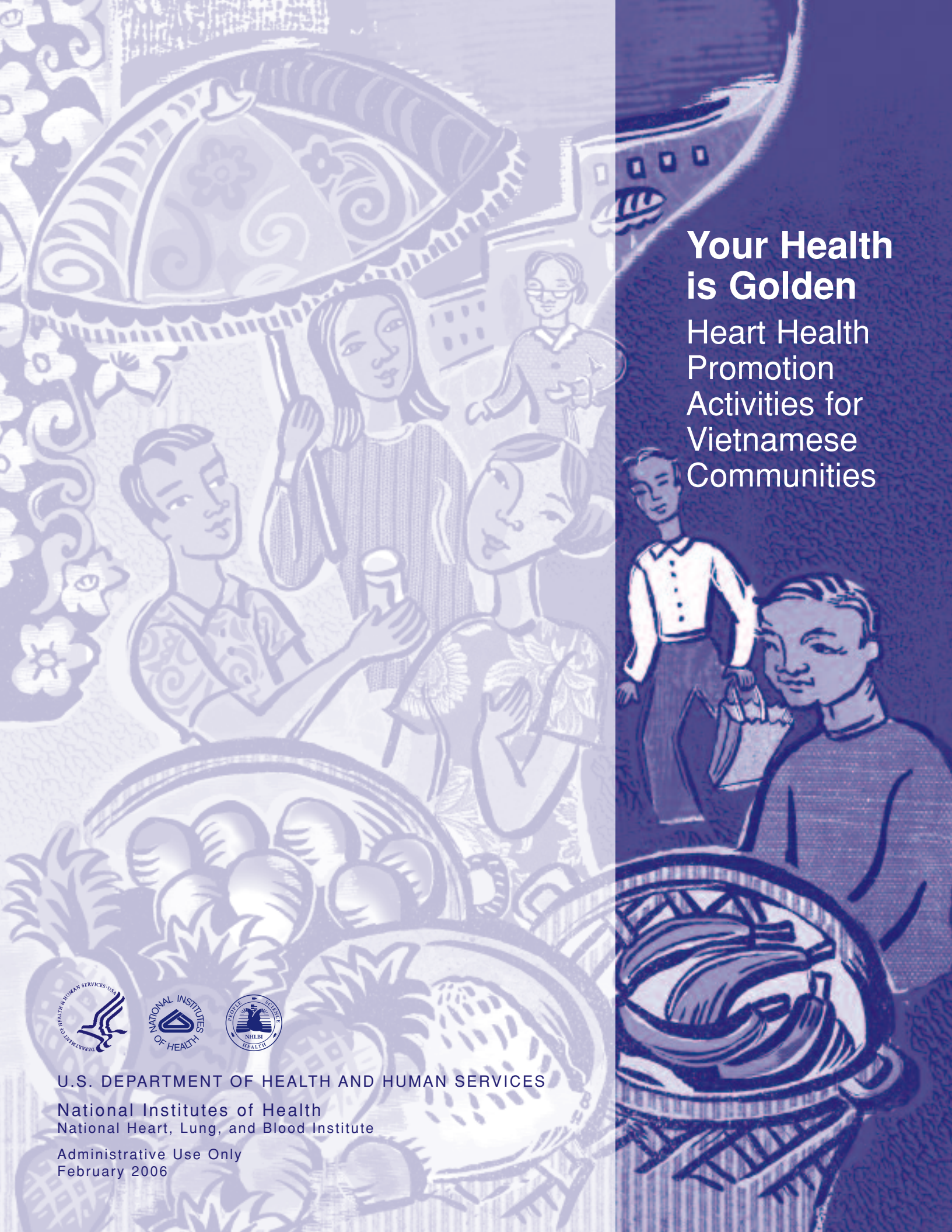


Your Health is Golden

Heart Health Promotion Activities for Vietnamese Communities





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Communities



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health
National Heart, Lung, and Blood Institute

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Introduction

This activity guide is designed for you—community health educators—to organize discussion-based activities for adults and seniors in your community. These activities aim to increase the participants’ awareness of heart disease through a strategic public health model. Community members will review scenarios about heart disease risk and share personal experiences about living in a heart healthy way. Health educators can conduct these activities in clinics, community centers, schools, senior centers, parks, and even in someone’s home. The key is to educate in fun, engaging ways. By the end of the discussions, the participants will have acquired the knowledge, self-confidence, and motivation to begin leading heart healthy lives.

The low-cost ideas in this guide come from the Vietnamese community and offer practices to address a critical public health problem. You may use this guide alone or to augment an existing program in your community. The discussions are arranged by risk factors for heart disease, but you may skip to any section you like.

We dedicate this guide to all those who are committed to making a difference in Vietnamese communities and who realize that change—both personal and environmental—is possible. When you use this guide, you do a rewarding and important service to your community.

We hope that you will come back to *Your Health is Golden* many times. It contains endless possibilities!

We want to hear from you! Please tell us what worked and what did not work for you. Write to:

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The National, Heart, Lung, and Blood Institute appreciatively acknowledges Julie Tu for her energy in developing *Your Health is Golden! Heart Health Promotion Activities for Vietnamese Communities* and her dedication to helping the Asian and Pacific Islander communities live healthier lives.

Section 1: Getting Started

We are happy that you want to take action to bring heart health information to your community and make a difference. As a first step, get your community thinking and talking about heart health. Gathering background information on the health needs of the Vietnamese community is essential before you hold your activities. This is an excellent way to become familiar with some of the health issues and concerns of the community in which you live and/or work. Use the Vietnamese community profile on pages 21–22 as a start.

Each discussion topic should last up to an hour. There are a total of eight discussion topics. They can be done all at once or individually. You may want to offer participants blood pressure and blood cholesterol screenings, nutrition classes, food demonstrations, information on community and support groups, and referrals. For the session on smoking, you may consider the help of a certified instructor. Ask the local chapter of your American Lung Association, American Heart Association, the YMCA (Young Men’s Christian Association) and YWCA (Young Women’s Christian Association), Registered Dietitians, or county extension programs about training classes or trained instructors. Additional activities take place after the discussions are concluded.

Located in the appendix are handouts, hands-on activity ideas, evaluations, and additional information you might find helpful. For a planning checklist, see the box on the right.

What Do You Need? An Activity Planner’s Checklist

- Read this entire guide before organizing your activity.
- Find a leader and send this guide and a letter confirming the date, time, and location to him or her 4 weeks before your activity.
- Reserve the location for your activity.
- (Optional) Arrange additional activities.
- Develop a list of local agencies that conduct smoking cessation classes or offer support groups for participants who want to quit smoking. The American Lung Association, a local hospital, or regional health maintenance organization (HMO) are just some examples.
- Develop a referral list of doctors, Registered Dietitians (RDs), and health educators in the community who work with local clinics.
- Distribute flyers to promote your community activity.
- Recruit participants.
- Make copies of handouts.

Finding a Leader

As the **activity planner**, you may want to do the discussion yourself. Or you may choose to make arrangements (finding a site, arranging screenings, and organizing marketing activities) and find a **leader(s)** to carry out the discussion. A good leader has enthusiasm, patience, understanding, and compassion—someone who works comfortably with the public. Try and find a leader two months before your activity date. Your leader should have prior experience or knowledge in working with Vietnamese people on an individual and on a group level and be fluent in the language in which the program will be conducted. See the box below for tips for selecting a leader.

Tips for Selecting a Leader

Find someone who:

- Works well with the public.
- Has an understanding and respect for Vietnamese culture, values, and people.
- Is fully committed to improving the heart health of Vietnamese.
- Is willing to be trained.
- May share demographic characteristics and common language with the participants.

Where to Find a Leader

To find a leader, you may contact a local medical society, community resource center, community-based organization, hospital community outreach program, local health department, local nursing organization, local clinic, or nonprofit agency like the American Heart Association or the American Red Cross. You can also speak with administrators and key persons at your organization for suggestions or referrals. Explain how your discussion

activities will benefit your community by raising awareness of heart disease and promoting heart healthy lifestyles. If you plan to offer blood pressure and/or blood cholesterol screenings, contact a local health care provider, hospital, health department, or nonprofit agency. Request two to four volunteers (depending on the number of participants that you expect) to conduct the screenings and supply necessary kits and equipment.

Talking to Potential Leaders

Let volunteers know that they are not expected to be experts on heart disease. Tell them that you will send them *Your Health is Golden! Heart Health Promotion Activities for Vietnamese Communities* to help them prepare for the presentation and group discussion.

You may want to say:

“This is a 1-hour activity [or more, depending on how many discussion topics you want to cover] developed by the National Heart, Lung, and Blood Institute, of the National Institutes of Health, and [insert the name of your organization]. It is user-friendly and easy to adapt for different Vietnamese communities. The discussions will help Vietnamese people learn about the risk factors for heart disease, so that they can make heart healthy choices in their lives. In addition, there may be blood cholesterol and blood pressure screenings, referrals, nutrition counseling, and food demonstrations. Please review the guide. It provides useful background information about heart disease and detailed information and materials that you can use for the discussions. Thank you for your time and service to the Vietnamese community.”

Finding a Location

Decide where you want to hold your discussion activities and contact the site's manager to reserve the facility six to eight weeks in advance of your event. Request a blackboard or dry erase board, flip chart, table, overhead projector and screen or computer laptop and LCD monitor (if available), and chairs for the participants. If you expect a large group, ask for a microphone. You will need to reserve the room for enough time to accommodate your entire presentation and discussion. Ask for extra tables and chairs if you plan to offer screenings or food demonstrations. You may need to schedule more time if you provide these extra activities. Request that a staff member from the facility attend the program to troubleshoot audio-visual equipment and to make sure that all the items you requested are available. See the box to the right for ideas on possible locations.

Marketing

One of the best ways to find participants for your activity is to advertise the event. Once you have your leader and location confirmed, you should prepare to advertise your event(s).

- Distribute copies of the promotional flyer (page 23). Pass them out at community events; post them in clinics, hospitals, WIC (Women, Infants, and Children) centers, libraries, grocery stores, restaurants, cooperative extension service centers, social service agencies, health departments, recreation centers, community centers, schools, churches, and temples; and take them door-to-door.
- Tell your friends and neighbors. Word-of-mouth is a good way to promote your community activity.

Ideas for Locations

- Recreation center
- Senior center
- Community center
- An individual's home
- Temples
- Churches
- Health departments or clinics
- Youth center
- Library
- Worksites
- School cafeteria, gymnasium, or auditorium
- A common area where Vietnamese gather

Note: Make sure your location and the arrangement of the room are conducive to open discussion. Make your participants feel comfortable so that they can freely exchange their ideas with one another.

Making Photocopies of the Handouts

At a local print shop, prepare enough copies of your handouts and evaluation form for all participants. Having photocopies ready during the discussions is best, so that your participants can go home with ready-to-use materials to reinforce information learned from the discussions.

Incentives

In the Vietnamese culture, nothing is more important than the love shown by family, friends, and a supportive community. Show your participants the same level of love and respect that Vietnamese people share with those they care about. You can provide nutritious snacks and light refreshments during your activity and/or give a small thank you gift for participation. Incentives are an effective way to recruit participants, maintain participation, reinforce positive behavior, and motivate others. Recognize each participant's achievements and reinforce the benefits for participation: living heart healthy, feeling better, having more energy, and having fun with others. Identify incentives and rewards during the planning phase, and build them into your budget. Some ideas for incentives are gift certificates, coupons, small trinkets, certificates, or T-shirts. Show your participants that you care for them and their community, and are committed to working with them to make personal lifestyle changes.

Agenda

- Introduction—5 minutes
- Activity (each)—30 minutes
- Review—10 minutes
- Evaluation—15 minutes
- Additional activities (optional)—1 to 2 hours as needed

Section 2: Conducting Your Activity

Overview

The discussions are located in the Appendix, pages 10–45. There are eight discussion topics altogether, plus introduction and concluding activities. Depending on your community's needs, you may choose to cover all of the discussion topics or only a select few. When you have completed all your discussions, do a quick review, and then have participants fill out an evaluation form.

Discussion

It is recommended that you spend 60 minutes on each discussion topic. Each discussion is organized into three parts: story, discussion, and skill. Some discussion topics have optional activities for you to do, if you have time. Follow the script as it is written. The story is accompanied by a series of illustrations. While you are reading the story aloud, show the illustrations to your participants for them to follow along. You may need to enlarge the illustrations if they are too small. The discussion offers time for your participants to react to what they heard in the story. Use the discussion questions to spark dialogue among group members. As your participants are talking, you may want to write down their comments on a board or flip chart. If you are asked a question you cannot answer, it's okay. You can use the frequently asked questions handout on pages 27–31, or give the correct answer at a following session. In the last part of the discussion, participants will learn a skill related to the particular topic, or risk factor. For example, the skill for the high blood pressure activity includes learning what blood pressure numbers mean and what a normal blood pressure level is.

Some activities will contain an optional activity that you can do if you have the time.

Learning Objectives

At the end of the discussions, each participant will be able to:

- State that heart disease can be prevented.
- Identify the six heart disease risk factors that people can do something about.
- Identify at least three changes that people can make to lower their risk of heart disease.
- Recognize the importance of having regular blood pressure and blood cholesterol testing as part of a healthy lifestyle.

At the end of the discussions, each participant will learn that:

- A blood pressure of less than 120/80 (“120 over 80”) mmHg is normal.
- A total blood cholesterol level of less than 200 mg/dL is best.
- An LDL cholesterol level of less than 100 mg/dL is best for people at **high risk** for heart disease. An LDL cholesterol level of less than 70 mg/dL is best for people at **very high risk** for heart disease.
- People can quit smoking with support from their family, friends, and community.
- Adults should have at least 30 minutes of moderate physical activity on most, preferably all, days of the week.
- A body mass index (BMI) of 18.5 to 24.9 is a healthy BMI. A waist measurement of more than 88.9 cm (35 inches) for women and more than 101.6 cm (40 inches) for men is high. A high waist circumference increases your risk for heart disease.

- Foods moderate in calories and lower in salt and sodium, saturated and *trans* fat, and cholesterol are part of a heart healthy diet.
- The most important thing to do when experiencing heart attack signs is to promptly call 9-1-1.

Five Tips for Success

1. **Be sensitive to the needs of your audience.** During group learning and open exchange, try to be respectful of Vietnamese peoples’ behaviors and culture, particularly the importance of family dynamics.
2. **Set goals for heart health.** Learning to live heart healthy is easier if you have a goal to work towards. You can set group goals or let the participants set their own goals related to outcomes such as maintaining or reducing weight, lowering blood pressure, lowering blood cholesterol, being more physically active, choosing healthy foods, or quitting smoking.
3. **Let your participants be your guide.** The discussions don’t have to be too structured. Observe how your participants react to the activities, and let the rest flow naturally.
4. **Set an example.** If you display honest, open, and positive behavior for an engaging discussion, your participants will too.
5. **Practice makes perfect.** Be prepared. Practice each activity several times before you execute it in front of a group. Each activity lasts approximately 60 minutes, so plan your time accordingly.

Section 3: Evaluation

A short participant evaluation is a good way to assess how you are as a leader and how successful the activity was. Keep it short and simple. It can be written or spoken. You may use the healthy heart attitude assessment form (pretest) on pages 24–25 before you begin your discussions to determine how ready your participants are to commit to living heart healthy and begin to change their lifestyle behaviors. When you have completed your discussions, you may use the short evaluation form (posttest) on pages 37–39 to determine how well you did as a leader and if the activities were successful in increasing knowledge and affecting attitude and behavior changes.

If some participants choose not to complete the evaluation form, you may ask them a few questions while they are waiting to participate in an additional activity or as they are leaving the room. Thank the participants for attending, and give them a thank you gift, if applicable.

Section 4: Additional Activities

You can personalize your discussions with additional activities based on the needs and interests of the group leader or the participants. Activities such as free screening services, food demonstrations, heart healthy cooking demonstration, smoking cessation class, or cardiopulmonary resuscitation (CPR) instruction are all good heart healthy activity ideas. Look to a local medical school, clinic, or hospital for people who can help you out with screening or CPR instruction. Ask for nutrition or exercise physiology students or instructors at culinary schools to volunteer for nutrition and physical activities.

If you are preparing additional activities for your participants, you may want to add additional questions to your evaluation form and then delay the evaluation until after all of your activities are completed.

Section 5: Staying in Touch with Your Community

After you have completed your discussions, you should maintain the momentum in the community by beginning to plan for future programs based on the information that you gathered. Read over the evaluation results and record feedback from volunteers. Their suggestions can only help to improve your program and make it even better. You can even ask motivated and enthusiastic participants of your group to become leaders for discussion-based activities in their own communities. Also, spread the word about heart healthy activities in other Vietnamese communities in your area. Talk to other people involved with heart health community-based interventions to see what they have done. Over time, you can add new information to your discussions and more activities and discussion topics to your program.

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A. Discussion

Introduction

Do: Introduce yourself to the group. You may follow with an opening poem or traditional song and dance.

Say: Welcome to *Your Health is Golden* activity group, made possible by the National Heart, Lung, and Blood Institute and [name of your organization]. My name is _____, and I will be the leader for today's program. Before we begin, I would like to take a moment to introduce the people who are helping me today. [Introduce your team.] We will be spending the next hour [or more, depending on how many discussion topics you want to cover] talking about a very serious problem that can affect all Vietnamese people—heart disease. In the company of friends you will learn important facts about heart disease and how we can take care of our hearts. This is a friendly, supportive, and caring environment where we can learn and exchange ideas on heart health.

Do: Have the participants introduce themselves. Ask them if they would like to add a personal story about themselves or someone they know with heart disease.

Icebreaker Activity

If you feel that the participants are a little shy, start your activity with an icebreaker (a fun group game) to make the participants feel more comfortable. Icebreakers are designed to get people talking, thinking, and learning in a casual, fun, and non-threatening way. Icebreaker activities usually last 10–15 minutes. This icebreaker activity is called Close to My Heart, Part I. Each participant will receive a heart made from red construction paper (see page 20 for the template). On the heart-shaped card, each participant will write down his/her personal goal for heart health. Then each participant will read his or her goal aloud, identifying himself

or herself and explaining his or her personal goal. If you would like to do the followup activity to this icebreaker at the end of your program (see the closing on page 19), ask each participant to hold onto their card until the end.

Topic 1: The Heart, Heart Disease, and Its Risk Factors

Say: This is an interactive program that allows us to talk about matters of the heart. Let's take a look at how the heart works. The heart is a muscular organ the size of your fist. The heart functions like a water pump. The heart pumps 5 liters of blood per minute to all parts of your body and beats about 100,000 times a day, but the heart is more than a pumping machine. It is what gives you life—the power to breathe, to be active, and to love others. If you don't take care of your heart, you will become sick.

Say: Heart disease is one way you can become sick.

Ask: What do you know about heart disease?

Say: Heart disease is caused by risk factors. A risk factor is a trait or habit that makes a person more likely to develop heart disease. The more risk factors a person has, the greater the person's chance for developing heart disease. There are two types of risk factors for heart disease—ones you can change and ones you can't change. The ones that you cannot change are age, gender, and heredity (what runs in your family). For today's activities, I want to concentrate on the risk factors that you can change. They are high blood pressure, high blood cholesterol, smoking, physical inactivity, overweight and obesity, and diabetes. We will learn more about risk factors you can change by listening to stories about the Le family.



Father: Anh Dung Le
Daughter: Kieu Thi Le

Son: Thanh Le
Grandfather: Dac Kien Le

Grandmother: Binh Thi Le
Mother: Hanh Phuc Le

Topic 2: High Blood Pressure

Say: High blood pressure is known as the silent killer because it has no signs or symptoms. High blood pressure occurs when the pressure of blood in the blood vessels stays high over a period of time making the heart work harder. Listen to the following story about high blood pressure, and follow along with the pictures.

Story: Anh Dung Le loves Vietnamese food. He enjoys herbs with pho and the meat and/or vegetable dishes, but he cannot eat a meal without nuoc mam, a tasty fish sauce that is a staple of Vietnamese dishes. At his last doctor's appointment, his blood pressure was high—143 over 96. This made him very worried. One of the first things his doctor recommended was to cut down on salt and sodium, primarily the nuoc mam.



Discussion:

Ask:

- Do you think it would be easy for Anh Dung Le to cut down on salt and sodium in his diet?
- How would you advise him to cut down on salt and sodium in his diet?
- Can you think of other ways (i.e., health behaviors) to lower high blood pressure other than changing a person's diet?

Skill: Know Your Numbers! You should get your blood pressure checked at least every two years—or more often if you have high blood pressure or prehypertension. When you get your blood pressure checked, the health care professional who takes your blood pressure will give you a reading in the form of numbers. That person may say, “Your blood pressure is 120 over 80.” Blood pressure is always given as two numbers, systolic and diastolic. The first number (120), systolic, is the pressure of the blood when the heart is beating. The second number (80), diastolic, is the pressure of the blood when the heart is at rest. Blood pressure is measured in millimeters of mercury (mmHg).

If your blood pressure is less than 120 over 80, that is normal. Good for you! You can keep it that way by maintaining a healthy weight, eating foods with less salt and sodium, eating potassium-rich fruits and vegetables, and being physically active.

If your blood pressure number is 120 over 80 to 139 over 89, then you have prehypertension. Your blood pressure could be a problem. Act now to change what you eat, be more physically active, and lose extra weight, if you are overweight. If your blood pressure number is 140 over 90 or more, you have high blood pressure. Talk to a doctor to learn how you can lower your blood pressure.

Say: During this activity, we have learned that if you are losing weight, if you are overweight or obese, or maintaining a healthy weight, we can take other actions to help prevent or lower high blood pressure. You can help prevent or lower high blood pressure by eating foods that are low in saturated fat, total fat and cholesterol, eating lots of fruits and vegetables, and choosing low-fat or fat-free milk and milk-products while staying within calorie needs. It's important to go easy on the alcohol. Drinking too much alcohol can increase your risk for high blood pressure. If you drink alcoholic beverages, drink only a moderate amount. This means only one drink a day for women and two drinks a day for men. If you smoke, try to quit smoking today. Smoking injures blood vessel walls and speeds up the process of hardening the arteries. It can increase your chance of having a stroke, heart disease, peripheral arterial disease, and several types of cancer. Because diabetics are at high risk for heart disease or stroke, they should work with their health care professional to control both high blood pressure and high blood sugar.

Topic 3: High Blood Cholesterol

Say: Cholesterol in your arteries is like rust in a pipe. Too much cholesterol in the blood clogs the arteries, which can lead to heart disease. Listen to the following story about high blood cholesterol, and follow along with the pictures.

Story: Binh Thi Le helps her daughter-in-law in the kitchen to prepare dinner every day. When she cooks, she uses animal fat. She doesn't remove skin from chicken or duck and she doesn't skim the fat off cold, refrigerated broth before reheating for the next meal. These cooking habits can raise blood cholesterol.

Discussion:

Ask:

- What can Binh Thi Le do to make her cooking more heart healthy and lower in saturated fat for her family?
- What kinds of cooking habits to lower saturated fat are you currently practicing or would consider practicing in your kitchen?

Skill: Know Your Numbers! Blood cholesterol levels are measured in milligrams (mg) of cholesterol per deciliter (dL) of blood. Try to keep your total blood cholesterol level less than 200 mg/dL. That is best. Stay active and eat foods low in saturated fat, *trans* fat, and cholesterol. It is also important to keep your LDL cholesterol level at an optimal level to prevent heart disease. Try to keep your LDL cholesterol level below 100 mg/dL, if you are at high risk for heart disease. If you are at very high risk for heart disease, try to keep your LDL cholesterol level below 70 mg/dL. Talk to your doctor to learn about your heart disease risk, ways you can lower your total blood cholesterol, and help set your goal for lowering your LDL cholesterol level. (For more information on LDL cholesterol and to learn about HDL cholesterol, please see pages 28–29.)



Optional Activity: Nutrition display activity

Prepare the nutrition display (as described on page 34) and present it to your group. Participants will learn how much saturated and *trans* fat they can cut out of their diet by eating a lower fat alternative to a popular Vietnamese dish.

Topic 4: Smoking

Say: In the Vietnamese culture, in homeland, people smoked to display strength or power within the community. The reality is that smokers put their own health and their family's health at risk by hurting their lungs and hearts. In the United States, more than 400,000 people die each year from smoking-related diseases. More than 2,000 people die each day. Smoking can also raise blood pressure and increase one's chance of a heart attack. Listen to the following story about smoking, and follow along with the pictures.

Story: Thanh Le is a junior in high school. He has many friends; most of them are Vietnamese. When they are together, they have a good time talking, laughing, and having fun. Thanh Le feels a lot of pressure to smoke with his friends. Thanh Le has tried smoking. He doesn't like it, but he wants to smoke to fit in with his friends. He wants to look cool. He fears that if he doesn't become a regular smoker, he won't have any friends at all.



Discussion:

Ask:

- What would you ask Thanh Le do to in this situation?
- Do you know someone like Thanh Le?
- Does this kind of peer pressure exist quite often in your community? Does peer pressure exist for everyone in the community, not just the younger generation?
- Do you know of anyone who smokes to relieve stress? What stress-relieving activities can you think of to replace smoking?
- What kind of support exists in your community for quitting smoking (e.g., family, friends, health care professionals, classes)?

Skill: If you smoke, there are things you can do to quit smoking. Try:

- Setting a goal for yourself. Say, "I will quit smoking today," or "I will quit smoking on my birthday."
- Talking to someone who has quit smoking.
- Keeping yourself and your hands busy by finding an activity you enjoy doing, like riding a bike or cooking a healthy meal for yourself or your family.
- Getting support and encouragement. Join a quit smoking program, ask your doctor for advice, or find a friend to quit with you.



Topic 5: Physical Inactivity

Say: Being physically inactive can double your chances of heart disease and can take years away from your life. It can increase your risk of high blood pressure, high blood cholesterol, and diabetes, and it may lead to overweight or obesity. Listen to the following story about physical inactivity, and follow along with the pictures.

Story: Binh Thi Le is the matriarch of the Le family and watches over everyone. She is concerned that her son and daughter-in-law are too tired and stressed after work to engage in physical activity. She thinks her grandchildren spend too much time on the computer or in front of the TV. She is worried that their mostly sedentary lives are bad for their health. She wants to start a daily ritual where the entire family walks together for at least 30 minutes after dinner.

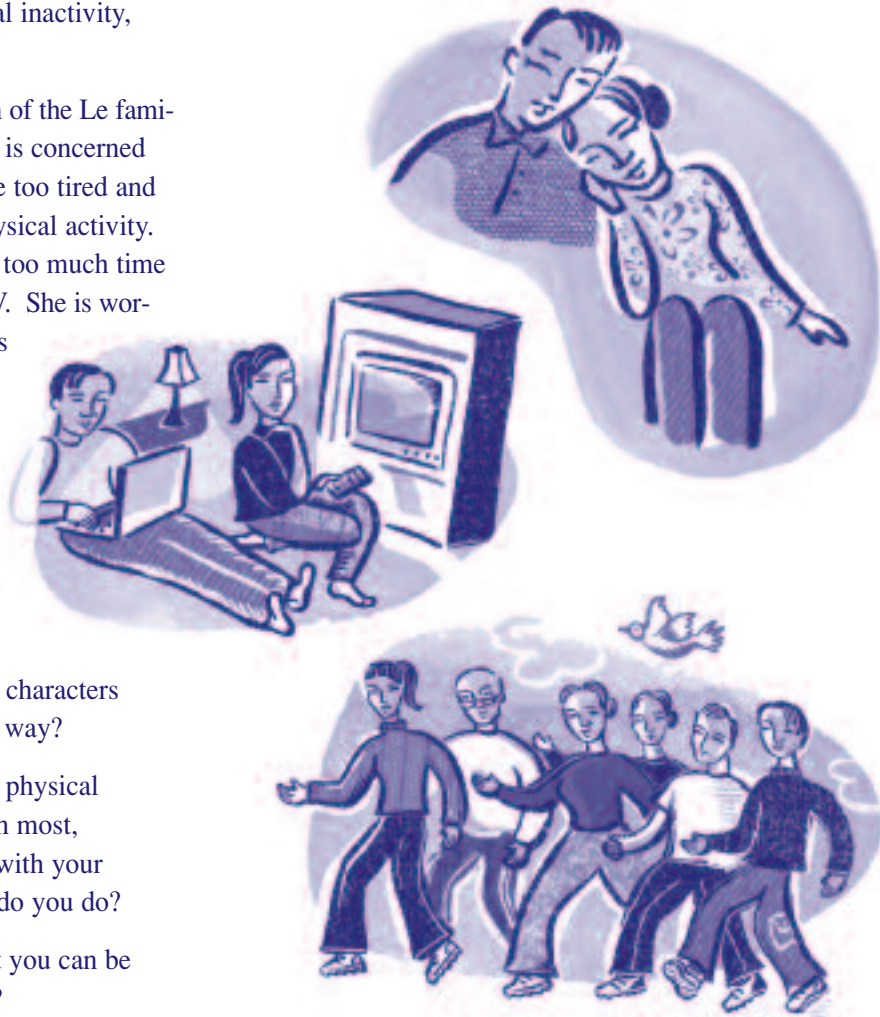
Discussion:

Ask:

- Can you identify with any of the characters mentioned in the story? In what way?
- Do you have time to engage in a physical activity for at least 30 minutes on most, preferably all, days of the week with your family? What kind of activities do you do?
- Can you think of other ways that you can be physically active during the day?

Skill: Physical activity is very important. It is recommended that adults do at least 30 minutes of physical activity on most, preferably all, days of the week. You can do at least 30 minutes all at once, or you can start slowly and build up to 30 minutes each day by being active for at least 10 minutes three times a day. Children and teenagers should be physically active for 60 minutes most days of the week, but preferably every day of the week. Physical activity does not have to

be done alone; it can be done with family, friends, or neighbors. Some activities you can try are: walking during your lunch break or after dinner with your family, riding your bike to work or school, asking your friends to join you at an aerobics class, or walking up the stairs instead of tak-



ing the elevator. An additional 30 minutes of physical activity per day may assist in preventing weight gain for persons who were overweight/obese. To sustain weight loss, the additional 30 minutes of physical activity may be needed.

Optional Activity: If your participants are interested in forming a physical activity group, pass out the Get Fit! Physical Activity Groups handout, pages 32–33.

Topic 6: Overweight and Obesity

Say: Overweight occurs when extra calories are stored as fat in your body. Being overweight increases your risk of developing high blood pressure, high blood cholesterol, and diabetes. Listen to the following story about overweight and obesity, and follow along with the pictures.

Story: Hanh Phuc Le is a busy, overworked mother with two jobs. She doesn't have enough time to make a healthy, traditional Vietnamese dinner every day, so she often stops at a local fast food restaurant to buy some quick take out, adding to the dishes that her mother-in-law makes. Fast food eating has taken a toll on her family's health. She consulted with friends and learned how to make pho with lean beef and a salad tossed with a simple but delicious salad dressing made of lime juice, garlic, chilies, and sugar substitute in less than 30 minutes. Salads are great for busy families because they are easy to prepare, delicious, and healthy. They are also fun to make with her children who like to toss the ingredients once they're in the bowl.

Discussion:

Ask:

- Do you ever feel strapped for time like Hanh Phuc Le?
- Do you want to make heart healthy meals that save you time and energy?
- What tips can you share that will make cooking for the family less time-consuming but still healthy?

Skill: Teach your participants how to calculate their body mass index, or BMI. The BMI is a measure of your weight relative to your height. This information (along with your waist measurement) can help you find your risk for developing conditions such as heart disease, stroke, and diabetes that are related to being overweight or obese.

Pass out the BMI chart on pages 40–42 and review what BMI means. Read the directions aloud for the participants to follow along and find their BMI. Ask the participants to record their BMI on the handout.



When your participants are done calculating their BMI, say: If you are overweight or obese, try to lose weight slowly. Lose 0.45 to 0.9 kg (1 to 2 pounds) a week. To lose weight, you will need to cut 500 to 1,000 calories each day from your current diet. Also, eat sensible portions and be physically active at least 60 minutes on most days of the week. We have learned that if you are losing weight, if you are overweight or obese, or maintaining a healthy weight, we can take other actions to help prevent or lower high blood pressure. You can help prevent or lower high blood pressure by eating foods that are low in saturated fat, total fat and cholesterol, eating lots of fruits and vegetables, and choosing low-fat or fat-free milk and milk-products while staying within calorie needs. If you are at a healthy weight, good for you! Try not to gain extra weight.

Also check your waist circumference. Waist circumference is the measure of your waistline and is another way to determine heart disease risk. A waist measurement of more than 88.9 cm (35 inches) for women and more than 101.6 cm (40 inches) for men is high. A high waist measurement increases your risk for heart disease. If you lose weight, you may lose the extra weight from around your waist.

Optional Activity: To demonstrate how to prepare a quick, heart healthy dish, try the recipe on pages 35–36 with your participants.

Topic 7: Diabetes

Say: Diabetes, or high blood sugar, is serious. When your blood sugar is high, your body cannot use the food that you eat for energy. Diabetes can lead to heart attacks, blindness, kidney disease, and amputations. Listen to the following story about diabetes, and follow along with the pictures.



Story: Hanh Phuc Le’s best friend has diabetes. Since coming to the United States more than 20 years ago, she has developed unhealthy eating habits. Eating high calorie foods, including sweets, and not being physically active can lead to weight gain, and being overweight is a risk factor for type II diabetes. Hanh Phuc Le is concerned about diabetes in her own family.

Discussion:

Ask:

- What do you know about diabetes?
- Do you know anyone with diabetes?

Skill: Protect yourself against diabetes.

Depending on your individual situation have your doctor check your blood sugar level every year, beginning at the age of 45. You should be tested at a younger age if you are at risk for diabetes. Your chances of getting diabetes are greater if:

- You are overweight, especially if you have extra weight around the waist.
- You are not physically active.
- You have a family member with diabetes.
- You had diabetes during pregnancy (gestational diabetes) or gave birth to at least one baby weighing more than nine pounds.
- Your blood pressure is 140/90 mmHg or higher, or you have been told that you have high blood pressure.
- Your cholesterol levels are not normal. Your HDL cholesterol (or “good” cholesterol) is 40 mg/dL or lower, or your triglyceride level is 150 mg/dL or higher. (For more information on HDL cholesterol, please see pages 28–29.)

To lower your risk of having diabetes: try to maintain a healthy weight and stay physically active.

Topic 8: Heart Attack

Say: Every year, about 1.1 million people in the United States have a heart attack and close to half of them die. A heart attack occurs when the blood supply going to a portion of the heart through one of the coronary arteries is blocked. When a heart attack occurs, quick action and medical treatment can restore the blood flow to the heart and keep heart muscle from dying. But, this can happen **only** if the person receives medical help right away. Treatment should be given as soon as possible, ideally within one hour after symptoms start. The more heart muscle is saved, the better chance a heart attack patient has of surviving and resuming a normal life. Listen to the following story about heart attack and follow along with the pictures on page 19.

Story: Kieu Thi Le is a medical student and is currently learning about heart attacks in class. She learns that every minute of a heart attack counts. She is concerned that her family won’t know what to do in case someone has a heart attack, or that they might not be able to get help quickly enough in the event that such an emergency occurs.

Discussion:

Ask:

- What do you know about heart attacks?
- Are you concerned about a heart attack happening to you or a loved one?
- Will you know what to do in the event that a heart attack occurs?



Skill: It is important to know how to recognize a heart attack for yourself and others around you.¹ Delay can be deadly. Know the warning signs most commonly reported by heart attack patients. They are:

- Your chest hurts or feels squeezed. Most heart attacks involve some type of discomfort in the center of the chest that lasts more than a few minutes. It can feel like uncomfortable pressure, squeezing, fullness, or pain. The discomfort can range from mild to severe.
- Discomfort in one or both arms, back, neck jaw, or stomach.
- Shortness of breath. You may feel like you can't breathe or catch your breath. This can occur with or without chest discomfort.
- Breaking out in a cold sweat. People having a heart attack can also break out in a cold sweat.
- Nausea. Some heart attack patients feel or get sick to their stomach.
- Light-headedness. People having a heart attack may also feel light-headed.

You do not need to have all of the symptoms at once to be having a heart attack. If you or someone you are with is having heart attack signs, the most important thing to remember is this—

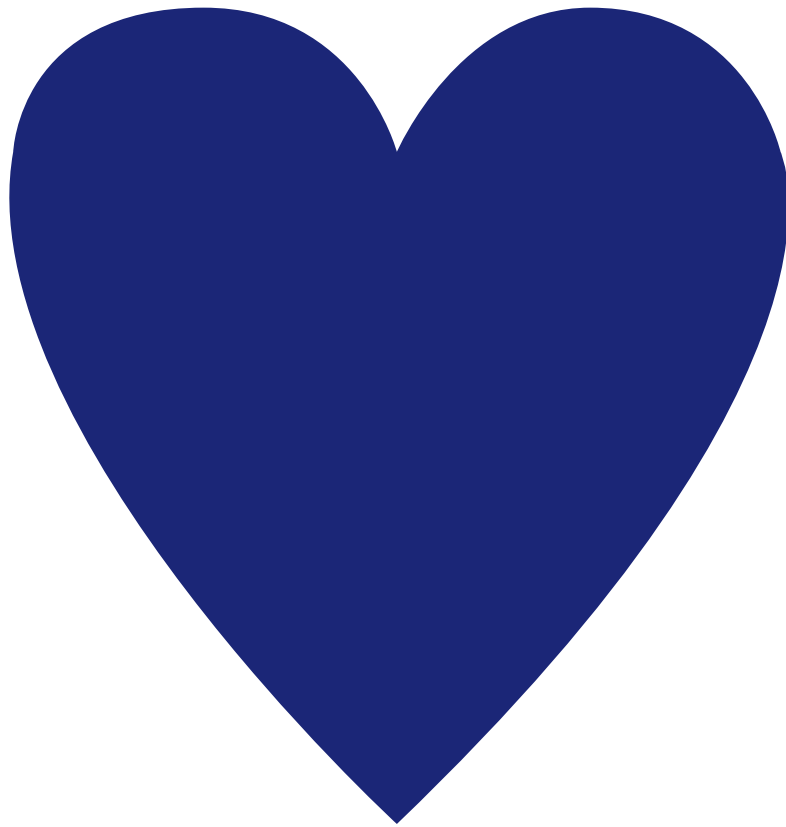
call 9-1-1 within 5 minutes or less. A heart attack can happen anywhere—at home, work, school, or while you are shopping. Don't be afraid to call 9-1-1 to get help right away.

Closing

You may end your activity with a poem or traditional song or dance. If you have time, you may do a followup activity to the icebreaker. (For details on the icebreaker activity, see page 10.) This activity is called Close to My Heart, Part II. Each participant will look at his or her heart card and review the goal he or she set for himself or herself at the beginning of the group sessions. He or she will think of three ways he or she can accomplish the goal based on new knowledge and acquired skills. He or she will present these goals to the group. The group will help one another identify ways in which each participant can make time in his/her day to engage in at least one of the heart healthy activities.

¹ Although both men and women have heart attacks, there are differences in how women and men respond to a heart attack. Women are less likely than men to believe they are having a heart attack and more likely to delay in seeking emergency treatment. As with men, women's most common heart attack symptom is chest pain or discomfort. However, women are somewhat more likely than men to experience some of the other common symptoms, particularly shortness of breath, nausea/vomiting, and back or jaw pain.

B. Heart Template



Use this shape to cut out the heart (see page 10).

C. Vietnamese Community Profile

Historical Background²

- As Saigon fell to the Communists in 1975, approximately 135,000 Vietnamese citizens fled to the United States. They were mostly young, well-educated, English-speaking, urban dwellers; 55 percent were Roman Catholic.
- From 1977 to 1979, more than 500,000 Vietnamese citizens fled to the United States. This second wave of Vietnamese refugees were less educated, less literate in Vietnamese and English, less familiar with Western culture, and more rural than those in the first wave.
- The third wave of refugees arrived from 1985 to 1991. This group included both Vietnamese and ethnic Chinese people from Vietnam who were brought to the United States through family reunification programs.

Sociodemographic Information

- Vietnamese people make up more than 10 percent of the Asian American and Pacific Islander population. They are the fifth largest Asian ethnic group in the United States.³
- Most Vietnamese people come from what was once the Republic of Vietnam, known as South Vietnam. The South Vietnamese government, an ally of the United States, collapsed under military pressure from Communist North Vietnam in April of 1975.⁴
- The largest numbers of Vietnamese people now live in Southern California, particularly in Los Angeles and Orange County. Large numbers also resettled in Houston and Dallas, Texas; the suburbs of Washington, D.C.; Pennsylvania; Minnesota; Massachusetts; New York; Illinois; and Washington State.

- Now in the United States, approximately 75 percent of Vietnamese people are foreign-born.⁵
- Approximately 62 percent of Vietnamese people in the United States do not speak English very well.⁶

Heart Disease in the Vietnamese Community

- Heart disease is the second leading cause of death for Vietnamese people.⁷
- Among Vietnamese people in California, 38 percent of men and 32 percent of women have high blood cholesterol.⁸
- A survey of a Vietnamese American rural community in the South found that 44 percent of the survey participants had high blood pressure. Of that percentage, 27 percent of them had blood pressure measurements in excess of 179/100. (A person with a blood pressure of 140/90 mmHg or higher has high blood pressure.) Researchers attribute this finding to the high percentage of participants who eat a high salt and sodium diet (56 percent), do not engage in regular physical activity (75 percent), consume alcohol regularly (21 percent), and/or smoke (18 percent).⁹

² LaBorde P, Duong B. Vietnamese Cultural Profile. EthnoMed. University of Washington, July 1992.

³ *The Asian Population: 2000*. Census, 2002.

⁴ Southeast Asia Action Resource Center. Southeast Asian Communities. www.searac.org

⁵ *We the People: Asians in the United States*. U.S. Census, December, 2004.

⁶ *Ibid.*

⁷ Centers for Disease Control and Prevention. *Chronic Disease in Minority Populations*. Atlanta: CDC, 1992.

⁸ California Department of Health Services. County Health Status Profiles, 1998. Sacramento, CA: California Department of Health Services, Center for Health Statistics, 1998.

⁹ Duong, DA, Bohannon AS, Ross MC. A Descriptive Study of Hypertension in Vietnamese Americans. *Journal of Community Health Nursing*. 2001; 18(1): 1 – 11.

Values, Traditions, and Health

- Many Vietnamese customs are rooted in the Confucian respect for both education and for family and elders. Vietnamese families often have two to four generations living under one roof. There is the immediate family (nha) and the extended family (ho).¹⁰
- Other Vietnamese customs are rooted in the Taoist desire to avoid conflict. To avoid confrontation or disrespect, many may not vocalize disagreement. Instead of responding negatively, they may not answer a question.
- Traditional healing practices vary greatly between ethnic groups. Some mountain dwelling groups intertwine medicine and religion. Sickness is believed to have come from the wrath of gods. The healer or shaman, who is a priest, is considered superhuman and negotiates with the gods to remove sickness. If the priest or physician fails to cure the illness, it is not their failure but the will of the gods. Conversion to Christianity and urban living has lessened the use of shamans, but the belief in external causes of sickness remains. Often people resist invasive techniques and see a physician who does not intrude on the body as being the best healer.
- Lowland peasant groups and urbanites from Vietnam employ a medicinal system based on Chinese medicine. This system is based on the premise that living things are composed of four basic elements—air, fire, water, and earth—with associated characteristics of cold, hot, wet, and dry. This hot/cold belief system is common to many Vietnamese people, regardless of their educational status or occupation. Many see traditional herbal remedies, tonics, massage, and avoidance of excess as the pathway to good health.
- The use of traditional healing practices in the United States has a stronger link to rural versus urban living before immigration than to length of stay in this country. Many Vietnamese people (especially the elderly) distrust Western health care, but they also may be reluctant to reveal this distrust to a Western health care provider.
- Many see suffering and illness as an unavoidable part of life. Some also feel that the length of one's life is predetermined and that prolonging life or saving life is futile. Stoicism is a highly respected personal trait, but it can prevent people from seeking care.

Special Issues to Consider

- A weak heart is typically associated with palpitations, dizziness, faintness, and feeling of panic.
- Many Vietnamese refugees suffer from posttraumatic stress disorder (PTSD), depression, anxiety, psychosis, and adjustment reactions. In traditional Vietnamese culture, it is not acceptable to discuss stress or emotional disorders. Thus, many with these disorders present initially with somatic complaints.
- Cultural barriers to care include a vague understanding and distrust of Western medicine, resistance to invasive procedures, and poor physician – patient communication.

¹⁰ McBride MR, Marioka-Douglas N, Yeo G. *Aging and Health: Asian and Pacific Islander Elders*. Second Edition. Stanford Geriatric Education Center Working Paper Series Number 3, Ethnogeriatric Reviews. Stanford, California, 1996.

D. Sample Promotional Flyer

Sức Khỏe Là Vàng! Your Health is Golden!

Join your community for heart healthy activities.

Did you know that almost one of five Vietnamese people dies of heart disease?

Love your heart for a healthy life!

In this activity, you will:

- Learn how to keep your heart and your family's hearts healthy.
- Learn about high blood pressure and high blood cholesterol.
- Learn how to be more physically active, eat heart healthy, keep a healthy weight, and stop smoking.
- Get bilingual take-home materials you can share with your family.
- Enjoy role-playing and other activities that make learning about your heart health fun.

Bring your family and friends to a fun and free community event to talk about how you can protect yourself and your family from heart disease.

Day/date:

Time:

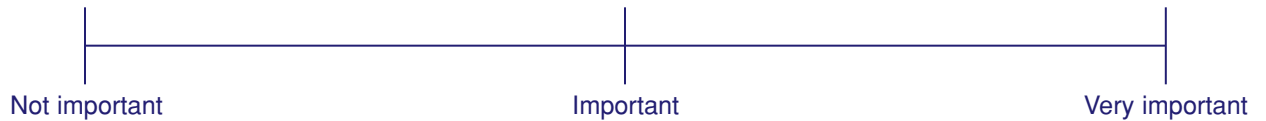
Location:

For more information, call:

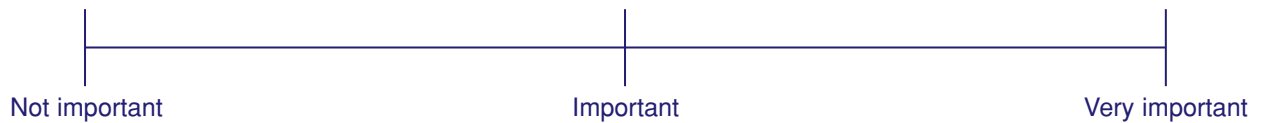
This session is sponsored by [add your organization name here], in partnership with the National Heart, Lung, and Blood Institute, National Institutes of Health, U.S. Department of Health and Human Services.

E. Healthy Heart Attitude Assessment Form (pretest)

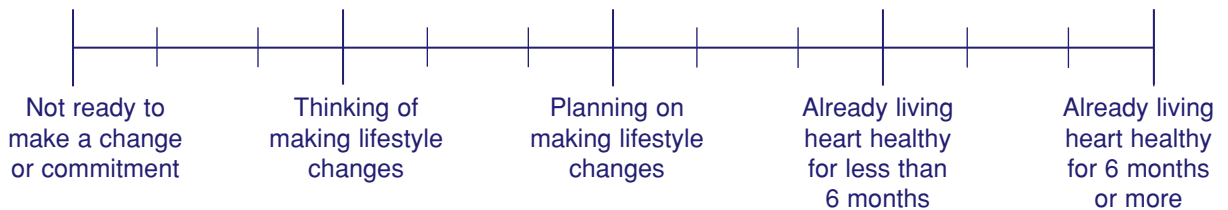
On the line below, please draw a heart ♥ at the point that best reflects how important it is for you to make heart healthy lifestyle changes.



On the line below, please draw a heart ♥ at the point that best reflects how important you think it is in making heart healthy lifestyle changes.



On the scale below, please draw a heart ♥ at the point that best reflects how ready you are right now to make heart healthy lifestyle changes.



Below is a list of heart healthy habits. Circle the ones you are willing to try first.

- ♥ Choose foods that are **low** in sodium.
- ♥ Prepare foods **with little or no** salt.
- ♥ Eat foods **lower** in saturated fat and *trans* fat.
- ♥ Eat foods **low** in cholesterol.
- ♥ Prepare foods with a **smaller amount** of vegetable oil than you normally use.
- ♥ **Be physically active** for at least 30 minutes on most, preferably all, days of the week.
Try an activity like walking three times a day for at least 10 minutes each time.
- ♥ Try to eat **at least** 2 cups of fruits and 2½ cups of vegetables per day (for a 2000 calorie diet).
- ♥ Eat a **variety** of fruits and vegetables each day.
- ♥ Eat a **variety** of grains each day with at least half the grains coming from whole grains.
- ♥ Eat 3 cups per day of fat-free or low-fat milk or milk products (for a 2000 calorie diet).
- ♥ **Watch the body weight.** Keep a healthy weight or lose weight, if overweight. Ask the doctor for help.
- ♥ **Stop smoking.** Pledge not to smoke cigarettes and to keep the home smoke free.
- ♥ If drinking alcohol, drink in moderation.
- ♥ Check blood pressure, blood cholesterol, and blood sugar (to assess diabetes level) regularly.

F. Stages of Behavior Change Tip Sheet

Stages of Behavior Change

Prochaska and DiClemente

Behavior change is a process, not an event. Individuals have different levels of motivation for change, or they may be at different stages of readiness for change. The goal is to help people move into a new stage. Before beginning any community intervention program, determine at which stage your community's members are. Your community may have residents that are in different stages from one another. A successful intervention program meets the needs of the entire community. The stages of behavior change are:

PRECONTEMPLATION: Not ready to change

These people are unaware of a problem and have not yet thought about the desired behavior change. They might have tried unsuccessfully to change their behavior, but do not intend to continue to try.

TIP: Highlight the importance and significance of the problem. Motivate them and capture their attention. Identify barriers to engage in the desired behavior as well as its benefits.

CONTEMPLATION: Thinking about change

These are people who have not engaged in the desired behavior but are considering it.

TIP: These people are more positive about changing a behavior but need to eliminate barriers. They must be motivated and need emphasis on the personal benefits to be achieved.

READY FOR ACTION: Getting ready to make a change

These people are making a mental plan to accomplish the behavior change.

TIP: Help them in setting goals and developing concrete plans. Teaching specific "how-to" information is important.

ACTION: Ready to make a change

People have taken steps to accomplish the desired behavior.

TIP: They are positive about changing habits. They may need some final, specific "how-to" information, and positive feedback, social support, and reinforcement.

MAINTENANCE: Continuing to support the behavior change

People have taken the desired action and know they would like to continue.

TIP: Reinforce and support the continuation of the behavior.

G. Heart Disease Risk Factors: Frequently Asked Questions

BLOOD PRESSURE QUESTIONS

Q: What is blood pressure?

A: Blood pressure is the force applied by the blood against the walls of your arteries. Blood pressure is needed to move the blood through your body.

Q: Why are two numbers given for blood pressure?

A: Blood pressure is always given as two numbers, systolic and diastolic pressures. Usually they are written one above the other, such as 120/80 mmHg. The top number, systolic, tells you how much pressure is used to pump blood. The bottom number, diastolic, tells you how much pressure there is between heartbeats, when your heart is at rest.

Q: What is high blood pressure?

A: High blood pressure occurs when the pressure in the arteries stays high because of resistance to blood flow through the arteries. This means that the heart has to work harder to carry blood to the rest of the body.

Q: What are the signs of high blood pressure?

A: High blood pressure usually has no signs or symptoms. It is called the silent killer. A person can have high blood pressure and still feel fine. That is why it is important that you have your blood pressure checked. Ask the doctor what your number is and what the number means.

Q: What is considered a high blood pressure level?

A: 140/90 mmHg or higher.

Q: What is considered a normal blood pressure level?

A: Less than 120/80 mmHg.

Q: What is prehypertension?

A: 120/80 mmHg to 139/89 mmHg. You do not have high blood pressure yet but are likely to develop it in the future unless you adopt healthy lifestyle changes.

Q: Is hypertension the same thing as having high blood pressure?

A: Yes, hypertension means high blood pressure. A person who has a blood pressure of 140/90 mmHg or higher on two or more separate visits to a health care provider is considered to have high blood pressure or hypertension. If blood pressure stays too high, a person can have a heart attack, heart failure, stroke, kidney disease, and other life-threatening illnesses.

Q: How can I lower my high blood pressure and eat a healthy diet?

A: To lower high blood pressure, try to:

- ♥ Choose foods that are low in salt and sodium.
- ♥ Eat more fruits and vegetables.
- ♥ Eat more nonfat or low-fat milk and milk products.
- ♥ Choose whole grain products and cereal more often.
- ♥ Lose weight if you are overweight.
- ♥ Be physically active at least 30 minutes on most, preferably all, days of the week.
- ♥ If you drink alcohol, do so in moderation.
- ♥ Take your medicine as your doctor tells you.
- ♥ Have your blood pressure checked at least every two years or more often if you have high blood pressure or prehypertension.

Q: Does stress cause you to have high blood pressure?

A: Stress can cause your blood pressure to go up but only for a little while. This change in blood pressure is normal. High blood pressure occurs when the pressure stays high over a period of time.

Q: Does smoking cause high blood pressure?

A: Smoking injures blood vessel walls and speeds up the process of hardening of the arteries. Even though it does not cause high blood pressure, smoking is bad for anyone, especially those with high blood pressure. If you smoke, quit. If you don't smoke, don't start. Once you quit, your risk of having a heart attack is reduced after the first year. You have a lot to gain by quitting.

SODIUM AND SALT QUESTIONS

Q: Why should I cut back on salt and sodium?

A: Eating a diet lower in salt or sodium may prevent high blood pressure and help lower high blood pressure. It is recommended that a person eat no more than 2,300 milligrams (mg) of sodium per day, which includes sodium naturally found in foods. One teaspoon of salt contains about 2,300 mg of sodium. Look on the nutrition facts label on food to find the amount of sodium in packaged foods. Choose foods labeled “sodium free,” “low sodium,” or “no salt added.” Most restaurant foods are very high in sodium. Decrease the times you eat out or get take-out food.

Q: How can I add flavor to my foods without salt?

A: Start by slowly using less and less salt in your cooking. Condiments such as nuoc mam, soy sauce, and monosodium glutamate (MSG) should be used less often. They have a lot of sodium. Use more herbs and spices instead of salt to add flavor to your food. They will make your food taste even better. If you cook with soy sauce, try the low sodium or light soy sauce versions.

BLOOD CHOLESTEROL QUESTIONS

Q: What is blood cholesterol?

A: Cholesterol is a waxy substance in your arteries. Too much cholesterol from foods high in saturated fat, *trans* fat, and dietary cholesterol can clog your arteries, narrowing the opening. The narrowed arteries may also become completely blocked by a blood clot. Narrowed and blocked arteries can lead to angina¹¹, heart attack, stroke, kidney disease, blindness, and poor blood circulation.

Q: What do the total blood cholesterol mean?

A: A total blood cholesterol level of less than 200 mg/dL is desirable. A total blood cholesterol level between 200–239 mg/dL is borderline high. Depending on your other risk factors, you may be at a higher risk for heart disease. Talk to your doctor about your overall risk for heart disease. A total blood cholesterol level of 240 mg/dL or more is high. You are at a higher risk for clogged arteries and a heart attack. Talk to your doctor to determine your risk for heart disease.

Q: What do “good” and “bad” cholesterol mean?

A: HDL (high density lipoprotein), or “good cholesterol,” helps clean fat and cholesterol from arteries by carrying it to the liver for removal from the body. LDL (low density lipoprotein), or “bad cholesterol,” deposits cholesterol in your arteries and causes them to become clogged.

¹¹ Angina is chest pain or discomfort that occurs when your heart muscle does not get enough blood. Angina may feel like pressure or a squeezing pain in your chest. The pain may also occur in your shoulders, arms, neck, jaw, or back. It may also feel like indigestion. Angina is a symptom of coronary heart disease, the most common type of heart disease.

Q: What do your LDL cholesterol numbers mean?

A: An LDL cholesterol level of less than 100 mg/dL is recommended, if you are at high risk for heart disease. If you are at very high risk, try to keep your LDL cholesterol below 70 mg/dL. An LDL cholesterol level of 100–129 mg/dL is near optimal. An LDL cholesterol level of 130–159 mg/dL is borderline high. An LDL cholesterol level of 160–189 mg/dL is high. An LDL cholesterol of 190 mg/dL and above is very high. Talk to your doctor to learn about your heart disease risk and to determine your LDL goal.

Q: What is the ideal HDL cholesterol level?

A: Keep your HDL cholesterol level above 40 mg/dL. The higher the better!

Q: What is saturated fat?

A: Saturated fat is one type of fat that raises LDL cholesterol. Many foods contain saturated fat. Eating too much saturated fat will raise your blood cholesterol more than anything else you eat. This will raise your chances of developing heart disease. Saturated fats are found mainly in animal products, such as whole milk, ice cream, fatty meats, lard, and some vegetable oils (coconut oil, palm oil, and palm kernel oil).

Q: What is *trans* fat?

A: *Trans* fat is a type of unsaturated fat that raises LDL cholesterol. *Trans* fat is formed when vegetable oil is hardened to become margarine or shortening through a process called “hydrogenation.” The harder the margarine or shortening, the more likely it is to contain more *trans* fat. Eating too much *trans* fat, along with saturated fat, will raise your blood cholesterol. This will raise your chances of developing heart disease. *Trans* fat is found in foods that have hydrogenated fats/oils, such as candy bars, baked goods (cookies, pies, and crackers), fried foods (fried chicken, French fries, and chips), and stick margarine.

Q: What is dietary cholesterol?

A: Cholesterol in foods is called dietary cholesterol. Cholesterol present in the foods you eat may raise your blood cholesterol, but eating foods with saturated fat can raise your blood cholesterol even higher. Dietary cholesterol is found in foods that come from animals (egg yolks, dairy products, meat, poultry, fish, and shellfish, squid, shrimp, and organ meats like liver and tripe).

Q: How can you lower your blood cholesterol?

A: The best way to lower your blood cholesterol level, especially your “bad” LDL cholesterol, is to eat a heart healthy diet low in saturated fat, *trans* fat, and cholesterol, be physically active at least 30 minutes on most, preferably all, days of the week, and maintain a healthy weight.

Q: Who should have their blood cholesterol tested?

A: All adults 20 years of age or older should have their blood cholesterol checked at least once every five years.

Q: Do children and adults benefit from eating foods low in saturated fat, *trans* fat, and cholesterol?

A: Children age 2 and older as well as adults of all ages can benefit from a diet low in saturated fat, *trans* fat, and cholesterol. Eating fruits and vegetables as snacks, instead of french fries and fatty chips, is a good way to cut down on saturated and *trans* fats. Teach these simple behaviors to children to establish heart healthy habits early.

Q: What are triglycerides?

A: Triglycerides are a type of fat in the blood. They come from fat that you eat and are made in the body. When you eat too many calories or a diet too high in carbohydrates, more triglycerides are made. People with high triglycerides often have low HDL cholesterol. When your triglycerides are high, you are also at increased risk for heart disease. To keep your triglycerides at a healthy level, you can:

- ♥ Maintain a healthy weight or lose weight, if you are overweight.
- ♥ Be physically active for at least 30 minutes on most, preferably all, days of the week.
- ♥ Eat a heart healthy diet that is low in saturated fat, *trans* fat, and cholesterol, and within your calorie requirements.
- ♥ Eat a variety of whole grains, fruits, and vegetables.
- ♥ Avoid smoking and drinking alcohol.

PHYSICAL ACTIVITY QUESTIONS

Q: What are the benefits of regular physical activity?

A: Regular physical activity:

- ♥ Makes you more energetic.
- ♥ Helps you maintain weight loss and healthy weight.
- ♥ Helps you lower your blood pressure.
- ♥ Helps you lower your blood cholesterol.
- ♥ Makes you sleep better.
- ♥ Reduces stress.

Q: How much moderate physical activity do I need to do to decrease the risk for heart disease?

A: To reduce your risk of heart disease, engage in at least 30 minutes of moderate-intensity physical activity—above your usual daily activities—at work or home on most, preferably all, days of the week.

Q: Do children and adolescents need to do a lot of physical activity?

A: Children and adolescents should engage in at least 60 minutes of physical activity on most, preferably all, days of the week.

Q: What kind of activities can I do to improve my heart health?

A: Activities such as brisk walking, gardening, biking, running, and swimming can improve your heart health.

SMOKING QUESTIONS

Q: What is the best way to quit smoking?

A: Experts say three ways to quit smoking are:

- ♥ **Use the nicotine patch or nicotine gum.** The nicotine in the patch or gum can reduce the craving for nicotine when you stop smoking. Ask your doctor for advice and follow the package directions before using the patch or gum.
- ♥ **Get support and encouragement.** Family, friends, and your doctor can offer you encouragement and support. You can also attend a quit-smoking program for added counseling and support.
- ♥ **Learn how to handle stress and urges to smoke.** Be aware of the things that make you want to smoke. Distract yourself from thinking about smoking by doing things you enjoy, such as talking to your friends, walking, dancing, or working around the house.

Q: If I quit smoking, will I gain weight?

A: You are likely to gain weight when you quit smoking, especially if you gained weight on previous attempts to quit. Most smokers gain less than 10 pounds. The amount of weight you may gain from quitting will be a minor health risk compared to the risk of continued smoking. Focus your attention on quitting smoking first. After you have quit smoking successfully, you can take steps to lose weight. While you are quitting, eat plenty of fruits and vegetables, get physical activity regularly, get plenty of sleep, and avoid high calorie foods.

WEIGHT CONTROL QUESTIONS

Q: Is skipping meals a good way to lose weight?

A: No, skipping meals to lose weight is not a good idea. Try distributing your calorie intake over the day, and avoid overeating at any one meal.

Q: What is the best way to lose weight?

A: The best way to lose weight is to do so gradually:

- ♥ Choose foods that are lower in calories, saturated fat, and sugar.
- ♥ Prepare foods without added salt, sugar, and fat.
- ♥ Reduce the portion size that you eat.
- ♥ Add physical activity to your daily schedule.

Q: Can being overweight raise my risk of heart disease?

A: Yes, it can! Being overweight raises your risk for high blood cholesterol, high blood pressure, and diabetes. Even if you do not have high blood pressure or high blood cholesterol, being overweight may increase your risk of heart disease.

Q: How can I help my family eat heart healthy?

A: ♥ Make a heart healthy meal plan for each day.

- ♥ Shop with a grocery list, so you won't be tempted to buy foods that are high in calories and fat.
- ♥ Bake, broil, boil, or steam foods instead of frying them.
- ♥ When eating out, ask for dishes prepared without or with very little salt (sodium) and without or with very little added fats or oils.
- ♥ Be a role model—eat the way you want your family to eat.
- ♥ Stock your kitchen with healthy snacks and foods.
- ♥ Use sauces high in sodium (e.g., nuoc mam and soy sauce) less often. Choose a low sodium or light sauce, if there is one, such as low sodium or light soy sauce.
- ♥ Use herbs and spices instead of salt when you cook.
- ♥ Serve fresh fruits and vegetables.
- ♥ Choose foods that are low in saturated fat, *trans* fat, and cholesterol.
- ♥ Avoid using coconut milk when you cook because it is high in calories and saturated fat.

H. Get Fit! Physical Activity Groups

Encourage people to form physical activity groups. Not only do participants get the benefits of physical activity, they also form strong friendships and challenge one another to better heart health. Walking clubs are just one example of a popular group activity. Walking is moderate, inexpensive, and an easy form of physical activity. There can be different types of physical activity groups. Swimming, running, and gardening are other good group activities. To encourage other members of the community to join the physical activity group, post flyers in common areas where community members are most likely to gather.

Tips For Physical Activity Groups:

1. Lead by example.

A successful physical activity group must be led by example. Forming the group is relatively easy—maintaining the energy and momentum is hard. Choose a highly motivated, energized, and dedicated person as group leader.

2. Keep on schedule.

Staying strong and healthy should be one of your group mottos. Draw up a schedule, based on group participants' abilities, and stick to it. This will help build endurance and stamina slowly while preventing injuries.

3. Safety first.

Make sure you walk on marked trails. At night, use only lighted paths. Watch your surroundings and be on the lookout for suspicious people. If you cannot find a safe or indoor facility to do your physical activity, try to confine your activity to the daylight hours. Try not to use locations that are not easily accessible, especially by public transportation. Try not to use trails that are too hilly, rocky, or uneven. The leader is ultimately responsible for the safety of all group participants. No one should be left behind.

4. Take time for recognition and celebration.

It is important to provide an incentive program that validates the efforts of the participants. Use items that promote heart health for active people.

5. Stretch.

Stretching is a good way to warm up your muscles before physical activity and to aid in muscle recovery after physical activity. With your group members, try the stretching exercises on the next page.

6. Count your way towards heart health.

Encourage everyone to wear a pedometer. A pedometer counts the number of steps walked. This helps the participants set physical activity goals and achieve them. Try to find a local organization to donate pedometers to your group.

7. Build community support.

Involve others in the planning and get the acceptance of the decisionmakers and medical staff. Explain to the medical staff how important it is for them to refer patients to the walking program.

8. Keep good records.

Develop a recordkeeping system for participants and their goals and achievements. Review the records and tally them on a regular basis so that awards can be presented in a timely way.

9. Provide health and nutrition classes.

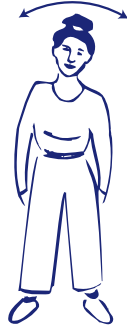
Provide health education information to the participants, such as heart healthy shopping and cooking tips. Promote getting physical exams, screenings, and annual checkups. Invite knowledgeable speakers (i.e., health care professional, registered dietitian, health educator) to talk about healthy eating, physical activity, and balancing your food intake and physical activity.

Stretching Exercises

Do these stretches gently and slowly. Do not bounce.



1. Deep Breathing
Arms up, breathe in, arms down, breathe out. Two times each.



2. Neck Stretches
Side to side. Two times.



3. Shoulder Stretches
Up and down five times on each side.



4. Side Stretches
Up and down five times in each direction.



5. Waist Stretches
Side to side three times in each direction.



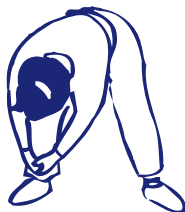
6. Twists
Side to side three times in each direction.



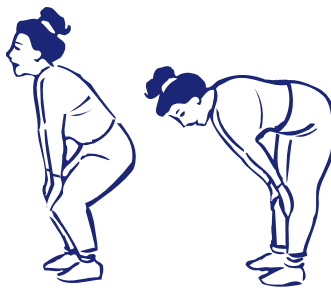
7. Back and Leg Stretches
Down and up five times.



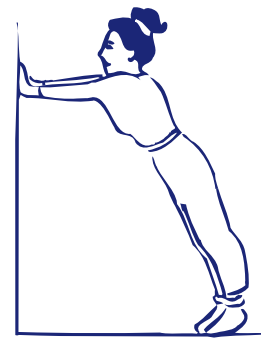
8. Back Stretches
Arms through legs six times.



9. Leg Stretch (1)
Hold on to ankle, four times on each side.



10. Leg Stretch (2)
Down and up five times.



11. Leg Stretch (3)
Move heels up and down six times.

I. How to Create a Nutrition Display

Nutrition displays visually help participants learn about healthy food choices. Displays can reinforce nutrition information from your group discussion. They can even motivate your participants to eat in a heart healthy way. Many different kinds of nutrition displays can be created to be used in any setting. For instance, displays can show the amount of sodium or fat in specific foods or how to make the best choices at fast food restaurants. The sample nutrition display below can be used to show your participants a heart healthy alternative to fried spring rolls (chả giò).

Nutrition Display: How Much Fat Is in Fried Spring Rolls (Chả Giò)?

Materials needed:


Foam-core board or poster board,
20 inches x 30 inches
Pictures of food or food models
Dark-colored plastic spoons
Light-colored clay
Velcro strips
Scissors
Markers
Glue

Directions:


1. Find out how much fat is in the food product(s) you want to display. In this case, one serving of fresh spring rolls (gỏi cuốn) is compared to one serving of fried spring rolls (chả giò). Convert that quantity into teaspoons (4 grams of fat = 1 teaspoon).
2. Cover as many plastic spoons as you need with the appropriate amount of clay. Make sure to glue the clay onto the spoon.
3. With scissors, cut out the text and food pictures (if you have any) for your food display.

4. On the board, arrange the text, food pictures, and spoons where you want them.
5. Glue the text and food pictures onto the board.
6. Cut the Velcro into squares. Glue one part of the Velcro (female) to the back of each spoon, one at the top of the handle and one at the bottom where the spoon curves.
7. Glue the other part of the Velcro (male) to the poster board, where the spoon will be placed.
8. Attach the spoons to the board, matching up the Velcro squares.

**Choose Gỏi Cuốn As Part of
a Heart Healthy Meal**



8 chả giò = 5 teaspoons of fat



8 gỏi cuốn = ¼ teaspoons of fat

J. Hương Quê: How to Do a Heart Healthy Cooking Demonstration

Cooking demonstrations can show people that food can be prepared in a heart healthy way and still be tasty. A cooking demonstration can be a simple activity (e.g., how to remove skin from chicken), or it can be a more sophisticated activity (e.g., how to prepare Vietnamese Spring Rolls). Cooking demonstrations are effective because the audience can see how the food is prepared and they can sample the results. To help conduct food demonstrations, you may want to recruit volunteers from the local health department, local American Dietetic Association, Cooperative Extension Service, or local culinary schools that specialize in Vietnamese cuisine.

Cooking Demonstration: A Planner's Checklist

- Is food allowed at your facility?
- Is water accessible?
- Is electricity available?
- Is lighting adequate?
- Are tables and chairs available?
- Is your facility properly equipped (e.g., refrigerator, oven, stove, microwave)?
- Does your recipe complement your heart health message?
- Is your recipe too difficult for your audience or too time-consuming?
- Do you have all the necessary cooking utensils and ingredients ready and within reach?
- Do you have incentives (e.g., recipes on note cards, heart healthy cookbooks)?
- Do you have enough napkins, plates, and eating utensils for the taste test?

Involve the participants as much as possible in the preparation and presentation stages of your demonstration. For example, have them wash the spinach, chop the tomatoes, or dish out samples for the taste test. This helps them learn and see that heart healthy cooking is easy to do. Also, don't forget about food safety! Teach the participants about hand washing, refrigeration, preventing food contamination, and other food safety tips.

Use this heart healthy recipe to show your participants how to make easy and quick flavorful dishes without a lot of calories, fat, salt, and sodium. For other Asian recipes, see the *Keep the Beat: Heart Healthy Recipes* book from the National Heart, Lung, and Blood Institute.

Fresh Spring Rolls (Gỏi Cuốn)

Ingredients:

1 cup	carrots cut into long, thin strips
2 cups	bean sprouts
2 cups	cucumber, seeded and cut into long, thin strips
1 cup	minced scallions
½ cup	chopped fresh cilantro
¼ cup	chopped fresh mint
8	rice paper wrappers

Directions:

1. Toss first six ingredients in a large bowl.
2. Soak one rice paper wrapper in warm water until soft (1 to 2 minutes). Shake off excess water.
3. Place vegetable filling off-center on rice paper and fold like an egg roll.
4. Repeat with remaining vegetable filling and rice paper wrappers.

Yield: 8 servings

Serving Size: 1 roll

Nutritional Information Per Serving:

Calories: 70

Total fat: 1 g

Saturated fat: 0 g

Trans fat: 0 g

Cholesterol: 0 mg

Sodium: 28 mg

Total carbohydrate: 16 g

Dietary fiber: 2 g

Sugars: 2 g

Protein: 3 g

Vitamin A: 3039 IU

Vitamin C: 8 mg

Calcium: 25 mg

Iron: 1 mg

Potassium: 161 mg

K. Sample Evaluation (posttest)

We would like your opinion of the program that you attended today. Please fill out this form as completely as possible. Thank you!

1. How would you rate the program that you attended today?

- Excellent
- Good
- Fair
- Poor

2. How would you rate the leader?

- Excellent
- Good
- Fair
- Poor

3. Check YES or NO for the following statements.

YES

NO

a. The content was presented in a clear and effective way.

b. The activities were appropriate, educational, and fun.

c. The handouts and visuals added to my learning.

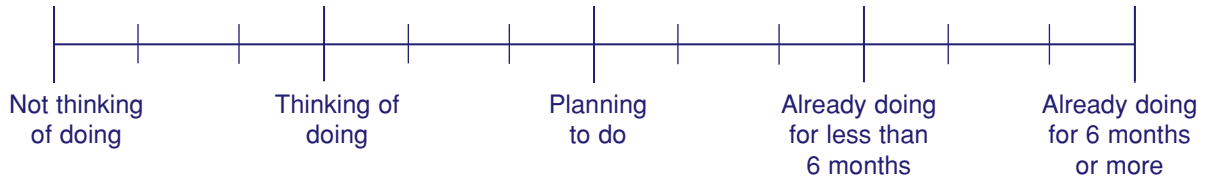
d. This program is useful to my community and me.

4. On the scale below, please draw a heart ♥ at the point that best reflects how prepared you are right now to make heart healthy lifestyle changes.

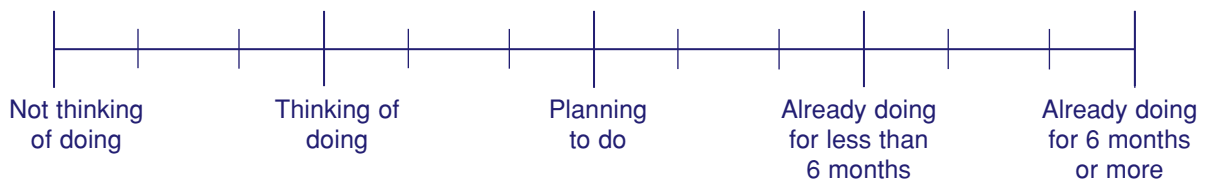


5. On the scales below, please draw a heart ♥ at the point that best reflects how you feel about being heart healthy.

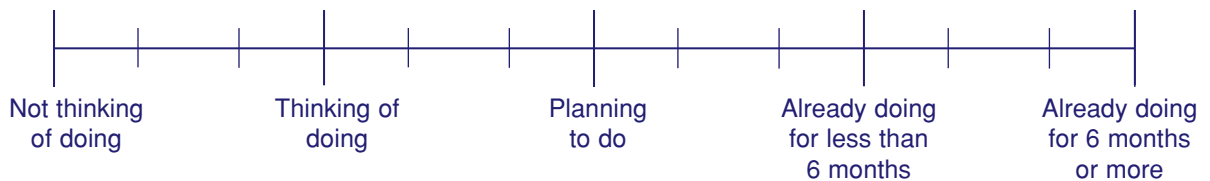
a. Being physically active at least 30 minutes on most, preferably all, days of the week.



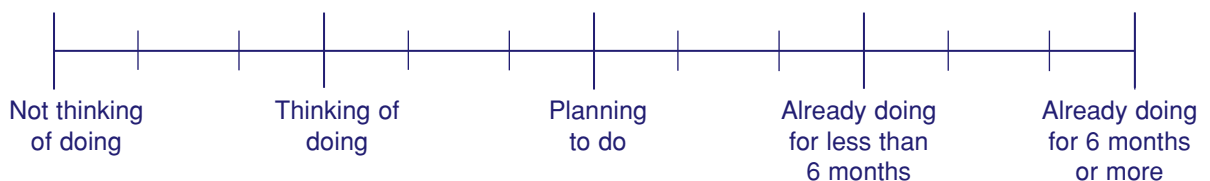
b. Eating out at fast food restaurants less often.



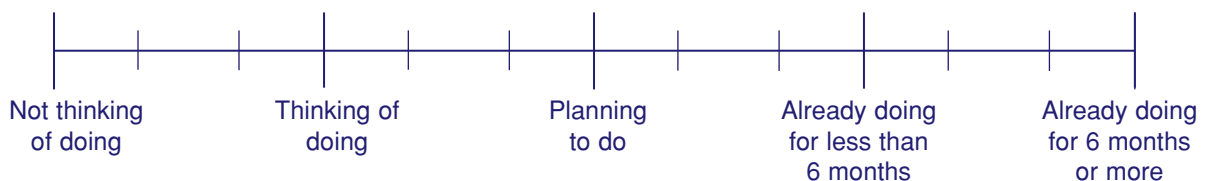
c. Eating foods low in saturated fat, *trans* fat, and cholesterol, and moderate in total fat.



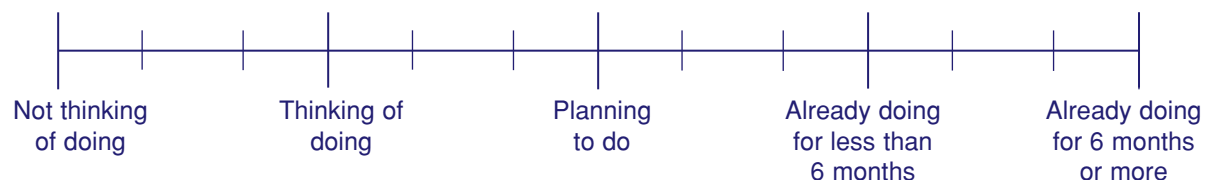
d. Using half the amount of salt and sodium that I normally use.



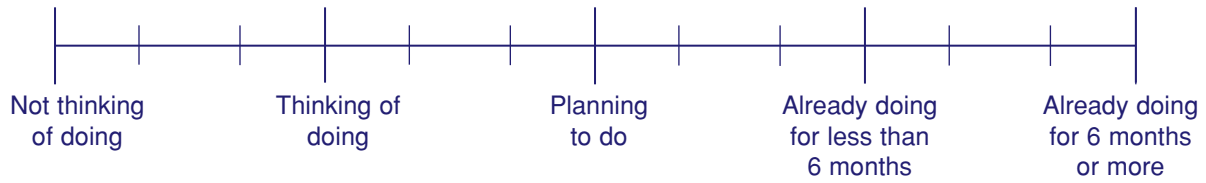
e. Maintaining a healthy weight, or losing weight if I am overweight.



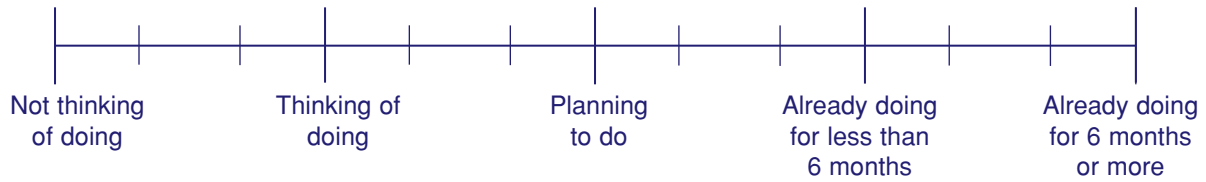
f. Having my blood pressure, blood cholesterol, and blood sugar checked regularly.



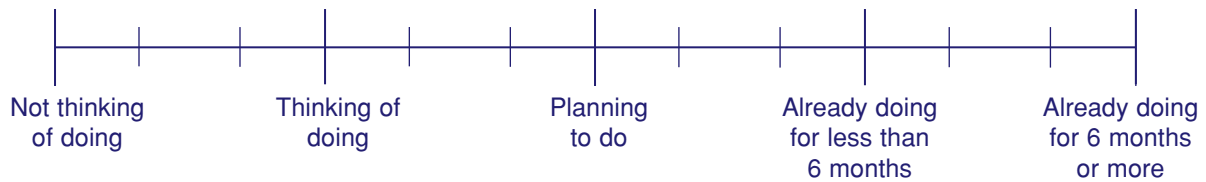
g. Quitting smoking.



h. Drinking alcohol in moderation, if I drink.



i. Eating more fruits and vegetables.



6. What did you like about this program?

7. What did you dislike about this program?

8. How would you improve this program for the future?

9. What topics would you like to see covered in future programs that we didn't cover today?

10. Other comments?

Thank you!

L. Watch Your Weight

Check the chart to find your body mass index (BMI).

Directions: To use the chart, find your height in the left-hand column labeled “height.” Move across to your body weight. The number at the top of the column is the BMI for your height and weight.

	HEALTHY WEIGHT						OVERWEIGHT					OBESE	
BMI	19	20	21	22	23	24	25	26	27	28	29	30	31
HEIGHT (m/ft-in)	WEIGHT (kg/lb)												
1.37 4'6"	35.9 79	37.7 83	39.5 87	41.4 91	43.2 95	45.0 99	47.3 104	49.1 108	50.9 112	52.7 116	54.5 120	56.4 124	58.2 128
1.40 4'7"	37.3 82	39.1 86	40.9 90	43.2 95	45.0 99	46.8 103	48.6 107	50.9 112	52.7 116	54.5 120	56.8 125	58.6 129	60.5 133
1.42 4'8"	38.6 85	40.5 89	42.7 94	44.5 98	46.4 102	48.6 107	50.5 111	52.7 116	54.5 120	56.8 125	58.6 129	60.9 134	62.7 138
1.45 4'9"	40.0 88	41.8 92	44.1 97	45.9 101	48.2 106	50.5 111	52.3 115	54.5 120	56.8 125	58.6 129	60.9 134	62.7 138	65.0 143
1.47 4'10"	41.4 91	43.2 95	45.5 100	47.7 105	50.0 110	52.3 115	54.1 119	56.4 124	58.6 129	60.9 134	62.7 138	65.0 143	67.3 148
1.50 4'11"	42.7 94	45.0 99	47.3 104	49.5 109	51.8 114	54.1 119	56.4 124	58.2 128	60.5 133	62.7 138	65.0 143	67.3 148	69.5 153
1.52 5'0"	44.1 97	46.4 102	48.6 107	50.9 112	53.6 118	55.9 123	58.2 128	60.5 133	62.7 138	65.0 143	67.3 148	69.5 153	71.8 158
1.55 5'1"	45.5 100	48.2 106	50.5 111	52.7 116	55.5 122	57.7 127	60.0 132	62.3 137	65.0 143	67.3 148	69.5 153	71.8 158	74.5 164
1.57 5'2"	47.3 104	49.5 109	52.3 115	54.5 120	57.3 126	59.5 131	61.8 136	64.5 142	66.8 147	69.5 153	71.8 158	74.5 164	76.8 169
1.60 5'3"	48.6 107	51.4 113	53.6 118	56.4 124	59.1 130	61.4 135	64.1 141	66.4 146	69.1 152	71.8 158	74.1 163	76.8 169	79.5 175
1.63 5'4"	50.0 110	52.7 116	55.5 122	58.2 128	60.9 134	63.6 140	65.9 145	68.6 151	71.4 157	74.1 163	76.8 169	79.1 174	81.8 180
1.65 5'5"	51.8 114	54.5 120	57.3 126	60.0 132	62.7 138	65.5 144	68.2 150	70.9 156	73.6 162	76.4 168	79.1 174	81.8 180	84.5 186
1.68 5'6"	53.6 118	56.4 124	59.1 130	61.8 136	64.5 142	67.3 148	70.5 155	73.2 161	75.9 167	78.6 173	81.4 179	84.5 186	87.3 192
1.70 5'7"	55.0 121	57.7 127	60.9 134	63.6 140	66.4 146	69.5 153	72.3 159	75.5 166	78.2 172	80.9 178	84.1 185	86.8 191	90.0 198
1.73 5'8"	56.8 125	59.5 131	62.7 138	65.5 144	68.6 151	71.8 158	74.5 164	77.7 171	80.5 177	83.6 184	86.4 190	89.5 197	92.3 203
1.75 5'9"	58.2 128	61.4 135	64.5 142	67.7 149	70.5 155	73.6 162	76.8 169	80.0 176	82.7 182	85.9 189	89.1 196	92.3 203	95.0 209
1.78 5'10"	60.0 132	63.2 139	66.4 146	69.5 153	72.7 160	75.9 167	79.1 174	82.3 181	85.5 188	88.6 195	91.8 202	95.0 209	98.2 216

	HEALTHY WEIGHT						OVERWEIGHT					OBESE	
BMI	19	20	21	22	23	24	25	26	27	28	29	30	31

HEIGHT WEIGHT
(m/ft-in) (kg/lb)

1.80 5'11"	61.8	65.0	68.2	71.4	75.0	78.2	81.4	84.5	87.7	90.9	94.5	97.7	100.9
	136	143	150	157	165	172	179	186	193	200	208	215	222
1.83 6'0"	63.6	66.8	70.0	73.6	76.8	80.5	83.6	86.8	90.5	93.6	96.8	100.5	103.6
	140	147	154	162	169	177	184	191	199	206	213	221	228
1.85 6'1"	65.5	68.6	72.3	75.5	79.1	82.7	85.9	89.5	93.2	96.4	99.5	103.2	106.8
	144	151	159	166	174	182	189	197	205	212	219	227	235
1.88 6'2"	67.3	70.9	74.1	77.7	81.4	84.5	88.2	91.8	95.5	99.1	102.3	105.9	109.5
	148	156	163	171	179	186	194	202	210	218	225	233	241
1.91 6'3"	69.1	72.7	76.4	80.0	83.6	87.3	90.9	94.5	98.2	101.8	105.5	109.1	112.7
	152	160	168	176	184	192	200	208	216	224	232	240	248
1.93 6'4"	70.9	74.5	78.2	81.8	85.9	89.5	93.2	96.8	100.5	104.5	108.2	111.8	115.5
	156	164	172	180	189	197	205	213	221	230	238	246	254

*Weight is measured with underwear but no shoes.

My weight

My BMI category

What is BMI?

- BMI measures weight in relation to height.
- The BMI ranges for adults show that the risk for cardiovascular disease increases at higher levels of BMI (overweight and obesity).

Waist circumference:

A waist measurement of more than 88.9 cm (35 inches) for women and more than 101.6 cm (40 inches) for men is high. A high waist measurement increases your risk for heart disease.

My waist measurement

What does your BMI mean?

Healthy weight (BMI from 18.5 to 24.9)

Good for you! Try not to gain weight.

Overweight (BMI from 25 to 29.9)

Do not gain any weight, especially if your waist measurement is high. You need to lose weight if you have two or more risk factors and:

- Are overweight, or
- Have a high waist measurement

Ask your doctor or dietitian for help.

Obese (BMI is 30 or higher)

You need to lose weight slowly. Lose approximately 0.45 to 0.9 kg (1 to 2 pounds) a week. Ask your doctor or dietitian for help.

M. Heart Disease Risk Factors That You Can Do Something About

RISK FACTORS	FACTS YOU NEED TO KNOW	TAKE THESE STEPS TO PREVENT HEART DISEASE																		
<p>High blood pressure and Prehypertension</p> <p>High blood pressure is called the silent killer because it has no signs or symptoms, yet it can cause very serious illness.</p> <p>Prehypertension also has no signs or symptoms. You do not have high blood pressure yet but are likely to develop it in the future unless you adopt healthy lifestyle changes.</p>	<p>When your blood pressure is high, your heart works harder than it should to move blood to all parts of the body. If not treated, high blood pressure can lead to stroke (brain attack), heart attack, eye and kidney problems, and death.</p> <p>Check your blood pressure numbers (mmHg*):</p> <table border="1" data-bbox="451 674 899 835"> <thead> <tr> <th>Category</th> <th>Systolic</th> <th>Diastolic</th> </tr> </thead> <tbody> <tr> <td>Normal</td> <td><120</td> <td><80</td> </tr> <tr> <td>Prehypertension</td> <td>120 – 139</td> <td>80 – 89</td> </tr> <tr> <td>Hypertension</td> <td>≥140</td> <td>≥90</td> </tr> </tbody> </table> <p>*Millimeters of mercury</p>	Category	Systolic	Diastolic	Normal	<120	<80	Prehypertension	120 – 139	80 – 89	Hypertension	≥140	≥90	<ul style="list-style-type: none"> ■ Check your blood pressure at least every 2 years. If you have high blood pressure or prehypertension, have your health care provider check your blood pressure regularly and more often. ■ Choose and prepare foods with little or no salt and sodium. ■ Eat more fruits, vegetables, whole grains, low-fat or fat-free milk and milk products within your calorie requirements. ■ Aim for a healthy weight. ■ Be physically active at least 30 minutes on most, preferably all, days of the week. ■ If you drink alcohol, do so in moderation. ■ If your doctor prescribes blood pressure medicine, take it as prescribed. ■ If you smoke, stop smoking now or cut back gradually. 						
Category	Systolic	Diastolic																		
Normal	<120	<80																		
Prehypertension	120 – 139	80 – 89																		
Hypertension	≥140	≥90																		
<p>High blood cholesterol</p> <p>Cholesterol in your arteries is like rust in a pipe. When there is too much cholesterol in the blood, the arteries become clogged, which leads to heart disease.</p>	<p>Check your total cholesterol numbers (mg/dL):</p> <table border="1" data-bbox="451 1108 899 1224"> <tbody> <tr> <td>Desirable</td> <td><200</td> </tr> <tr> <td>Borderline high</td> <td>200 – 239</td> </tr> <tr> <td>High</td> <td>≥240</td> </tr> </tbody> </table> <p>Check your LDL cholesterol numbers (mg/dL):</p> <table border="1" data-bbox="451 1325 899 1612"> <tbody> <tr> <td>Optimal (for people at very high risk for heart disease)</td> <td><70</td> </tr> <tr> <td>Optimal (for people at high risk for heart disease)</td> <td><100</td> </tr> <tr> <td>Near optimal</td> <td>100 – 129</td> </tr> <tr> <td>Borderline high</td> <td>130 – 159</td> </tr> <tr> <td>High</td> <td>160 – 189</td> </tr> <tr> <td>Very high</td> <td>≥190</td> </tr> </tbody> </table> <p>HDL cholesterol levels of 60 mg/dL or more help lower your risk for heart disease, while a level less than 40 mg/dL is a major risk factor for heart disease.</p> <p>Triglycerides A normal triglyceride level is less than 150 mg/dL.</p>	Desirable	<200	Borderline high	200 – 239	High	≥240	Optimal (for people at very high risk for heart disease)	<70	Optimal (for people at high risk for heart disease)	<100	Near optimal	100 – 129	Borderline high	130 – 159	High	160 – 189	Very high	≥190	<ul style="list-style-type: none"> ■ A “lipoprotein profile,” which measures all of your cholesterol levels (total, LDL, and HDL) and triglycerides, can be done at a doctor’s office. ■ Get your blood cholesterol levels checked at least once every 5 years if you are age 20 or older. ■ Learn what your numbers mean. If they are high, ask your doctor how you can lower them. ■ Eat fewer foods high in saturated fat, <i>trans</i> fat, and cholesterol. ■ Stay physically active at least 30 minutes on most, preferably all, days of the week. ■ Aim for a healthy weight. <p>In addition to the above, this can help control triglycerides:</p> <ul style="list-style-type: none"> ■ Eat a heart healthy diet that is not too high in carbohydrates. High carbohydrate diets have been shown to play a role in raising triglycerides. Choose fiber-rich fruits and vegetables and whole grains often. ■ Avoid smoking and alcohol. Smoking raises triglycerides and lowers HDL cholesterol. Excess alcohol also raises triglycerides.
Desirable	<200																			
Borderline high	200 – 239																			
High	≥240																			
Optimal (for people at very high risk for heart disease)	<70																			
Optimal (for people at high risk for heart disease)	<100																			
Near optimal	100 – 129																			
Borderline high	130 – 159																			
High	160 – 189																			
Very high	≥190																			

RISK FACTORS	FACTS YOU NEED TO KNOW	TAKE THESE STEPS TO PREVENT HEART DISEASE								
<p>Smoking You put your health, your family's health, and your friend's health at risk when you smoke.</p>	<p>Cigarette smoking is addictive. It harms your heart and lungs. It can raise your blood cholesterol and those of others around the smoker.</p>	<ul style="list-style-type: none"> ■ Stop smoking now or cut back gradually. ■ If you can't quit the first time, keep trying. ■ If you don't smoke, don't start. 								
<p>Physical inactivity Physical inactivity can double your chances of heart disease and can take away years from your life.</p>	<ul style="list-style-type: none"> ■ Physical inactivity increases your risk of high blood pressure, high blood cholesterol, and diabetes. ■ Adults should do at least 30 minutes of moderate physical activity on most, preferably all, days of the week. ■ Children should aim for 60 minutes of moderate physical activity each day. 	<ul style="list-style-type: none"> ■ Stay physically active. You can build up to 30 minutes on most, preferably all, days of the week by being physically active for at least 10 minutes three times a day. ■ Try walking, biking, swimming, and playing soccer. 								
<p>Overweight Check your BMI to see if you are overweight. Being overweight increases your risk of developing high blood pressure, high blood cholesterol, heart disease, stroke, and diabetes.</p>	<p>Check your BMI and waist circumference:</p> <table border="1" data-bbox="553 873 1000 1041"> <thead> <tr> <th>Category</th> <th>BMI</th> </tr> </thead> <tbody> <tr> <td>Normal</td> <td>18.5 – 24.9</td> </tr> <tr> <td>Overweight</td> <td>25 – 29.9</td> </tr> <tr> <td>Obese</td> <td>≥30</td> </tr> </tbody> </table> <p>A waist measurement of more than 88.9 cm (35 inches) for a woman and more than 101.6 cm (40 inches) for a man increases the risk of heart disease.</p>	Category	BMI	Normal	18.5 – 24.9	Overweight	25 – 29.9	Obese	≥30	<ul style="list-style-type: none"> ■ Get your BMI and waist circumference measured. ■ Keep a healthy weight. Try not to gain extra weight. ■ If you are overweight, try to lose weight slowly. Lose approximately 0.45 to 0.9 kg (1 to 2 pounds) a week. ■ Eat sensible portions and be physically active every day.
Category	BMI									
Normal	18.5 – 24.9									
Overweight	25 – 29.9									
Obese	≥30									
<p>Diabetes Blood sugar is high because it cannot move into body cells and be burned as fuel.</p>	<ul style="list-style-type: none"> ■ Diabetes is serious; you may not know that you have it. It can lead to heart attacks, blindness, amputations, and kidney disease. ■ Being overweight is a major risk factor for diabetes. 	<ul style="list-style-type: none"> ■ Find out if you have diabetes. ■ Get your blood sugar level checked every year, beginning at age 45. You should be tested at a younger age and more often if you are at risk for diabetes. 								

Additional Resources

The NHLBI Health Information Center is a service of the National Heart, Lung, and Blood Institute of the National Institutes of Health. The Health Information Center provides information to health professionals, patients, and the public about the treatment, diagnosis, and prevention of heart, lung, and blood diseases.

NHLBI Health Information Center
P.O. Box 30105
Bethesda, MD 20824-0105
Phone: (301) 592-8573
TTY: (240) 629-3255
Fax: (301) 592-8563
Web site: www.nhlbi.nih.gov

To learn more about the Vietnamese population and heart disease, look for the following publications on the NHLBI Web site: www.nhlbi.nih.gov.

Người Việt Nam Mong Muốn Có Trái Tim Khỏe Mạnh: Hãy Khám Kiểm Tra Tim—Biết Số Đo Huyết Áp Của Bạn
Vietnamese Aspire for Healthy Hearts: Keep Your Heart In Check—Know Your Blood Pressure Number (Publication No. 04-5201)

Người Việt Nam Mong Muốn Có Trái Tim Khỏe Mạnh: Siêng Năng Hoạt Động Để Trái Tim Khỏe Mạnh.
Vietnamese Aspire for Healthy Hearts: Be Active for a Healthier Heart (Publication No. 04-5202)

Người Việt Nam Mong Muốn Có Trái Tim Khỏe Mạnh: Sống Lành Mạnh Với Dinh Dưỡng Tốt.
Vietnamese Aspire for Healthy Hearts: Serve Up a Healthy Life With Good Nutrition (Publication No. 04-5203)

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Cardiovascular Risk in the Vietnamese Community: Formative Research from Houston, Texas

Addressing Cardiovascular Health in Asian Americans and Pacific Islanders: A Background Report (Publication No. 00-3647)

Asian American and Pacific Islander Workshops Summary Report on Cardiovascular Health (Publication No. 01-3793)

For information on the impact of heart disease on other Asian American and Pacific Islander populations, please check the NHLBI Web site.

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