how the partnership works:

CDC's WISEWOMAN funds have allowed SEARHC to establish a local WISEWOMAN project that reaches more underserved women with potentially life-saving services. The project provides underserved women with services that aim to lower their risk for heart disease and other diseases—services that are not covered by any other funding. The WISEWOMAN project fills a gap by reducing barriers to care for underserved women and providing preventive health services to non-Native rural women who previously could not get this care easily. WISEWOMAN also stretches dollars already invested in public health. Providing WISEWOMAN services at HRSA-funded Community Health Centers allows staff to provide women with programs on nutrition, physical activity, and tobacco cessation while working to reduce health disparities—a goal shared by both HRSA and CDC.

HRSA-funded Community Health Centers cover a portion of the medical costs for low-income women under a sliding fee scale. In addition, HRSA funding has helped shore up the clinic in Haines and allowed the SEARHC clinic on Prince of Wales Island to see clients after hours. In addition, HRSA funding allowed SEARHC to provide additional services to Native Alaskan women and, for the first time, to provide access to health care services to all underserved women on the Island. Now, through this partnership, the Alicia

Roberts Medical Center on Prince of Wales Island and the Haines Medical Center have considerably expanded the health care services they offer women.

The SouthEast Alaska Regional Health Consortium covers medical costs for Alaska Native and American Indian women. With Indian Health Services funding, SEARHC manages a hospital and coordinates a network of 11 clinics throughout southeast Alaska, providing a wide range of care to women in isolated, rural Alaskan villages. Because of this partnership, SEARHC can provide underserved Native and non-Native women with comprehensive health care that meets their prevention and primary care needs.

Importance of Success

Identifying service gaps and multiple sources of funding to fill these gaps allows women in rural areas of Alaska to receive more comprehensive health promotion and disease prevention services. WISEWOMAN funding allows eligible Native women and non-Native women who often have a difficult time receiving such services to gain access to health care services. Care is more multicultural and reflects community needs because community mem-

bers provide it. Pooled funds allow SEARHC to offer other medical, pharmacy, and dental services to women while increasing nursing, behavioral health, and health promotion services.

Lessons Learned

- By coordinating resources, you can greatly expand community-based comprehensive health services to underserved populations or communities.
- Realize that applying for supplemental funding takes time but can lead to a return on your investment in health promotion.
- By coordinating different funding sources, you and other agencies in the community can offer underserved women preventive services such as screening for heart disease risk factors and classes to help women stop smoking, eat healthier foods, and be more active. This coordination of effort allows women with limited incomes and some who were previously excluded to receive the care they need to stay healthy.

“HRSA funding, which targets underserved communities with limited access to care, combined with the primary preventive services offered by the SEARHC’s WISEWOMAN project, is well suited for rural southeast Alaska. Here, almost every community faces such health care shortage issues. Risk factors for heart disease, such as smoking and inactivity, are among the highest in the nation.”

—Cindy Gamble, Clinic Administrator,
Alicia Roberts Medical Center,
Klawock, Alaska



WISEWOMAN

Success Story 11 WISEWOMAN and League of Women Voters Help Lansing Area Women Put on Their Walking Shoes

Nontraditional Partners Fill the Gaps, Bring Down the Barriers

Location Lansing, Michigan

Focus Remove the barriers that block underserved women from being physically active.

Strategy This WISEWOMAN project developed partnerships with the local League of Women Voters of the Lansing Area and a sporting goods store to provide low-income women in Lansing with high-quality athletic shoes and the opportunity to become physically active.

Levels of Success Many community benefits have resulted. The health department, league, and sporting goods store formed a public-private partnership that serves as a model for nontraditional partnerships. By reducing barriers to physical activity, the partnership aims to promote healthier citizens.

Results Seventeen WISEWOMAN participants will receive gift certificates and discounts, allowing them to buy a pair of high-quality athletic shoes.

Story Developed By Nancy L. Jenkins
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For program contact information, see Michigan in Appendix C or visit <http://www.cdc.gov/wisewoman>.

WISEWOMAN and League of Women Voters Help Lansing Area Women Put on Their Walking Shoes

Nontraditional Partners Fill the Gaps, Bring Down the Barriers

Low-income women face many barriers that make it difficult for them to become physically active. Buying a pair of high-quality athletic shoes is a luxury they cannot afford. To address these barriers, WISEWOMAN staff at the Ingham County Health Department submitted an application requesting funds from the League of Women Voters of the Lansing Area. The league donated \$500 to improve the health and wellness of low-income women in the county by promoting healthy lifestyle changes.

Because cardiovascular disease is the top health threat to women, WISEWOMAN staff proposed to use the \$500 to target sedentary lifestyles. WISEWOMAN staff and members of the league considered either providing athletic shoes or purchasing health club memberships with the funding. But because health club memberships are expensive, only a few could be purchased with the \$500. They decided to help more women by providing them with athletic shoes.

WISEWOMAN staff needed a conveniently located store that carried high-quality athletic shoes and would give the women a discount. They chose to purchase gift certificates from a local sporting goods store located less than a mile from the county health department and on the bus line. The store agreed to give WISEWOMAN participants a 20% discount on their shoe purchases. The gift certificate and discount combination allows the women to purchase a pair of high-quality athletic shoes with a \$30 gift certificate.

Using the donation from the League of Women Voters of the Lansing Area to provide low-income women with athletic shoes has removed an economic barrier and made it easier for these women to begin a fitness program. Providing the shoes is the first step, because many women who participate in the WISEWOMAN program do not own shoes appropriate for walking or exercise. In return, the women who benefit from this donation must remain in the WISEWOMAN program and demonstrate they are taking responsibility for making healthy lifestyle changes. For

example, they must fill out a lifestyle contract to participate in the program and be eligible to receive the athletic shoes.

WISEWOMAN lifestyle counselors follow up regularly with these women to see that the shoes are put to good use. The women also must visit the health department to attend group nutrition and fitness activities that encourage them to lead a healthier lifestyle.



Joy Whitten, LWVLA President (left), presents donation to WISEWOMAN's Nancy Jenkins.

Importance of Success

Seventeen Ingham County WISEWOMAN participants will benefit from the League of Women Voters of the Lansing Area's donation. By reducing a barrier—in this case, a lack of athletic shoes—WISEWOMAN is increasing the chances that these women will become physically active and improve their health. Other women could benefit from similar donations in the future.

So far, eight women have received \$30 gift certificates to purchase athletic shoes. Each of these women has demonstrated

an interest in leading a healthier lifestyle by participating in group activities and by meeting with WISEWOMAN's lifestyle counselor to discuss the progress she has made toward meeting her physical activity goals.

Lessons Learned

- Search for partners in the community who can help you remove barriers that block low-income women from being physically active. The donation from the LWVLA and cooperation of the sporting goods store are bringing down economic barriers and making it easier for low-income women to begin a fitness program.
- Realize that a donation of any amount can expand your program's ability to promote the health of women in your community.
- Look for potential funding opportunities in your local community. Keep an open mind to collaborating with unlikely partners.



WISEWOMAN

Success Story 12 Healthwise Partnership Promotes Physical Activity for WISEWOMAN Participants in Winston-Salem

YWCA Scholarships Reduce Cost and Access Barriers for Women

Location Winston-Salem, North Carolina

Focus Reach underserved women who otherwise would not have opportunities to be physically active.

Strategy Community partners collaborated to offer YWCA scholarships to help women in need become more physically active.

Levels of Success Many positive community successes have occurred. The program has removed cost and access barriers that were preventing underserved women from being physically active. This outreach strategy also has attracted more women to the WISEWOMAN program.

Success also has occurred at the organizational level. By forming partnerships with other agencies, this WISEWOMAN project has extended its resources and increased women's use of community resources. The partnerships also have increased the chances that these services will be sustained in the community, if and when funding for this project ceases.

Results Fifteen women have received YWCA scholarships so far.

Story Developed By Jackie Boggs, RN
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Forsyth County Department of Public Health
Winston-Salem, North Carolina

For program contact information, see North Carolina in Appendix C or visit <http://www.cdc.gov/wisewoman>.

Healthwise Partnership Promotes Physical Activity for WISEWOMAN Participants in Winston-Salem

YWCA Scholarships Reduce Cost and Access Barriers for Women

The Healthwise program, funded by the Kate B. Reynolds Charitable Trust and the WISEWOMAN program, provides health education, counseling, and referrals to at-risk WISEWOMAN clients. As part of their counseling, clients are encouraged to become more physically active. Most clients are referred to chair exercise classes or walking groups sponsored by Healthwise. However, patients with physical limitations or schedule conflicts did not have these options.

The YWCA of Winston-Salem/Forsyth County was a partner for In Control, another Kate B. Reynolds Charitable Trust grant funded program for patients with diabetes. In Control patients received low-cost YWCA memberships as part of their care. When the In Control grant expired, staff at the Forsyth County Department of Public Health and the YWCA recognized an opportunity to sustain the program at a low cost. The YWCA successfully sought funding from the United Way of Forsyth County to provide 60 memberships through Healthwise referrals. Fifteen of the 60 memberships were for WISEWOMAN participants.

Memberships are distributed to WISEWOMAN clients as YWCA scholarships. The scholarships allow women to purchase a 1-month membership for \$5 versus the regular \$30 cost. Scholarships are incentives that encourage WISEWOMAN participants to engage in physical activity and that recruit women into the program.

WISEWOMAN clients have their blood pressure and cholesterol levels checked at the Forsyth County Department of Public Health. Women are then counseled about healthy diets, physical activity, and, if needed, smoking cessation and stress management. Women are then referred to the Healthwise program coordinator to develop an individualized physical activity plan. After the clients answer health questions and their physicians approve their participation in the physical activity programs, the Healthwise coordinator can offer them YWCA scholarships.

Women who receive YWCA scholarships must attend an orientation to learn about the exercise equipment or attend classes at the YWCA. The women are required to engage in physical activity at least twice a week for a 6-month period.

They must sign in at each visit. The Healthwise coordinator monitors attendance and provides feedback and motivation for women at follow-up visits. Incentives are awarded to women who achieve their health and physical activity goals.

The scholarships provide women with a variety of options for being physically active. For example, women with severe joint problems or those who are extremely obese can attend water aerobics classes at the YWCA. Other women

come to the exercise classes or use the treadmills, exercise bikes, stair machines, weight machines, and free weights in the YWCA fitness room. The YWCA also makes it easy for women to be physically active because of its convenient evening and weekend hours.

Importance of Success

The WISEWOMAN, Healthwise and YWCA program partnership allows at-risk women to participate in physical activity programs appropriate for their health needs during convenient

evening and weekend hours. The partnership also encourages women who are unaware of WISEWOMAN to enroll and become physically active at a price they can afford. As women seek to achieve their health goals, WISEWOMAN offers on-going support and motivation and fosters a supportive environment among participants. Through access to Healthwise and the YWCA, WISEWOMAN clients have had opportunities to become more physically active, lose weight, increase their stamina, and better control their blood pressure and cholesterol levels.

Lessons Learned

- Find partners who can help you remove barriers for underserved women and reach out to more women. For this WISEWOMAN project, providing YWCA scholarships reduces both cost and access barriers and attracts women to the WISEWOMAN program.
- By forming partnerships with others, you can extend your resources and increase use of community resources. Establishing strong partnerships also increases the chances of sustaining these services, if and when funding for your program ends.

“The YWCA scholarship, provided by WISEWOMAN, gave me a mental break and allowed me to exercise in addition to changing my eating habits for the best. As a result, I have lost weight, reduced my cholesterol, and have more stamina to take care of my husband.”

– Rose, WISEWOMAN participant



WISEWOMAN

Appendixes





WISEWOMAN

Appendix A

Writing Your Own Success Stories

If you plan to collect your own success stories, here are some suggestions to help you through the process.

1. Decide what major points you want to emphasize, and create a form to collect the data you need.

Rather than reinvent the wheel, you can use an existing form and adapt it to capture the kind of information you want to highlight. We modeled our form (see page 44) after the one used to collect data for the Community Change Chronicles, created by the Physical Activity and Nutrition Unit at the North Carolina Department of Health and Human Services. We also used their story template as a model for our template.

If you want to highlight any special themes (for example, partnerships, incentives, or cultural adaptation), make sure your form will capture this information. You will then be able to target your stories and organize them around these themes. This method will also help if you are interested in designing a qualitative research study to identify the major components of programs that work.

2. Invite people in the field to nominate ideas for success stories, and then begin collecting data and writing the stories.

Send your data collection form to people who might want to nominate and submit stories. We worked closely with the contributors to write each story. This process involved interviewing the contributors and other staff. To be consistent, we used the same template when writing each story (see page 43).

3. Use pictures and quotations from women whenever possible.

Pictures and quotations help others see the human side of your program and the real people who are involved. Pictures also draw people to read your story and break up text, making it interesting and easy to read. You can use pull quotes—an enlarged quotation highlighted on a page—to summarize key ideas or provide powerful words from women and other stakeholders. Make sure that everyone who provided a quotation or appeared in a picture signed a talent and consent waiver form.

4. Plan ahead to allow enough time for people to review and edit the success stories.

Make sure that everyone who contributed to the book has an opportunity for input. You want contributors to feel good about the final product.



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Template

Title

Whenever possible, use your program's name in the title, as we did with WISEWOMAN. Your title should depict the main theme of your story. You can also use a subtitle to provide additional details about the program or the women your program is geared to reach.

Statement of Need

Begin each story with a statement of need explaining what public health problem or need your efforts are addressing. Keep it brief but compelling.

Program Details

Provide details about the process—how the project went about achieving success, who was involved, how long it took, funding sources, and costs, when applicable. Here, you can also indicate the level of change (individual, interpersonal, community, or organizational)—and the type of strategy (for example, developing culturally appropriate materials or forming partnerships).

Footer

You can use a footer to identify your success stories by number and to give the name of the state or agency leading the project.

Importance of Success

In this section, summarize the main outcomes—the results of your efforts, the public health impact, new partnerships that have been formed, or new processes instituted. Here, you can also mention future directions for your program and how your accomplishment might strengthen public health activities in the future.

South Dakota Women Learn About Diabetes, Thanks to WISEWOMAN's All Women Count! Collaboration

Diabetes Education Reaches Women Where They Live

Diabetes is a major health problem in South Dakota, where more than 6% of people have diabetes and many do not know it. In addition, many women live in rural or frontier areas, where access to quality diabetes education is limited. These critical needs prompted South Dakota to add diabetes screening and education to the cardiovascular risk factor screening and education already provided by the WISEWOMAN program, known as All Women Count! Nearly 750

education program. Diabetes education providers must attend training in diabetes management and counseling skills at a Department of Health sponsored 2-day training session or submit proof that they attended 16 hours of study in diabetes management, behavioral interventions, teaching skills, and learning skills. Yearly continuing education for providers is also required. The facility must then use the "Life with Diabetes" curriculum and standardized education forms to document continuing education.

providers at 259 facilities participate in the program. The goal is to diagnose diabetes early on and prevent devastating complications, particularly among women who have limited incomes or live in rural or frontier areas.

South Dakota relies on partnerships to provide high-quality care to women in remote areas.



The woman is at the center of a wheel. The clinic is the wheel's hub, and the spokes are supportive partners.

During the pilot phase, All Women Count! participants who had diabetes diagnoses or problems controlling their blood sugar were offered diabetes education at the 21 sites recognized by the South Dakota Department of Health or the American Diabetes Association as providing high-quality education. When the pilot phase was initiated, All Women Count! staff knew that these 21 sites could not possibly provide geographic access to all of the many women participating in the WISEWOMAN program.

All Women Count! staff wanted to eliminate this problem and other barriers that were preventing women from accessing diabetes health professionals. After speaking with health care providers, diabetes educators, and other clinic staff at pilot locations, they found some women were resistant to receiving education at a facility other than their normal clinic. Since most existing diabetes education programs are based in hospitals, the change in environment was enough to prevent some women from attending diabetes classes.

All Women Count! staff agreed they needed to offer uninsured women high-quality diabetes education in their own communities. So they collaborated with the state's Diabetes Prevention and Control Program (DPCCP) to develop the All Women Count! diabetes education program. This program offers any of the 259 All Women Count! facilities the opportunity to be reimbursed for high-quality diabetes education to get expert training and to receive continuing education. Once a facility meets All Women Count! diabetes education program requirements, it can deliver diabetes education to women with newly diagnosed diabetes or a history of diabetes with problems controlling blood sugar. The facility can then be reimbursed by All Women Count! To be part of this program, facilities must have nurse/dietitian teams and complete a brief application detailing their existing diabetes

In fall 2002, All Women Count! and the DPCCP held a training session in Pierre, and 120 professionals attended. This was the first time the DPCCP marketed its training to All Women Count! providers. The goal is access to high-quality diabetes education to women screened at all 259 All Women Count! sites.

Importance of Success

The expanded partnership between All Women Count! and the state DPCCP provides underserved women with greater access to diabetes screening and high-quality diabetes education. The partnership also allows women with pre-diabetes to be identified and referred to nutrition and physical activity programs. In addition, women with problems controlling their blood sugar can get help managing this condition. Women also benefit through better access to medication. Most importantly, at-risk women in rural and frontier areas now have greater access to care.

To date, All Women Count! has screened 776 women and identified 30 women as needing diabetes education. By the end of 2003, All Women Count! expects to screen 1,500 women and provide comprehensive diabetes education for women who previously did not have access to this care.

Lessons Learned

- Collaborate to expand your resources.
- Recognize that clinic staff members at existing facilities know their patients best. A satellite location might not be appropriate.
- Develop firm partnerships with your diabetes program, health department, and WISEWOMAN program. Add peer-review organizations as the quality improvement arm if your program focuses on older women and you are seeking Medicare reimbursement.
- Increase people's awareness of the need for and value of comprehensive diabetes education.

Success Story 1, South Dakota • 11

Lessons Learned

Identify key elements that made this accomplishment happen. Also suggest ways for using this idea in the future. You could offer advice for others who want to use these ideas in their own settings, or say what you would do differently the next time if you had it to do all over again. The lessons learned are intended to report what worked and what didn't work in order to help others replicate your success.



WISEWOMAN

Form Used To Collect Information for This Book

CDC/WISEWOMAN Success Stories

An Information Collection Tool Designed To Capture Success Stories In WISEWOMAN Projects That Have Experienced Successes on Various Levels: June 2002

The North Carolina Initiative, Start With Your Heart, and the Physical Activity & Nutrition Unit have generously allowed CDC's WISEWOMAN Program to expand their format to assist us in assembling success stories for possible use by CDC's WISEWOMAN Program.

Background/Purpose: The WISEWOMAN Program Staff have begun a process of writing WISEWOMAN Success Stories based on successful planning, development, and implementation of the WISEWOMAN Program. One audience we are specifically writing for is the Consultants Group meeting in August.

This tool allows you to give us information in a uniform way so that success stories can be written and shared. Success stories can focus on outreach, behavior change, screening, culturally appropriate material development, innovative educational methods, access, partnerships or related topics.*

After submitting this form, an article describing your success will then be compiled by our staff. The final success story will be one page or less. Contributors will be able to proofread the final draft of the success story, before it is printed. Final success stories will be published as *WISEWOMAN Success Stories*. **Please submit your Success Story to the e-mail or fax listed below.** If you have questions in filling out the following table, please contact Sonya Lewis, whose contact information is at the end of this document. **Thanks for taking the time to share your success with others!**

Description of category	Please type your responses in this column ↓
Proposed Headline: Good headlines are short, direct, and sum up the benefits of your project for the reader (Example: WISEWOMAN Program Promotes Healthy Eating for Women and Families).	
Contact Name (Name, Title):	
Organization/Employer:	
Contact Information: Address: City, State, Zip: Phone: Fax: E-mail:	

* Use this designation if you are describing cultural adaptation of materials, empowerment, social justice, or other strategies used to reach women.

Description of category	Please type your responses in this column ↓
Focus or Theme:*	
Point of View:**	
Audience(s) for the Success Story: Please identify the target audience(s) that the success stories are written for. This is also referred to as the intended audience.	____ Women in the community ____ Other WISEWOMAN or related programs ____ National, state, or local decision makers ____ Partners/collaborators ____ Scientific community ____ Healthcare providers ____ Practitioners ____ Other: _____
Type of Success: Successes can be grouped into one of the following levels: <ul style="list-style-type: none"> ■ Organization Level (OL)—new or enhanced organization supports in the form of training, protocols, and guidelines; informal practices; incentives by organizations that support healthy behaviors. Examples: Overcoming barriers to getting an intervention implemented; Using creative strategies to access medications. ■ Community Level (CL)—new or enhanced community support services in the form of training, protocols, and guidelines; informal practices; incentives by communities that support healthy behaviors; new or enhanced support services for Physical Activity, Healthy Eating, Smoking Cessation, and/or Diabetes. Examples: Obtaining funding and partnering with different CBOs to create a health plan that covers medical referrals for WISEWOMAN participants having abnormal values; Partnering with the YWCA to provide participants with discounted or free passes and/or transportation. ■ Individual Level (IL)—Programmatic efforts directed toward the participant to give her opportunities to increase her knowledge, attitudes or skills and improve her health or quality of life; Testimonials from women impacted by the WISEWOMAN project. Example: Identifying a woman with an alert value and having her referred (saving her life!). ■ Interpersonal Level (IPL)—Testimonials by persons of influence; Programmatic strategies such as social supports (group process), family or peer supports incorporated in activities or interventions. Examples: A project champion starting a buddy walking program; How a project designed an intervention to address social support. 	The success story I am submitting is an example of (check ✓ one): <input type="checkbox"/> OL <input type="checkbox"/> CL <input type="checkbox"/> IL <input type="checkbox"/> IPL <input type="checkbox"/> Strategy* Not sure which type of success your story relates to? Contact us before proceeding.
Location of Success: Please identify the Setting (e.g., community, health care setting, worksite, etc.), Agency, Town, and County where activity took place.	Setting: Agency: Town: County(ies):

** The point of view for each success story can range from that of the participant, her family members, friends, or other persons of influence to that of the project partners or WISEWOMAN project staff/director.

Description of category	Please type your responses in this column ↓
<p>Process of Creating Success: Please write 1 or 2 paragraphs describing (if available):</p> <ul style="list-style-type: none"> ■ The need (various levels) or opportunity; ■ How you went about your project or activity; ■ Who was involved; ■ The length of the process; ■ Estimated costs and funding source(s); ■ Partners involved; ■ The background, situation, process in resolution of the situation, problem, barrier, or issue to make a successful resolution; ■ The more details (in sequence of time) the better. 	
<p>Key Results/Importance of Success: Please write 1 or 2 paragraphs describing (as appropriate):</p> <ul style="list-style-type: none"> ■ What happened as a result of your activity; ■ What is the public health impact of the change; ■ What new partnerships have been formed or new processes instituted and how might that be helpful in the future. 	
<p>Quote from a Partner or Participant positively impacted by this project: (if applicable) This may be used in the final article. Please provide the person's full name and the organization/group they represent.</p>	
<p>Reach/Impact of Success: Who/how many people are benefiting or could potentially benefit from this project (e.g., residents of ___ County; number of employees, residents, etc.).</p>	
<p>Lessons Learned/ Practice Pearls/ Best Practices/ Success Factors: (Please try to limit to 3 "lessons") What...:</p> <ul style="list-style-type: none"> ■ key elements made this a success? ■ tips do you have for someone trying to use/adapt your idea in their community? ■ would you do differently next time? 	
<p>Date submitted to CDC:</p>	
<p>Photo(s) of Project: Please identify if you have any photos of your project that can be sent electronically?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>Release: Has the person(s) featured in the picture signed the release form?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No

By submitting this document, I grant permission to the Centers for Disease Control and Prevention/WISEWOMAN Program to possibly use this success story in written materials or presentations as long as credit is given to the source. I have read and agree with all of the information provided above.

If choosing to submit this document electronically via Microsoft Word and e-mail, please use your proposed abbreviated headline (State abbreviation) to name the file.

Please return this form, in any of the following formats, by deadline _____, to Sonya Lewis, ORISE Fellow/CDC/WISEWOMAN (Phone: 770/488-5384) to:

via **e-mail (preferred):**
SSL8@cdc.gov

via **fax:**
770-488-6027

via **mail:**
Centers for Disease Control and Prevention
4770 Buford Highway, NE, Mailstop K-26
Atlanta, GA 30341-3724

FOR STAFF USE ONLY

Received on:	
Method of transmittal (i.e., e-mail, fax, etc.):	
Checked in by:	
Routed to:	
Routed on:	
Draft of article completed by:	
Draft of article completed on:	
Contributor of Success Story contacted by:	
Contributor of Success Story contacted on:	
Additional follow-up needed:	
Final draft of WISEWOMAN Success Story completed by:	
Final draft of WISEWOMAN Success Story completed on:	
Final WISEWOMAN Success Story sent to author on:	



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Appendix B

Adapting Your Stories for Multiple Purposes

Reaching Different Audiences

We used the state WISEWOMAN project's submission, "Mary Ellen's Story: Right on Time for Her Health," to show how the same story can be revised to reach a different audience. The story featured on page 27 highlights Mary Ellen as a program leader. It is geared for women and is written in plain language. Its purpose is to help women eligible for WISEWOMAN identify with a participant who took advantage of WISEWOMAN and became a project leader.

Using the same information, we created another version, featured on page 49, that highlights the benefits of the program for staff. The target audience includes health care providers or staff members.

The chart below shows how these two versions differ.

Differences Between the Two Versions	
Mary Ellen's Story: Right on Time for Her Health (page 27)	Mary Ellen's Story: How WISEWOMAN Made a Difference (page 49)
Intended audience: Women participating in the WISEWOMAN project.	Intended audience: Health professionals.
Center graphic: Photo of Mary Ellen.	Center graphic: Quotation from Mary Ellen.
Content and language: Less text is used; benefits are highlighted. This story is written at the 8th grade reading level.	Content and language: Background information about the project is given; technical language is used. This story is written at the 12th grade reading level.
Lessons learned: The focus is on why women like Mary Ellen should participate in WISEWOMAN.	Lessons learned: The focus is on key elements of a successful project.
Uses: Recruitment and outreach; incentive for women to join and participate in WISEWOMAN.	Uses: Development of new programs; staff training; sharing of lessons learned.

Mary Ellen's Story: How WISEWOMAN Made a Difference

Alaska Woman Works Out Often, Eats Healthier Foods, Tackles Stress

Before Mary Ellen enrolled in the SouthEast Alaska Regional Health Consortium (SEARHC) WISEWOMAN program, she had begun the process of being healthy but did not cope well with stress. Mary Ellen enrolled in the SEARHC WISEWOMAN program soon after it began. Knowing about the WISEWOMAN program jump-started her to do something about her health.

When she came to WISEWOMAN, she learned about her cholesterol level and blood pressure. The WISEWOMAN staff used these assessments to determine Mary Ellen's health status. She met with Deneise, a patient health educator, who explained Mary Ellen's test results to her. Deneise then worked on a plan with Mary Ellen to improve her health in what Mary Ellen describes as a "sensitive, caring, enthusiastic, and positive manner." This approach empowered Mary Ellen and gave her the determination she needed to start taking gradual steps toward a healthy lifestyle.

"The WISEWOMAN program came at a time when I needed to actively focus on my overall health needs: physical exercise, nutrition, and facing stress head on and dealing with it," Mary Ellen said. "Initially, I met with Deneise.... We worked on a plan together. Her positiveness and encouragement were contagious. I went home determined to begin making changes in my life."

"Evelyn, the program's community wellness advocate, enthusiastically encouraged me to have more fitness in my life. I now work out 4 to 6 days a week. It has been exciting to see what increased physical activity does to my body. I'm learning to be honest with myself when stress happens; face it and get on to other parts of my life. I have also started to work on eating more veggies and fruit each day instead of just occasionally."

Mary Ellen is one of the many women in southeast Alaska who benefit from the SEARHC WISEWOMAN program. Women enrolled in the program have their blood pressure, cholesterol, and glucose levels checked and undergo other tests. Once the lab results are available, the women are referred to a patient health educator for health counseling.

This visit takes about an hour and a half. Women are then invited to attend health initiatives and "gatherings." Health initiatives address a health topic such as physical activity, help women build their skills, and might include group sports challenges. Gatherings focus on a single topic such as stress management. Each gathering fosters support as women attempt to maintain their newly adopted

healthy habits. Patient health educators and community wellness advocates co-lead health initiatives, whereas community wellness advocates alone organize the gatherings.

Importance of Success

Mary Ellen is a model participant. She seeks ways to improve her health and encourages others to do the same. She is an advocate for health and a champion for the WISEWOMAN program. She has

suggested topics for some of the gatherings, and several of her ideas have been used to make an already good program even better.

Skill building and social support activities have allowed Mary Ellen to approach health in a holistic way: she works out regularly each week, is starting to have healthier eating habits, and is learning to honestly face the events and situations that cause stress in her life. Mary Ellen is one example of how WISEWOMAN can improve the health of women.

Lessons Learned

- Consider how knowing about and having access to WISEWOMAN can prompt a woman to take action and be a starting place for her to turn her intentions into action.
- Realize that positive and encouraging staff, made up of women from the same population as the target audience, can empower women to take steps to improve their health.
- By teaching women how to build their skills and setting goals with them, you can help them make informed, healthy decisions.

The WISEWOMAN program came at a time when I needed to actively focus on my overall health needs: physical exercise, nutrition and facing stress head on and dealing with it."

**- Mary Ellen,
WISEWOMAN participant**



WISEWOMAN

Conveying Different Messages or Themes

Using the state WISEWOMAN project's submission, "Massachusetts Women Help Each Other Follow a Healthy Path by Joining Social Support Group," we highlighted a different theme in two versions of the same story. The story featured on page 31 highlights the components of the support group that made this project a success. It is geared to reach health professionals. Using the same information, we created another version, featured on the next page. This second version also is written for health professionals but it highlights the benefits of project champions and their effects on peer-led social support groups.

The chart below shows how these two versions differ.

Differences Between the Two Versions	
Massachusetts Women Help Each Other Follow a Healthy Path by Joining Social Support Group (page 31)	Championing a Women's Health Support Group: WISEWOMAN Provides Social Support for Women Making Health Changes (page 51)
Intended audience: Health professionals.	Intended audience: Health professionals.
Focus: Both Verna DeAngelis and Heather Ursini are mentioned.	Focus: Verna DeAngelis is highlighted as the project leader. Heather Ursini's title is given, but her name is not mentioned.
Themes: Social support and leadership are mentioned.	Themes: Modeling, encouragement, peer-led groups, and social support are emphasized. This story also mentions increases in attendance and notes that participants invited friends to attend.
Lessons learned: The focus is on key elements of success for a social support group.	Lessons learned: The focus is on what to look for in a potential project leader and how leadership and peer-led groups can benefit the project.

Championing a Women’s Health Support Group: WISEWOMAN Provides Social Support for Women Making Health Changes

In Ware, Massachusetts, women needing diet and physical activity education and support had limited access to affordable resources. Like many other women, their doctor or nurse had limited time to answer health-related questions. A Women’s Health Support Group was established in October 2001 to address these concerns. In Ware, WISEWOMAN services are provided through the Women’s Health Network. Through the support group, Women’s Health Network staff could assist clients with elevated blood sugar, blood pressure, and blood lipid levels. Group meetings were led by a nurse at first, but a member of the group has emerged and now leads group meetings.

A core group of Women’s Health Network participants began requesting information about exercise, reading food labels, weight management, and other health issues. To honor this request, the nurse who had been leading the group meetings arranged for a registered dietitian to speak for 10 weeks at the Monday night meetings. Women became more interested and participated more in meetings once their nutrition questions were answered.

After the support group format was tailored to reflect group needs and interests, group members began to share their stories with each other. They also started inviting friends to become members of the group. Each member witnessed physical, emotional, and spiritual changes in themselves and other group members. In addition, women learned how to prepare healthy foods that taste great through taste testings and recipe swaps. Hands-on activities and sharing with others increased each woman’s belief that she is empowered and can make lifestyle changes.

At the support group meetings, WISEWOMAN participant Verna DeAngelis began describing the lifestyle changes she had made. Verna had lost 60 pounds and significantly lowered her blood cholesterol, triglyceride, and blood glucose levels. Over time, she shared more, began facilitating the sessions, and eventually emerged as a leader. Verna now leads the support group meetings.

In Verna’s Words

“I was motivated because of my high blood levels. My mother passed away because she was overweight and had high

cholesterol as well as high glucose. I knew I needed to make some changes in my life or I would follow in her footsteps of poor health. The Women’s Health Network identified my health problems and I began to make changes to better myself. I also believe God was instrumental in my achieving success. I often prayed for strength to make the changes necessary to maintain good health and be a benefit to my community, my family, and friends. I’ve never felt stronger and more energetic!”

About the Support Group

The Women’s Health Network provides comprehensive health services to women, including those in the Women’s Health Support Group and WISEWOMAN project. Women’s Health Network participants with elevated cholesterol, blood pressure, or blood glucose levels or those who are overweight are referred to the Women’s Health Support Group for social support and educational materials. In addition, women in the community are often invited by participants to attend these sessions. Regular Support Group attendance has increased from 6–8 participants initially to 12 participants each week.

“I knew I needed to make some changes in my life or I would follow in the footsteps of my mother’s poor health. The WISEWOMAN program at the Women’s Health Network identified my health problems and I began to make changes to better myself.”

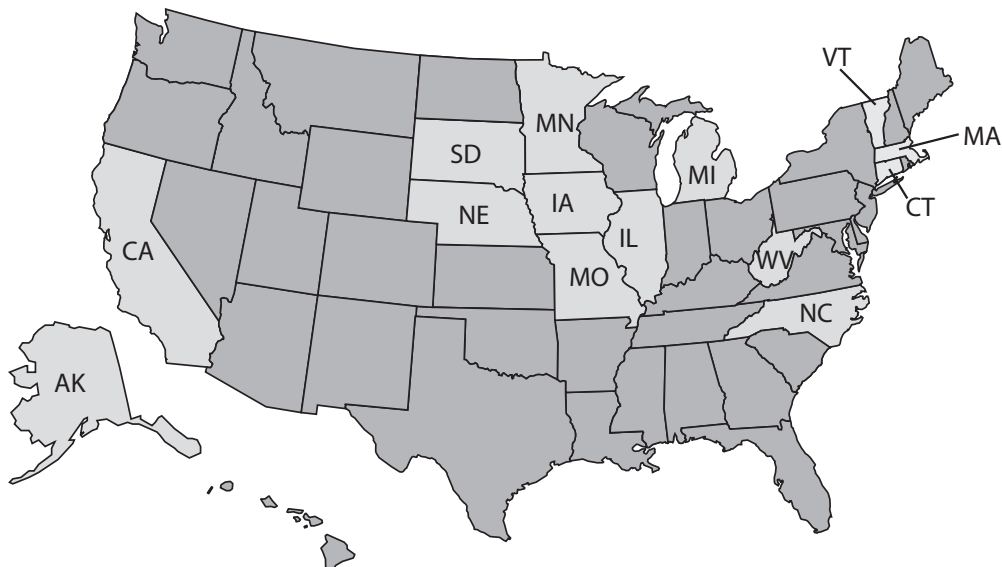
— Verna DeAngelis,
WISEWOMAN participant and
Women’s Health Support Group champion

Importance of Change

As a WISEWOMAN participant and Women’s Health Support Group champion, Verna invites friends and co-workers to meetings. But she doesn’t stop there. Verna recently invited a co-worker to attend the meetings and is now mentoring her as she works to lower her weight. This peer-led support group has the potential to foster social support for women enrolled in the Women’s Health Network.

Lessons Learned

- Group member commitment to sharing and helping each other is key to success.
- Hands-on activities such as taste testings and recipe swaps build healthy cooking skills. When women have the chance to observe changes in themselves and other women, their motivation to make healthy changes increases.
- When participants started taking ownership of the meetings, social support and self-efficacy increased.



Appendix C

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Revised August 2006

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WISEWOMAN

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*Note: This state was not a participant in WISEWOMAN in 2002 and therefore does not have a success story in this publication. See more recent publications of WISEWOMAN Works or our Web site (<http://www.cdc.gov/wisewoman>) to find out more about each state's contributions.

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