

# Check. Change. Control.® Overview

There are nearly 80 million Americans with hypertension.

- 1 in 3 adults have high blood pressure
- Of the patients that are aware and are being treated for high blood pressure, almost half are not at goal. Current rate of patients with blood pressure in control is 54%.
- High blood pressure, or hypertension, is an independent risk factor for heart disease and stroke, but even a 5 mmHg decrease in blood pressure can reduce mortality due to heart disease and stroke by 9% and 14% respectively (INTERSALT, *Hypertension*, 1991).
- Hypertension disproportionately affects the African-American community with over 45% of African-American males and 46% of African-American females affected by high blood pressure compared to a national rate of 33%.



The purpose of this program is to eliminate high blood pressure as a health disparity among Americans and help achieve the goal of improving cardiovascular health by 20%, while reducing cardiovascular mortality by 20% by 2020 (AHA 2020 Impact Goal).

The AHA/ASA launched the first phase of The High Blood Pressure program in August 2012, with a focus on top markets nationwide. As of June 2016, the program expanded to over 100 markets, 50,000 + participants enrolled, more than 163,000 blood pressure readings taken with an average drop in systolic BP of 11 mmHg.

**The Check. Change. Control. Program is**

- An **evidence-based** program, based on the success of the program over the past 4 years,
- Designed to establish **community partnerships and meaningful volunteer roles**, and is
- Focused on **innovation** using online trackers and **sustainability**.

## **FOUNDATIONAL PRINCIPLES AND BEST PRACTICES GUIDING CHECK. CHANGE. CONTROL.**

**The Check. Change. Control. Program** is based on best practices learned from the AHA's Check It, Change It pilot, principles for volunteer engagement through the successes of AHA's Multicultural work, as well as other successful community-based programs identified through recent science literature reviews.

**Key evidence-based scientific principles foundational to the program include:**

1. The practice of self-monitoring and tracking of blood pressure readings at home or outside of the healthcare provider office setting.
2. Use of a digital self-monitoring tool to track blood pressure readings.
3. The practice of self-management skills related to blood pressure management.
4. Use of health mentors to motivate and encourage participants.
5. Attention to multi-cultural issues that result in hypertension being a health disparity for African-Americans.

Sign up for the Check. Change. Control.® Tracker at [www.heart.org/cc](http://www.heart.org/cc)

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