## **CHEER Intervention**

A major aim of the CHEER, Community Engagement and Outreach Core (CEOC) is to significantly improve the health knowledge and health promotion behaviors that adversely influence health disparities experienced by African Americans residing in the Memphis and Delta areas. The target population of the CEOC activities is public housing residents and congregants in the 38126 zip code. Our outreach activities are conducted in neighborhoods, agencies, and churches.

The CEOC enhances community partnerships among faith leaders and their congregations and facilitates community partnerships with public housing residents. The purpose of these initiatives is to draw on the wisdom and caring nature of faith communities and on the experiences of public housing communities to create long-term changes in health beliefs and practices that improve the health of communities. The CEOC team conducts focus groups engage community participants in discussions to identify their health needs.

The health risk of residents and congregations is assessed using an established health risk appraisal. The health risk assessment (HRA) questionnaire gives individuals information about their current health and quality of life. Participants receive a customized report that shows areas of their health that they are doing well with and areas they need to improve upon. The report provides recommended lifestyle changes that individuals can use as health goals to accomplish during participation in a wellness program. The CEOC team then helps participants to identify intentions to change behavior, explore their attitudes about the behavior, and determine motivations for adhering to their plan to change their health. The CEOC team also teaches each individual to integrate behavioral changes into their personal plan, identify opportunities and resources, and provides them with skills to make the desired change.

The CEOC leaders, Drs. Muriel Rice and Mona Wicks enhance community-engagement health promotion strategies by training community health lay workers to help participants monitor health concerns and adopt a healthier lifestyle. Community health lay workers are key component on the CHEER, CEOC intervention team. These workers have been used for decades in the U.S. to foster the health of a community, especially communities that face many health and economic challenges. Community health lay works participate in activities to help assess and educate community residents and congregants. They also assist with health screening and assessments.

The diversity of our CHLWs enhances the fusion of different perspectives to tackle health issues in the 38126 zip code. Our CHLWs include three public housing residents living in the 38126 zip code area, five students from the University of Tennessee Health Science Center (two nursing students, one pharmacy student, one dual pharmacy/PhD student, and three undergraduate students from Lemoyne-Owen College).

Thus far, assessment data findings of public housing residents and congregants indicate that the primary health issues these participants experience are overweight and obesity. Thus, the focal point of the 4-week intervention is to address health risk behaviors related to poor nutrition and the lack of adequate exercise. The team developed a nutrition jeopardy game. Participants play the Jeopardy Nutrition Game during the first week of the intervention. The game has four categories: food groups, exercise, barriers to changing risk behaviors, and wellness. Questions were developed for the nutrition game to address relevant content in each of these categories. Intervention participants enjoy the game and to date have demonstrated extensive knowledge about this health promotion information. The second-week intervention activity is the Walk to Win Challenge. During this session individuals were given pedometers and log sheets. Detailed instructions about how to operate the pedometers and log their steps over a three-week period were also provided. Team members also suggest strategies to increase their movement/steps. During the third week of the intervention, participants are guided through an electronic nutrition activity about reading the nutritional content on food labels. Residents are then asked to practice this skill for one week. The final intervention session involves more discussion and practice related to reading food labels and the exercise DVD, Sweating to the Spirit was viewed. Each participant was given a copy of this DVD. Participants who were unable to do movements that were demonstrated in the DVD were given CDs that contained alternative forms of exercise.