



“When you start teaching [people] about sodium and their blood pressure, and when they see the results themselves, they quickly get on board.”

—Margarita Hart, Director, Esperanza Ministries

Problem

Every day, 9 out of 10 Americans consume more sodium than recommended. A diet high in sodium increases the risk for high blood pressure, a major contributor to heart disease and stroke. Heart disease is the leading cause of death in Indiana—and the nation.

Project

In January 2011, the Indiana State Department of Health (ISDH) funded a community-based sodium reduction initiative to improve blood pressure control and cardiovascular health outcomes. The pilot program focused on Hispanic restaurants, grocery stores, and families in Johnson County.

Outcomes

The program increased consumer knowledge and awareness of the negative health effects of a high-sodium diet. Survey results showed positive intention to change food purchasing behavior, which may lead to improvements in blood pressure from lower sodium intake.

Resources

- Centers for Disease Control and Prevention: Salt www.cdc.gov/salt

**For more information please contact
Centers for Disease Control and Prevention**

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Statement of Problem: Uncontrolled high blood pressure can lead to heart disease and stroke, two of the nation's leading causes of death and an expensive problem in Indiana. For example, the projected total cost of treating heart disease in Indiana in 2012 is more than \$6.7 billion, on the basis of treatment costs and lost productivity. The projected cost for stroke is \$1.25 billion.

In general, reducing sodium intake results in lower blood pressure. The Indiana State Department of Health (ISDH) launched its sodium reduction initiative in January 2011 to raise awareness of the need for blood pressure checks and to reduce sodium intake to improve cardiovascular health outcomes for residents throughout the state.

Project Description: The goal of the pilot program was to reduce sodium consumption among Johnson County's Hispanic population by 10% over 9 months. Because more than 75% of Americans' sodium intake comes from processed and restaurant foods, efforts focused on providing education about sodium to employees and patrons of restaurants and grocery stores serving primarily Hispanic customers, including identifying sources of sodium and modifying recipes. Support for the project involved multiple collaborators, including the ISDH Division of Chronic Disease Prevention and Control as well as the Partnership for a Healthier Johnson County and Esperanza Ministries.

Key initiatives from the first two phases of the pilot program included

- Engaging local Hispanic grocery stores and restaurants as partners, including dissemination of voluntary, culturally appropriate signage for menus and shelf labels in stores to encourage consumers to choose lower sodium products.
- Educating consumers on how to read nutrition labels and partnering with a local grocery store to conduct classes.
- Educating restaurant staff, managers, and owners about choosing lower sodium ingredients, such as replacing refried beans with black beans and using corn tortillas instead of flour varieties.
- Developing and distributing 2,000 bilingual tool kits, which included information on sodium reduction, traditional Hispanic recipes using lower sodium ingredients, and local grocery store and restaurant sodium advertisements as well as product coupons.

Phase 3 of the program will take an environmental approach, using CDC's Community Health Assessment and Group Evaluation (CHANGE) tool to conduct a health needs assessment in the community and engage stakeholders to address sodium reduction and increase access to lower sodium choices.

Outcomes: Survey respondents reported that the program increased their awareness of the need to reduce their sodium intake. Respondents also indicated that they will make healthier food choices and buy lower sodium foods in the future. The program is developing a follow-up survey to capture additional information about participants' actual behavior change.

Fifteen participants also tracked their blood pressure levels before and after the program. The majority of these participants experienced a decrease in blood pressure 4 months after the intervention.

Given the success of the pilot program, plans are under way to expand the initiative in additional communities in Indiana.