

Health Fairs and Preconception, Prenatal and Child Health

An Overview of Effectiveness, Strategies and Examples



This is one in a series of Best Start Resource Centre “How to” guides that focus on skill development to help service providers address specific strategies for preconception, prenatal and child health.

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ACKNOWLEDGEMENTS

This guide could not have been developed without the contributions of the many service providers who offered their expertise, reports, evaluations, checklists and photos. A number of people also reviewed this resource and added practical suggestions along the way. The Best Start Resource Centre gratefully acknowledges the contributions of the following organizations:

- City of Hamilton – Public Health Services
- Community Health Services Department of Lambton County
- Eastern Ontario Health Unit
- Elgin St-Thomas Health Unit
- Fort William First Nations Health Centre
- Haldimand-Norfolk Health Unit
- Northwestern Health Unit
- Perth District Health Unit and the Huron Perth Healthy Babies Healthy Children Early Identification Committee
- Peterborough County-City Health Unit
- Region of Waterloo Public Health
- Sudbury and District Health Unit
- Thunder Bay and District Health Unit

Project Lead

Louise Choquette, Bilingual Health Promotion Consultant, Best Start Resource Centre

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Citation

Best Start Resource Centre (2009). *Health Fairs – Are they effective in improving preconception, prenatal and child health?* Toronto: Best Start Resource Centre.

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This document has been prepared with funds provided by the Government of Ontario.

INTRODUCTION



Health fairs have been used across Ontario to increase awareness of certain health issues and to provide information on various health and community services. Health fairs generally consist of a number of exhibits from service providers; workshops are sometimes also offered.

This document examines the evidence for health fairs and shares information from service providers who use health fairs as part of their range of maternal-child services. Such fairs are offered to men and women who are planning a pregnancy, expecting a baby or who have a young child. Some of these health fairs were implemented to meet some of the Ministry of Health's Mandatory Health Programs and Services Guidelines (Ontario Ministry of Health, 1997).

As compared to other health promotion approaches, there are some advantages to health fairs including:

- The ability to reach a large number of people at one time, resulting in cost-effectiveness.
- The enhanced visibility of the partner organizations and exhibitors.
- The opportunity for participants to speak to a range of health professionals.
- The ability to showcase a wide variety of health topics and exhibitors in one place. (City of Hamilton, 2007).

* The Ministry of Health and Long-Term Care updated these standards in 2008. They are now called the Ontario Public Health Standards and are available at: http://www.health.gov.on.ca/english/providers/program/pubhealth/oph_standards/ophs/progstds/pdfs/ophs_2008.pdf

ARE HEALTH FAIRS EFFECTIVE?

Effectiveness of Health Fairs

The purpose of this section is to offer information on the effectiveness of health fairs. It provides an overview based on what is available in the literature and offers findings from communities around Ontario. Overall effectiveness of health fairs is difficult to gauge for several reasons. There are very few studies in peer-reviewed journals that assess behaviour change resulting from attendance at a health fair. There are, however, numerous examples of studies of health fairs that evaluate participants' satisfaction, knowledge gained and awareness of community services. Few, if any studies employ a comparison group. Each health fair is unique with respect to its focus, its audience and community, making generalizations problematic. Health fairs are often a component of an overall health promotion strategy and not a stand alone initiative to influence behaviour.

The Health Communication Unit reviewed the literature available on health fairs and provides the following summary of one major research article: "The effectiveness of a health fair will depend on its purpose and the intended objectives. Health fairs can be an effective and cost efficient health promotion strategy. Health fairs can be effective for creating awareness, providing information, screening, increasing publicity, identifying future health maintenance program needs, maintaining an interest in health, reducing health care costs and sometimes changing behaviour. To enhance effectiveness, health fairs must have well-trained screening personnel, comprehensive interpretation of screening results, high levels of one-on-one interaction with visitors, a well-designed floor plan and lots of space" (Summary of Carter, 1991 review by THCU, 2003).

The following examples provide evidence that health fairs may be effective in serving populations who are difficult to reach, improving health behaviours and reaching minority groups.

- **Reaching a clientele through screening and partnerships** – In 2006, in East Harlem in New York City, a large-scale health fair was organized through collaboration between a nursing school, a hospital and a large number of community partners. The purpose of the health fair was to reach an adult clientele that was difficult to reach as they often did not have health insurance. Nursing faculty worked side by side with undergraduate nursing students to offer several health promotion activities, screening, and educational sessions for local residents, including skill-building activities such as hand-washing hygiene and glucometer usage. The event was very successful and helped meet the health needs of urban community residents. An unexpected outcome of the health fair was the partnerships developed through the planning and the interest of the partners to stay involved in that community (Aponte and Nickitas, 2007). It is important to point out that not all the outcomes of this study may be applicable to the Canadian context. Similar health fairs held in the States reported similar results: access to screening tests is increased (Young 2006; Dulin et al. 2006; McKeever et al, 2006) or partnerships and expertise are developed by the agencies offering the health fairs (Maltby, 2006).



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- **Improving health behaviours** – In some cases, follow-up surveys were conducted with participants who had taken part in health fairs offering screening and testing. These have shown improved health behaviours (Hussey et al, 1987; Bryan et al, 1991; Ness et al, 2003).

The study from Hussey indicated that 12 months after participating in a health fair where fitness testing and a computerized lifestyle assessment were offered, 27% of the participants exercised more and 37% improved their diet. Of the sub-group of smokers, 20% decreased their smoking and 40% stopped smoking (Hussey et al, 1987).

In the study from Bryan, a follow-up survey of participants 8 to 10 weeks after a health fair revealed that 78% identified to be at high risk made at least two health behaviour changes (Bryan et al., 1991).

In the study from Ness, a 30-day follow-up call was made to older adults who attended a health fair and learned how to reduce their risk for falls. Seventy-two percent (72%) of the participants indicated implementing at least one of the risk-reduction behaviour. The high-risk group was more likely to have implemented risk-reduction behaviours than the low-risk group (Ness et al, 2003).

- **Reaching minority groups** – A study was done in Scotland on a successful health fair provided at a mosque (Ghouri, 2005). The high community participation showed that people from ethnic minorities will participate in health-related activities arranged for them. Similar outcomes were attained at a health fair for African-Americans called the “Wellness Village” in Portland, Oregon. Participants reported that a culturally sensitive environment that inspires trust is the reason they preferred the screenings offered at the Wellness Village. The evaluations indicated that the social aspects of the Wellness Village were very important and organizers have added emphasis on events such as church choir performances, African dancing, salsa dance lessons, and food tasting (McKeever et al, 2006).

Ignace Heart Health Fair

In smaller communities, a health fair can be a main event, especially if a large number of partners are involved. Ignace is a small community in northwestern Ontario. The Ignace Heart Health Fair was held annually on a Saturday in February as a kick-off event for the winter carnival. The venue was the recreation centre, which included a skating rink, a 2-lane bowling alley, kitchen facilities, a large hall and an unused curling rink. The fair gained a lot of publicity for its ability to encompass many community partners and coordinate several events into one. In addition to displays, the main fair included a heart healthy dessert bake-off contest, a low-fat vs. high-fat taste test challenge, a children’s poster contest, etc. Other activities included Jump Rope for Heart, free bowling and a sports development camp on the skating rink. Lunch was prepared by a group of senior ladies and the proceeds were donated to the Ignace Public School Lunch Program. In addition, fruit salad was made by the Ignace Roman Catholic Separate School and all the proceeds went to their snack program. The Ignace Winter Carnival Heart Health Community Challenge also kicked off on the first day of the winter carnival and ran throughout carnival week.

From Northwestern Health Unit

Fort William First Nation Health Fair

This community-wide health fair is held every June. It is primarily held to reach the Fort William First Nations residents but everyone from the Thunder Bay area is invited to attend. Many health topics are covered, with a focus on parents. The fair begins with a smudging ceremony and ends with closing remarks and a drumming ceremony. The fair becomes a community event as it also includes activities for the children, an elders' bingo and a lunch feast, an important component of the event. There are draws for a fundraiser as well as draws by the exhibitors at the end, prior to the closing remarks. Thank you gifts are offered to the exhibitors for attending the event.

From Fort William First Nations Health Centre and Thunder Bay and District Health Unit

Effectiveness of Prenatal Health Fairs

The purpose of prenatal health fairs is to provide information in pregnancy about healthy choices and to inform future parents of related health and community services. In many cases, health information is also available for couples planning a pregnancy.

The prenatal health fair is one of many sources of information for pregnant women and the messages are reinforced by the various service providers, which helps increase the awareness.

Pregnant women (16 weeks or less) like to receive information on prenatal health topics; pamphlets, demonstrations, videos, speakers, and displays are the preferred methods of receiving that information (Camiletti and Alder, 1999).

- The Middlesex-London Health Unit, in partnership with the Community Coalition for Healthy Pregnancy, initiated prenatal health fairs in December 1997. Prenatal health fair participants were asked to complete an evaluation form. One of the questions asked whether or not the women planned to make any changes or decisions as a result of information they received at the prenatal health fair. A telephone survey was implemented four to eight weeks after the health fair to assess whether or not participants had made any health changes. Half of the women interviewed indicated that they were pregnant 16 weeks or less at the time of attending the prenatal health fair.

Seventy-nine (79%) percent of the women who participated in the follow-up telephone survey indicated that they had made healthier choices for themselves and their baby as a result of attending a prenatal health fair. Women planning a pregnancy most frequently indicated that they improved their nutrition (73.0%), started taking folic acid (40.5%), started taking vitamins (37.8%) and improved or modified their physical activity (40.5%).

Women who were pregnant 16 weeks or less, frequently reported that they had improved their nutrition (69.5%), improved or modified their physical activity (46.9%), and registered for prenatal classes (42.2%).

Women who were more than 16 weeks pregnant reported improving their nutrition (59.3%), improving or modifying their physical activity (45.3%), signing up for prenatal classes (32.6%), using the coping skills that they learned at the prenatal health fair (41.9%), and deciding to breastfeed (40.7%). Some women indicated that as a result of attending the prenatal health fair they had made some other decisions e.g., using a midwife or doula, using cloth diapers, having partners planning to attend the Dad Classes, having partners smoking outside the home (McHale et al, 2001).

- The Region of Waterloo has been offering prenatal health fairs since 2000 and has reached over 11,000 individuals. An average of 600 people now attend each fair. At the June 2007 fair, approximately 75% of the pregnant women were more than 17 weeks pregnant. Over time, the group indicating that they were planning a pregnancy has decreased from 22% in 2001 to 7% in 2007 (Region of Waterloo Public Health – 2007).

In 2001, the Region of Waterloo did a complete evaluation of their prenatal health fairs, including a post-fair telephone interview. Forty-six percent (46%) of women indicated that attendance at the prenatal health fair

influenced them to make changes related to their health before or during pregnancy. These changes were particularly evident in the areas of improved eating habits, registration for prenatal classes, the decision to breastfeed and the modification or improvement of physical activity (Region of Waterloo Public Health – 2001).

- Elgin St-Thomas Health Unit has also organized prenatal health fairs, to provide early pregnancy health information and to increase awareness of the importance of healthy behaviours before conception and throughout pregnancy. Although the participants appreciated the information provided at the fair, only 14% of the pregnant women were less than 17 weeks pregnant and 11% were planning a pregnancy. They conclude that it may be necessary to further inform the health care providers and their nurses about the intent of the health fairs, which is to reach people early in their pregnancies or before pregnancy. This may encourage health care providers to mention the prenatal health fairs to women at their first prenatal visit (Coleman et al, 2001).



Region of Waterloo Public Health

Effectiveness of Rural Prenatal Health Fairs

It is generally more cost-effective to have large-scale fairs in large cities. Individuals living in rural areas may be unable to travel to larger centres to participate in a health fair however. In addition, some regions of the province do not have large cities.

- In 2008, The Region of Waterloo Public Health held their first rural health fair in Wellesley. A total of 78 people attended, of which 55% were pregnant and 8% were supporting a pregnant woman. There were six workshops offered at the fair and half of the participants attended the workshops. While 100% of survey respondents gave a positive overall rating of the fair, only 35% indicated that they planned to make a change based on what they learned at the fair. Participants may view the fairs as providing benefits other than behaviour changes, such as social interactions. The participants who attended workshops however, had a higher intent to change, varying from 40% (car seat safety) to 80% (comfort measures during labour and delivery). The workshops provide more in-depth coverage of a topic and may be more effective to foster behaviour change (Region of Waterloo Public Health, 2008).

Effectiveness of Child Health Fairs

Child health fairs have grown in popularity across Ontario. They are generally directed at parents of children up to six years old and involve some or all of the following:

- Screening on development and health issues such as oral health, vision and speech development.
- Information displays about child products such as car seats.
- Information on children's services such as childcare, recreation opportunities, schools, Ontario Early Years Centres.
- Information on healthy child development such as parenting, literacy, healthy eating, immunization and safety.

The displays are often complemented by workshops and presentations. Childcare and a play area are sometimes provided.

- An example of a child health fair is Perth and Huron County's "Calling All Three Year Olds" initiative. This fair is specifically designed for children who are 3 years old and aims to detect any developmental issues prior to school entry. This event is held in association with kindergarten registration and involves several community partners, including both publicly funded English-language Boards of Education. Children are screened with the Nipissing District Developmental Screening tool and all children who are at risk developmentally can be referred to an appropriate community service. The fair also helps raise the parents' awareness of child development and health risks and informs them of local children's services.



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In 2005, twelve percent (12%) of the 1000 children who participated were identified with developmental delays. 50% were newly identified concerns. Children most often screened positive for delays in speech/language and social/emotional development (Wilkerson, 2005). By 2007, approximately 80% of the children who were expected to start school the next year attended one of the fairs. In 2007, 98% of parents who completed an evaluation questionnaire indicated that they learned something new at the fair about their child's development. Specifically, they learned about:

- activities to do with their child (45%);
- speech and language (41%);
- fine motor (24%); and
- social / emotional / behaviour (23%).

From 2005 to 2007, positive screenings decreased from 12% to 7.5%. Over that time period, there was an increase in the proportion of parents who linked with recommended services within eight weeks of the fair (63% in 2007 vs 42% in 2005) (Gaylor, 2005, 2006, 2007).

- Since 2003, the Region of Waterloo has hosted approximately seven child health fairs per year. The purpose of these fairs is to ensure children under the age of six are reaching their developmental milestones and to refer children to the appropriate services as required. Follow-up by a Public Health Nurse is provided for families where the children have specific developmental concerns (e.g. speech, behaviour) to ensure they are able to access services. Some of these child health fairs were designed specifically for multicultural families.

Their evaluation data from 2005-2006 (12 Fairs) indicates that 9% of children were recommended for a follow-up phone call as they screened positive on at least one area (Region of Waterloo Public Health, 2006).

The evaluation data indicates that 80% of the parents learned about programs or agencies which may help themselves or someone they know and 52% planned to contact at least one of the agencies they saw at the fair (Region of Waterloo Public Health, 2007).

Effectiveness of Combination Prenatal and Child Health Fairs

In some areas of Ontario, local partners provide health fairs which combine prenatal information and child health information. This creates less work for the organizations involved and provides “one-stop-shopping” for the participants.

- Public Health Services of the City of Hamilton has provided prenatal health fairs since 2004 and expanded these in 2006 to include child health issues. A participant survey in 2007 indicated that participants wanted the health fairs to continue (100%), would recommend the health fairs to a friend (98.3%), and had received the information they had hoped for (92%). People with higher education were more likely to attend the health fair: 70% had a college or university degree. People who lived in more affluent neighbourhoods were more likely to attend the fair, as indicated by using Hamilton postal code, census and live birth data to compare the social circumstances of attendees with the Health fair target population. Furthermore, approximately half of the health fair participants were already connected to a City of Hamilton program displayed at the fair (Public Health Services – City of Hamilton, 2007).



Sudbury and District Health Unit



Perth District Health Unit

Discussion on Effectiveness

There is very little literature on the effectiveness of health fairs in general, and even less on prenatal and child health fairs. None of the studies had comparison populations, or compared the effectiveness with other approaches to prenatal and parenting education. There is some evidence for the effectiveness in increasing awareness, sharing educational information and forming partnerships. Health fairs do provide a very good way to connect people to services. There is less information to support links to behaviour change, but the studies do point to some effectiveness, at least in the short term.

Based on the current available literature, health fairs reach a higher proportion of people with middle and high incomes and a lower proportion of people with low incomes. They may not be as effective in reaching populations at higher risk. Alternative health promotion strategies such as Prenatal Nutrition Programs or Teen Prenatal Classes may be more appropriate to reach these groups.

It appears that prenatal health fairs reach a low proportion of couples before pregnancy and in the early stages of pregnancy. This may have to do with the timing: in many areas, prenatal fairs are only offered once or twice a year. In addition, the woman may not wish to let others know of her intent to conceive or of her early pregnancy status, especially in smaller communities. Additional promotion through health care providers to reach women in early pregnancy may be needed.

Health fairs need to be part of a continuum of services such as first trimester prenatal packages, prenatal education for labour and delivery, education through prenatal care, support to families at risk, home visiting, education through Early Years Centres, etc., in order to improve the reproductive and child health outcomes.



Region of Waterloo Public Health

In summary:

- There are not many studies on the effectiveness of health fairs.
- Because each health fair is different, it is difficult to give a general rating of effectiveness.
- The effectiveness will depend on the goals and objectives of the fair.
- The health fair is one of many sources of information for people and can be part of a comprehensive health promotion approach.

STRATEGIES FOR PLANNING HEALTH FAIRS

This section will help those planning health fairs on preconception, prenatal and newborn health, as well as early childhood development. These suggestions were gathered from the literature, health fair evaluation reports and people who have organized a large number of fairs.

Tips on Getting Started

- Start planning early. For the first health fair on a new theme, establish a planning committee approximately 6-12 months in advance. See Appendix 1 – Sample Timeline Chart.
- Invite representatives from health agencies and key stakeholders associated with your population of interest to join the planning committee. Depending on the theme, these may be Ontario Early Years Centres, daycares, schools, businesses, workplaces or others. Involving some members of the population of interest on the planning committee is also helpful.
- The success of a health fair will depend on its goals and objectives. Take the time to establish these.
- Define the population of interest. Is it women in the early stages of pregnancy? Children who will be registering for kindergarten? New parents? Newcomers in the early stages of pregnancy?
- It is worth taking the time to plan ahead. This will result in time savings later. Map out timelines to help you foresee problems and work them out ahead of time.
- The continuity of coordination is a key element of the success of on-going fairs. It is very helpful to have the same person be the contact person for exhibitors and partners over time.
- Review evaluation information from previous events to determine topics of interest, etc.
- Determine ways to involve volunteers and keep them informed.

Health fairs, as all quality programs, require goal clarification, parameter and partner identification, target audience definition, objective setting, resource mobilization, strategy/ activities selection, promotion, and evaluation.

Goldman & Schmalz, 2004

By the time the City of Hamilton Public Health Services were planning their third health fair, they no longer needed a planning committee. Two public health nurses could implement their well-designed plan. The committee became a communication tool to get the information to community partners.

From City of Hamilton, Public Health Services

Tips on Health Fair Venue and Timing

- Plan the date of your fair so it doesn't conflict with religious holidays or other events reaching the same population of interest. Select the time of day and of the week to fit the availability of the population of interest.
- The choice of the venue is very important. Choose a venue that is safe for young children, has breastfeeding and diaper change areas and is easily accessible with strollers and people living with a disability. Consider the accessibility to public transportation and parking. If you choose to use a shopping mall or community centre during busy hours, keep in mind the distractions may detract from your fair.
- Location also needs to respond to the population of interest. This decision can be based on geographic distribution of population using available statistical data or other information that will identify places, geographical areas where this population lives or congregates.
- Visit the location in advance. Check for sufficient space, ease of access, washroom location, location and number electrical outlets and food handling requirements (refrigerator, hand-washing, etc.), trash cans and emergency exits.
- See if the rental location provides table set-up and table toppers as this will reduce the work on the fair day.
- Plan the fair layout to facilitate traffic flow. Consider the possibility of referrals among various booths at the fair when looking at traffic flow.
- If planning video viewing or workshops, consider availability of breakaway rooms.
- Have an area for participants to sit as pregnant women may need to rest often. Consider putting this area near the refreshments.
- Consider the need for coat check, lost and found, first aid, door prizes and name tags.
- If possible, avoid entry fees and facilitate transportation to decrease barriers for the population of interest.

Ways to Reduce Costs

Some hotels will rent out space at a reduced rate on certain nights of the week when the space typically sits vacant. You may be able to share the cost of the rental fee with other programs from your organization and/or charge a small fee from private business exhibitors.

From Peterborough County-City Health Unit

Tips on Health Fair Planning Logistics

- Keep an electronic and paper copy of checklists, contact information, previous flyers, handouts, nametags, etc., to facilitate planning a subsequent fair.
- If a number of displays are coming from one organization, consider having a courier handle the pick up and drop off from a central location.

- Develop a task list for the day of the fair, to ensure everyone knows the timing of events and the expectations.
- Consider having nutritious snacks available for participants and exhibitors. Check with the environmental health department of your public health unit regarding food safety issues. As a minimum, water should be provided to both.
- Prepare a kit for the fair day which will include additional general supplies such as: pens, paper, blank name tags, adhesive, paper clips, markers, extension cords, stapler, etc.
- Invite local media and prepare media packages. Include a copy of the media release, the objectives and goal of the fair, as well as backgrounder information such as key issues in your area, how often fairs run, where media and the population can get more health information, etc.
- Have a debriefing session at the end of each fair and make note of successes and gaps to help plan the next fair.

Tips on Health Fair Staffing and Volunteers

- Identify the languages that staff and volunteers can speak, in case there is a need for translation. Promote this service in your advertising and upon fair entry. Ensure all exhibitors are aware of who the interpreters are. Consider using nametags identifying the languages spoken by the volunteers and exhibitors.
- Indicate clearly the process and policies for reimbursement of expenses to committee members, volunteers, etc.
- Consider using high school students, seniors and nursing students as volunteers. Rotate volunteer tasks to minimize boredom.
- Develop a volunteer sign-in list to use on fair day with full addresses and contact information. This will be useful when the time comes to send thank you notes and to recruit for the subsequent fairs.
- Consider offering some simple form of visual recognition for all volunteers and exhibitors: name tag, t-shirt, hat, scarf, etc.
- Have greeters at the entrance to welcome participants, explain the purpose of the event, the location of displays and bathrooms, and to move traffic through.
- Have a back-up plan for last-minute changes to exhibitors and staff in case of illness or similar inconvenience.
- Send thank you notes to exhibitors, staff, volunteers, prize donors, etc. Consider sending collated summary of feedback from fair participants to fair exhibitors.

Planning Guides

A number of general health fair planning guides are available on the Internet. A particularly comprehensive one is the "Health Fair Planning Guide" from the Family and Consumer Sciences of the Texas AgriLife Extension Service.

It is available at: fcs.tamu.edu/Health/health_fair_planning_guide

Tips for Selecting and Supporting Exhibitors

- Prior to recruitment, define the types of organizations (e.g. not-for-profit vs. for-profit organizations) that you would like to have involved. Written policies will help to guide your work. See Appendix 2 – Sample Health Fair Exhibitor Policies and Appendix 3 – Sample Exhibitor Contract.
- Consider all of the risk factors or developmental issues related to your theme when you are choosing exhibitors etc.
- Ensure current issues are highlighted at the fair, especially if there has been some confusion or if the information is new, for example: sleeping positions, folic acid recommendations, plastics in children’s products, toxic elements in toys, car seat recommendations, etc.
- Select sponsors which meet your organization’s value. You may wish to create a sponsor policy in addition to an exhibitor policy.
- Ideally, the exhibitors will have insurance coverage specifically for the event, with the organizers named as an additional insured, as described in Appendix 3. Although this may be beneficial if an incident occurs, it may also deter smaller organizations to participate as exhibitors. Determine the risks involved and if coverage may already be available through the organizers or venue. If insurance is deemed essential, ensure the exhibitors are notified well in advance.
- Your exhibitor policy should indicate any restrictions on the giveaways. For example, small objects which can be swallowed by toddlers or which may contain toxic elements would not be suitable at a toddler health fair.
- Your exhibitor policy can address compliance with the WHO International Code of Marketing Breast-milk Substitutes if you wish to ensure the event is Baby Friendly. (www.who.int/nutrition/publications/code_english.pdf)
- The policy should clarify that there is no soliciting of sales or distribution of the participants’ contact information.
- Consider a scent-free policy.
- Minimize repetition between booths and ensure the messages are consistent.
- Plan your activities and displays according to your objectives. For example, if you want to increase awareness, a display with handouts may help meet that objective. If you want to increase skills, some hands-on activities may be necessary.
- If food demonstrations or distribution is done, check with the environmental health department of your local public health unit. A special event permit may be necessary.
- Additional entertainment such as music, dance demonstrations, should not deter from the main purpose of the fair and should not cause noise levels or traffic flow issues.



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- When planning the layout of the fair, avoid having two noisy booths side-by-side.
- Confirm if the exhibitor will have a table-top display or a stand-up display (from the floor) as the space requirements will be affected by a stand-up display.
- Consider the physical needs of the exhibitors: tables, tablecloths, chairs, electrical outlets, carts to move equipment, extension cords, storage space and a safe space for personal items such as purses. Clearly identify what you will provide.
- Offer volunteer help for exhibitors upon arrival and departure. Volunteers can help exhibitors with set up and take down as there are often bulky displays. Have extra trolleys to move heavier items.
- Clearly communicate to exhibitors the expectations for the day: set up times, take down times, if meals or snacks will be provided, where they can get food or coffee, etc.
- Provide a list of local service providers/exhibitors to participants. Create a floor map of the exhibitors. If the participants have limited time and are seeking specific information, this will make it easier.

Tips for Planning Displays

The following suggestions can be provided to the exhibitors as some may not have not participated in health fairs before and may be unsure of what type of display to bring.

- Identify the purpose of each display and the messages you wish to convey. The messages need to be clear. Many participants will spend less than a minute at each display. Ideally, they will engage both men and women.
- Try to offer an adequate number of displays to ensure participants do not have to line up at displays.
- As much as possible, offer hands-on education and demonstrations: how to make baby food, how to put a baby safely in a car seat, nutrition choices using food models, which pharmaceuticals are safe during pregnancy, how to bathe a newborn, etc. Participants will be drawn to displays where they can try something, such as wearing an empathy belly.
- Use a bold and clear sign which states the topic. Examples might be: “Check your child’s vision here.”, “Are you ready to be a dad?” or “Eating for two on a budget”.
- Make the name of the organization/business clearly visible on the display so fair participants know who is representing the topic.
- Invite participants to stop, by providing a simple interaction: “Try our free mocktails”, “Test your knowledge on breastfeeding” or “Take a look at a model of a fetus”. The exhibitor can provide additional information on the topic. Provide immediate feedback to their interaction: quiz answers, screening results, etc. As appropriate, encourage them to take preventative action to avoid future difficulties.
- Provide additional sources of information that participants can take away: a bookmark with a website address, a pamphlet explaining the topic in more detail, contact information for a community resource, etc.
- Provide a reusable bag for handouts and giveaways. Be conscious of the amount of paper being used.

- Displays should be visually attractive and colourful. The text should be readable from 8-10 feet away (3 meters).
- To be engaging, exhibitors should not sit behind their display table. They should be standing at the front of their display, near one of the ends. They should be looking at passer-bys and smiling to engage them to visit the display.
- If your display has a demonstration (e.g., bathing a newborn, making baby food), make sure you are in a location that will allow many people to watch at the same time.
- Participants love giveaways. Try to have useful ones which help bring the message home (wall calendars, fridge magnets, baby bibs, pedometers, etc.) and reinforce healthy behaviours (physical activity reminder, mocktail recipes, etc.).
- Provide flyers in a variety of languages, even if the fair is not considered a “multicultural” fair. Have displays which reflect the diversity of your potential participants.
- Ensure your display is adequately staffed at all times.
- Consider using “ready-made” displays. The Best Start Resource Centre has a number of displays available for loan on preconception, prenatal and child health. These displays are in French and English and need to be booked ahead of time (www.beststart.org/resources).
- Make note of participants’ questions and concerns. This will help you plan not only for the next health fair but also for service delivery in general.
- For specific design recommendations, see Appendix 4 – Design Recommendations for Displays.

Standalone Exhibits

Some general principles of interactive exhibits can be found on the Monstshire Museum of Science website. The information on “What Makes a Good Interactive Exhibit” will be relevant if you want an exhibit to be standalone or are unsure if the staffing will permit one-on-one interaction. www.monstshire.net/stacks/exhibits/goodexhibits.html

Tips on Screening at Health Fairs

Some health fairs may involve screening for health or developmental concerns such as developmental delays in children. Here are some things to consider:

- If at all possible, schedule appointments for the screenings to prevent line-ups.
- Try to complete the paperwork before each scheduled appointment.
- Some people may need additional time for screening, especially young children. In addition, there may be some no-shows and unscheduled appointments. Make sure your schedule allows some flexibility.
- Schedule break times for screening staff, particularly if working with young children.
- Ensure privacy and confidentiality is maintained for all participants. This may be particularly challenging at a busy fair in a public location. Use curtains or office space dividers to create private one-on-one space. Use colour-coded cards indicating if the screener is ready for the next participant.
- Especially in the case of child health fairs, ensure potential distractions such as the games area are placed far from the screening area.
- Make sure all screening equipment is calibrated prior to the event, that the staff screening participants is qualified and knowledgeable, that positive screens are explained and the referral system is clear.
- Call people who have received positive screenings 1-2 weeks later to encourage follow-up and a few weeks later again to ensure they have been able to access services.

Screening Tips – Calling All Three Year Olds (CATYO) Initiative

When screening children for developmental delays, some parents may feel concerned if their child screens positive. Here are some strategies for communicating with parents at the events:

- Address their fears and focus on the benefits of interventions for their child.
- Emphasize that the screening is preventative and provide parents with activities they can do to prepare their child for school.
- Ensure they are able to get help by following-up on all positive screens.

From Huron-Perth Healthy Babies, Healthy Children Early Identification Committee

Car Seat Inspection Clinics

The City of Hamilton, Public Health Services started to run a Car Seat Inspection Clinic at their Health Fairs. They knew that at least 80% of their inspections and installations were for clients who were pregnant or had children under six months of age. They had noticed there was crossover from clients coming for the car seat clinics who also went to the health fair, or participants at the health fair being making appointments for future car seat clinics. Providing a “one-stop-shop” was more efficient for everyone.

From City of Hamilton, Public Health Services

Tips for Promoting Health Fairs

Here are some ideas for promoting your health fair:

- Use websites (your organization as well as your partners'), newsletters and bulletin boards.
- Announce the health fair at other events.
- Send media releases to local radio stations and newspapers. See Appendix 5 – Sample Public Service Announcement.
- Place flyers in community settings such as Ontario Early Years Centers, hospitals, community centers, pharmacies, places of worship, grocery stores, libraries, etc.
- Promote in large worksites through e-mail, bulletin boards and employee newsletters.
- Consider reaching a variety of participants through your advertising by having pictures of people from different cultures and diverse family structures on your flyers.
- Mail promotional materials to health care providers: posters, tear-off pads and brochures as part of prenatal packages.

How do Participants Find Out About Prenatal Health Fairs?

The Region of Waterloo asked participants how they found out about the prenatal health fair. In most cases, the women who were pregnant or planning a pregnancy found out through friends/family (17%), health care providers (16%), posters/flyers (12%), hospital/pre-birth clinics (12%) and roadside mobile signs (10%). Their data also separates this information by location since they offer the prenatal health fairs in three different locations. It is interesting to note that in one of these locations, the roadside mobile signs were the most prevalent way for participants to have found out about the fair.

From Region of Waterloo Public Health

Promotion of the Calling All Three Year Olds (CATYO) Initiative

Attendance at the CATYO Kindergarten Registration has increased from 80% in 2006 to 84% in 2008. In the 2006 parent survey, parents were asked how they found out about CATYO; the school newsletter, the newspaper and word of mouth were the main sources of information stated by parents. One of the CATYO committee's recommendations was to continue to ensure that the CATYO promotion strategies enhance the communication messages to inform parents about CATYO Kindergarten Registration and developmental screening, and their benefits to child development and school readiness.

From Huron-Perth Healthy Babies, Healthy Children Early Identification Committee

Tips for Offering Workshops at Health Fairs

Some health fairs offer workshops at pre-determined times. These provide the opportunity for more in-depth information and generally last thirty minutes to an hour.

- Offer demonstrations with hands-on opportunities: how to make baby food, choosing healthy meals using food models, how to install various types of car seats, etc.
- Participants like to hear from people who have had practical experience on the topics: fathers talking about being a new dad, parents of twins discussing challenges and strategies, mother who was new to the community when she had her baby, etc.
- Offer a simple system for signing up for workshops. Registration may be offered upon entry to the fair through a sign-up sheet or ahead of time, by phone.
- Make sure the workshop space is relatively quiet and away from the main fair hall. Try to limit having participants come and go during the workshop.
- If offering workshops at a prenatal health fair, try to have topics separated in key reproductive timeframes: preconception, early prenatal, late prenatal.



Video Sessions

Video sessions are another way to provide in-depth content to participants. The prenatal health fairs for the Region of Waterloo occasionally offer video sessions (e.g., comfort measures during labour, breastfeeding) with staff to answer participants' questions. There is a high participant satisfaction with the videos, with over 90% of the participants rating the content as either good or excellent. Show videos at predetermined times, in a room separate from the main fair hall.

From Region of Waterloo Public Health

Tips for Evaluating Health Fairs

Evaluation is often the most neglected part of community health fairs.

- Identify the objectives of the health fair. Objectives should be specific, measurable, achievable, realistic and provide a timeframe.
- Evaluate the health fair according to the objectives. A number of evaluations may be needed: participants' on-site, participants' follow-up and exhibitors'. Consider using a different color of paper for each evaluation form. See Appendix 6 – Sample Prenatal Health Fair Participant Evaluation, Appendix 7 – Sample Exhibitor Evaluation and Appendix 8 – Sample Post Telephone Survey.
- You can measure changes in awareness by having participants fill out a questionnaire as they enter the fair and again as they exit. If you want to change behaviours, evaluate the change a few weeks or even months after the fair has taken place.
- Depending on the objectives, consider having a separate evaluation for males and for female participants. For example, in the case of prenatal health fairs, you may want to know what future fathers learned and what they would have liked at the fair.
- To encourage participants to fill out evaluations, consider offering a draw prize or an immediate give-away.
- Evaluate the health fair process from the point of view of the exhibitors and service providers and find ways to improve efficiency and reduce any frustrations encountered.

Evaluation Prizes

The City of Hamilton, Public Health Services had volunteers hand out and collect participant and exhibitor evaluations for door prizes drawn at the end of the fair. A local business donated a stroller at each fair and participants would stay the whole time for a chance to win. Exhibitors offered great suggestions for the next fair and were entered to win gift certificates.

From City of Hamilton, Public Health Services

Adjusting to the Needs of the Clients

The Peterborough County-City Health Unit relocated their Prenatal Health Fair from the Health Unit building to a local hotel in response to feedback from fair participants that the event was becoming too crowded. The hotel rents them three interconnecting ballrooms and includes table set-up and table skirts in the rental agreement. As a not-for-profit organization, they are given a discounted rate. By offering the fair on Mondays, they get an additional discount from the hotel. They now have lots of space and can add more exhibits if needed. As a bonus, the ballroom space creates a very positive ambience and fair participants sense they are attending a special event rather than an institution.

Additional evaluation feedback suggested having displays on preparing formula and on 3D ultrasounds. They have not been able to respond to these requests as they go against their organizational values.

From Peterborough County-City Health Unit

Meeting the Needs of Young Children

In the parent survey done at the end of the first Calling All Three Year Olds (CATYO) initiative, parents stated that they preferred to have their child screened in the morning when they were less tired. The CATYO Committee addressed this request and worked with the community partners to provide the majority of the CATYO Kindergarten Registrations in the morning in subsequent years. Parents also found it beneficial to meet the kindergarten teacher and most schools were able to accommodate this request at the next CATYO events by providing teacher release time.

From Huron-Perth Healthy Babies, Healthy Children Early Identification Committee

Tips for Prenatal Health Fairs

- As much as possible, try to reach women as early as possible in the pregnancy, perhaps by marketing the prenatal health fairs specifically for women in the early stages of pregnancy.
- Work with health care providers to promote the fairs. Provide posters for their waiting rooms and “appointment cards” they can give to pregnant women.
- Try to reach women from lower socio-economic status through your promotion. Advertise through laundromats, food banks, second-hand stores, social service agencies, etc.
- Provide tear-off promotions to pharmacies for placement near the pregnancy testing supplies.
- Suggestions for interactive displays include:
 - Having support persons try on an empathy belly and perform routine tasks such as carrying a box.
 - Sampling mocktails and offering recipes.
 - Bathing a newborn or changing a diaper.
 - Testing for carbon monoxide in the lungs for people who smoke and those exposed to environmental tobacco smoke.
- Develop interactive displays and activities which will appeal to support persons, not just to the pregnant women. Examples of this may include “dads only workshops”, car seat installation demonstrations, etc.
- Although the focus of the fair may be prenatal health, many future parents attend in the hope of finding information on newborn and baby care. Frequently requested topics related to this are:
 - Signs and symptoms of childhood illnesses.
 - Childcare.
 - Postpartum activities such as “Yoga with baby” and baby massage.
 - Information for fathers.
 - Information on diapers: cotton diapers, diaper services, recycling diapers, etc.
 - Car seat and other baby safety equipment information.
 - Information on government services and Registered Education Savings Plans.
 - Introducing a new baby to an older sibling.
 - Infant cardio-pulmonary resuscitation (CPR)
 - Infant development
 - Postpartum adjustments, including postpartum mood disorders

- Many parents will bring children at prenatal health fairs. Consider providing a childcare area, a breastfeeding area, a diaper change area and activities to keep young children entertained.
- In some cases, attending a prenatal health fair may be the only preparation some couples do together prior to the birth. Ensure they have sufficient information to take home, including a list of community resources.
- Provide sitting areas in various locations as pregnant women may need to rest, especially if the room is hot or crowded.

Pregnant? Who You Gonna Call? Campaign

A few years ago, Thunder Bay District Health Unit embarked on a 3-year early prenatal campaign to increase the number of registrants attending their prenatal education program. The theme of the campaign was to make the public health unit the second phone call made by women as soon as they find out they are pregnant. This approach was effective in increasing attendance in early prenatal classes. A similar approach could be used to attract these women to prenatal health fairs.

From Thunder Bay and District Health Unit

The Wellesley Rural Prenatal Health Fair

Rural health fairs are likely to be smaller in terms of number of exhibitors and number of participants. However, they can provide an opportunity for more in-depth education and one-on-one discussions. The Wellesley Prenatal Health Fair held in 2008 was considered a success with 78 participants. Most of the participants found out about the fair through a roadside mobile sign or through a friend or family member. Six different workshops were provided at the fair and 100% of the respondents were either satisfied or very satisfied by the workshops. The fair provided more than just a means of delivering information but a social event in itself that helped reduce isolation and increase intergenerational connections. One of the lessons learned was to try to offer the fair at a different time of the year, as many participants were farmers and found it difficult to take time off to attend an April event. Suggestions were also made to combine the prenatal fair with a child health fair to increase attendance and reduce the organizational burden of doing two fairs.

From Region of Waterloo Public Health

The Simcoe Rural Prenatal Health Fair

The Haldimand-Norfolk Health Unit offered a prenatal health fair in the town of Simcoe in October 2008. Haldimand and Norfolk is a rural area located in Southern Ontario. It has a diverse visible minority population which includes a Low German population. A total of 39 exhibitors (16 businesses, 10 outside agencies, 13 from the health unit) took part in this first fair and workshops were offered. The fair was advertized through community newspapers, radio, health unit website and local health care providers. The organizers were anticipating approximately 80 participants but 250 took part. An evaluation was conducted with participants at the end of the fair and indicated a satisfaction rate of 100%. A majority of respondents had heard about the fair through the local newspaper. The workshops were particularly well-received, with almost 95% of the participants indicating their knowledge was increased in taking part in the car safety workshop and 92% in the breastfeeding workshop. Given the high attendance, organizers will be looking for a larger venue next time! They will also try to integrate other health unit teams in the planning and the delivery of the event.

From Haldimand-Norfolk Health Unit

Multicultural Prenatal Health Fair

The region of Waterloo is currently the fifth most common place of immigration for new immigrants to Ontario. Over the years, the Region of Waterloo Public Health has reached the multicultural population by providing interpreters and offering booths from immigrant service providers at their regular prenatal health fairs. In 2008, they decided to increase their reach to the multicultural population, more specifically to the newcomers to Canada, who were underrepresented at their regular prenatal health fairs.

They held their first Multicultural Prenatal Health Fair in September 2008, and it was attended by 160 people, which was considered a success. The planning required the development of new partnerships with agencies who work with newcomers and with religious organizations. The most important barrier they had to overcome was language. At this first fair, they had interpretation in 15 languages and offered workshops on healthy pregnancies in English, Arabic, Mandarin and Spanish. They offered materials in a variety of languages and color-coded them to facilitate identification and distribution. They offered the fair at the public library, which was centrally located, and provided bus tickets for people residing further away. As indicated by Mary Mueller, the public health nurse who coordinated the effort, partnerships were key: "Working with the many agencies who service this population was very beneficial as they really made an effort to market it to their clients and they had many suggestions that were invaluable to encourage the attendance of the multicultural population and address some of the barriers to attendance." They are planning to offer this fair again next year and incorporate many of the changes from the evaluation.

From Region of Waterloo Public Health

Preconception Health Fairs at Bridal Shows

In Eastern Ontario, the health unit considered having a booth at bridal shows to reach couples planning a pregnancy. They realized that most bridal fairs are for-profit and therefore the cost of participating would be quite high. In addition, the future spouses tend to be more focused on the wedding preparations than on preconception issues at that time. The participants interested in a preconception booth at a bridal fair may not always be the future parents. Prospective grandparents often show a greater interest!

From Eastern Ontario Health Unit

Preconception Health Checklist

In Lambton County, women and men attending a bridal show were provided with a Preconception Health Checklist and were encouraged to review it with their health care provider as early as possible. The Preconception Health Checklist used was originally developed by the College of Family Physicians, in partnership with other organizations. It is available in the manual "Improving the Odds: Healthy Child Development" distributed through the Best Start Resource Centre.

From Community Health Services Department of Lambton County

Participant Passport

In order to reach young adults, the displays and exhibitors need to be highly engaging. It may also be useful to integrate a game to motivate youth to visit the exhibits. Many health fairs will distribute a “participant passport” at the beginning of the fair. The participants must go to a certain number of booths to get information and a stamp is then added to their passport. Once they have collected a number of stamps, they can hand in their card for a draw. You can build on this by including a list of questions, the answers to which can be found at the booths or through prior knowledge. Consider having different lists, or at least, the questions in a different order, to help with traffic flow. You can also include a networking component where participants need information from each other as young adults often have a strong interest in socializing. A short evaluation of the fair can be done on the passport.

Reaching Pregnant Teens

Waterloo Public Health encourages teens enrolled in the “Special Delivery Club” (prenatal classes for adolescents), to attend the prenatal health fair and provides bus tickets for transportation. There is no class scheduled for the night of the fair.

From Region of Waterloo Public Health

Tips for Child Health Fairs

- Promote the child health fairs as both a way to identify developmental concerns and a way to learn about healthy child development.
- The fair should be child friendly: offer childcare services while parents view displays, provide healthy snacks for children and ensure adequate breastfeeding and baby change areas.
- Consider narrowing down the age range for which the fair is designed. The needs of parents of a newborn are quite different of those who have a preschooler.
- A child health fair done in conjunction with Kindergarten registration is a good way to reach 3-year olds to promote school readiness. Partnerships with school boards are essential for this.
- If at all possible, have the referral agencies immediately available at the fair and direct families to them after screening.
- If the referral agencies are not present at the fair, provide child development activity suggestions for parents of children who are screened positive, to help them bridge the gap between identification and service by a professional.
- Through your fair and follow-up, assist parents in finding help for affordable childcare, dental and vision care as financial barriers to these services are frequent.
- Fun activities should be provided for children such as parachute games, story telling, face painting and a safe tumbling space.
- Young children often nap in the afternoons. Schedule the fair to take advantage of the children’s natural activity patterns.

Connecting Families to Services

The Region of Waterloo offers seven Child Health Fairs each year. They hold these fairs in different geographic locations, in both rural and urban areas. Interpreters are provided for families. Screening tools are available in five different languages.

Families have an appointment time at the fair and walk-ins are also accepted. The family is directed to the child development screening booth first. An early child development specialist (e.g. Public Health Nurse) checks to see that the child is reaching his/her developmental milestones using the Nipissing District Developmental Screen. The parents will also receive the Nipissing Screen information for the next developmental stage for that child and a newsletter providing child development information specific to the age of their child. Connections to community programs and other types of screening are also provided at the fair and a follow-up call is done two weeks later.

From Region of Waterloo Public Health

Reaching Families in Low-income Neighborhood

The Thunder Bay District Health Unit partnered with the Aboriginal Service Providers Committee 0-6 years for a National Child Day event. They wanted to reach parents of children aged 0-6 who experienced socio-economic challenges. The committee chose a smaller shopping mall in a low-income neighborhood where the bus terminal was located. The event was a success as there were many young families that attended the event. The event was solely advertised through organizations involved with the event and there was no large scale community wide advertising done.

From Thunder Bay and District Health Unit

Incorporating Prenatal Health Fair Displays into Workplace Health Fairs

The Region of Waterloo Public Health has incorporated displays such as "Is there a Baby in Your Future?", "Playing it Safe – Environmental Risks" and "Work and Pregnancy Do Mix..." into their Workplace Health Fairs. They also use these displays when they host workplace networking sessions. For example, when they present "Nutrition in the Workplace", they set up a prenatal nutrition display for viewing.

From Region of Waterloo Public Health

CONCLUSION

There are many different types of health fairs offered for different purposes. A number of health fairs have been held in Ontario on topics related to reproductive and child health and much expertise has already been developed.

Health fairs are a good way reach a large number of people and increase their awareness of the issue and the services offered in their community. They offer direct contact between service providers and the general public. It is important to have clear objectives, to plan well ahead, to promote adequately and to deliver quality information. The evaluation of the fair will help in planning subsequent fairs.

Health fairs should be part of a larger comprehensive health promotion strategy and reinforce messages disseminated through other methods such as prenatal classes, health care visits, home visits, etc. They can be helpful to reach a segment of the population and complement their knowledge on the issues.



Perth District Health Unit



Sudbury and District Health Unit

REFERENCES

- Aponte, Judith and Nickitas, Donna M. (2007) Community as client: Reaching an Underserved Urban Community and Meeting Unmet Primary Health Care Needs, *Journal of Community Health Nursing*, 24:3, 177-190.
- Bryan, J.M., Deveraux, J.M., York, M.L. Schoh, R.J. (1991). How effective are health fairs? Quantitative evaluation of a community health fair. *American Journal of Health Promotion*, Nov-Dec;6(2):85-8.
- Camiletti, Y.A., & Alder, R. (1999). Learning needs as perceived by women less than or equal to 16 weeks pregnant. *Canadian Journal of Public Health*, 90(4):229-232.
- Carter, K.F., (1991). The Health Fair as an Effective Health Promotion Strategy, *American Association of Occupational Nurses Journal*, Vol. 39, No. 11, pp 513-516.
- Coleman, B.L., DeCicco, J., Driedger, M., Kelly, A., Resendes, I., & Thompson, L. (2001). *St. Thomas Prenatal Health Fair Evaluation Results*. St. Thomas, Ontario: Elgin-St. Thomas Health Unit.
- Dulin, M.K., Olive, K.E., Florence J.A., Sliger, C., The Financial Value of Services Provided by a Rural Community Health Fair, *Journal of Health Care for the Poor and Underserved*; Nov 2006; 17, 4; ProQuest Medical Library, pg. 821.
- Fioze L., Nanson, C., (2002). Waterloo Region Prenatal Health Fairs Overall Evaluation Report.
- Gaylor, E. (2005). *Huron-Perth Calling All Three Year Olds Kindergarten Registration Evaluation Report November 2005*. Prepared for the Huron Perth Healthy Babies Healthy Children Early Identification Committee. Retrieved from www.pdhu.on.ca/pdf/CATYO.pdf on November 14, 2008.
- Gaylor, E. (2006). *Calling All Three Year Olds Kindergarten Registration 2006 Evaluation Summary*. Prepared for the Huron Perth Healthy Babies Healthy Children Early Identification Committee. Retrieved from www.pdhu.on.ca/pdf/CATYO06.pdf on November 14, 2008.
- Gaylor, E. (2007). *Calling All Three Year Olds Kindergarten Registration 2007 Evaluation Summary*. Prepared for the Huron Perth Healthy Babies Healthy Children Early Identification Committee. Retrieved from www.pdhu.on.ca/pdf/CATsum08.pdf on November 14, 2008.
- Ghuri, N. (2005). Health fair in a mosque: putting policy into practice. *Public Health*, 119, 197-201.
- Goldman, K.D., Schmalz, K.J., (2004) Top Grade Health Fair: An "A" Fair to Remember, *Health Promotion Practice*; 5; 217.
- Hussey, R.M., Edwards, M.B., Reid, J.A., Sykes, K., Seymour, H., Hopley, E., Ashton, J.R., (1987). Evaluation of the International Garden Festival Health Fair, *Public Health*, Vol. 101, pp 111-117.
- Maltby, H., (2006). Use of Health Fairs to Develop Public Health Nursing Competencies, *Public Health Nursing*, Vol. 23 No. 2, pp. 183-189.
- McHale, H., Jenkins, K., Davies, M., (2001) Prenatal Health Fairs Make a Difference: Telephone Survey Findings, *Public Health and Epidemiology Report Ontario (PHERO)*, Vol 12, Number 8, September 29, 2001. Available at: www.health.gov.on.ca/english/providers/pub/phero/pdf/2001/phero_092901.pdf

REFERENCES (CONTINUED)

- McKeever C, Koroloff N, Faddis C. (2006). The African American Wellness Village in Portland, Ore. *Preventing Chronic Disease*. Available from: www.cdc.gov/pcd/issues/2006/jul/05_0211.htm.
- Ness, K. K., Gurney, J. G., & Ice, G. H. (2003). Screening, education, and associated behavioral responses to reduce risk for falls among people over age 65 years attending a community health fair. *Physical Therapy*, 83, 631-637.
- Ontario Ministry of Health, Public Health Branch (1997). *Mandatory Health Programs and Services Guidelines*.
- Public Health Services – City of Hamilton (2007). *Prenatal & Family Health Fair Review*. Report released June 2007.
- Region of Waterloo – Public Health (2001). *Waterloo Region Prenatal Health Fairs – Overall Evaluation Report*. Report released January 2002.
- Region of Waterloo – Public Health (2006). *The Four-year Evaluation Plan Template*. Internal report.
- Region of Waterloo – Public Health (2007). *Prenatal Health Fair Report*. Evaluation Results of the June 2007 Prenatal Health Fair. Report released July 2007.
- Region of Waterloo – Public Health (2007). *Child Health Fair Progress Report 2007*. Internal report.
- Region of Waterloo – Public Health (2008). Prenatal Health Fair Report. *Evaluation Results of the first Wellesley, Wilmot and Woolwich Rural Prenatal Health Fair*. Report released May 2008.
- Rice, C. (2006). Health fair planning guide. Family and Consumer Sciences of the Texas AgriLife Extension Service. Retrieved from fcs.tamu.edu/Health/health_fair_planning_guide on November 18, 2008.
- The Health Communication Unit (THCU) (2003). Effectiveness of Health Fairs, Displays, Posters. Toronto.
- The Health Communication Unit (THCU) (2007). Health Fairs Update – 2003-2007. Toronto.
- Wilkerson (2005). Calling all three year olds. *Huron County Health Unit*. Retrieved from www.pdhu.on.ca/pdf/callin~1.pdf on November 7th, 2008.
- Young, Donna (2006). Health event aids San Antonio's Hispanic residents, *American Journal of Health-System Pharmacy*, Vol. 63 Apr 15, 2006.

APPENDIX 1 – SAMPLE TIMELINE CHART

Health Fair Planning Steps

Organization: _____

Topic: _____

Purpose: _____

Audience of Interest : _____

Date of Fair: _____

Task	Timeline	Assigned to	Done
1. Set dates for fairs <ul style="list-style-type: none"> • Ensure that facility is booked. • Inform staff and external exhibitors and staff 	6-12 months ahead	Chair with Operations and Promotion	
2. Book AV resources, displays, display boards, empathy belly, videos, etc.	3 months ahead or as soon as dates known	Resource Coordinator	
3. Check Health Fair phone line for messages and respond to inquiries	Ongoing	Fair Chair	
4. Review feedback from staff and exhibitors. <ul style="list-style-type: none"> • Ensure that data is collected and entered from previous fair. 	2-3 months ahead	Fair Chair & Evaluation Chair	
5. Revise exhibitor forms <ul style="list-style-type: none"> • Letter • Display request • Contract • Policy and procedures guidelines • Door prize request form • Exhibitor labels for mailout 	2-3 months ahead	Fair Chair	
6. Ensure that promotional materials are ready for exhibitor mailouts and newsletters <ul style="list-style-type: none"> • Ensure sponsors are recognized • Book roadside signs • Distribute posters and postcards • Book media coverage 	3-4 months ahead	Promotions Coordinator	
7. Prepare exhibitor packages and mail with promotional materials to returning exhibitors; include last fair evaluation data <ul style="list-style-type: none"> • Check insurance coverage and expiry dates. 	3-4 months ahead for first fair; 6-8 weeks ahead or subsequent fairs	Fair Chair	
8. Ensure that resource review and ordering process occurs <ul style="list-style-type: none"> • Arrange for shipping, loading and unloading as required 	2 months ahead	Resource Coordinator and P.A. (*)	

(*) P.A. = Program Assistant

Task	Timeline	Assigned to	Done
9. Letter to people who have put inserts into participants bags in the past and to those who have requested to put one into the bags for next fair	6-8 weeks ahead	Fair Chair	
10. Distribute Display Request Forms to staff participating in fair	4-6 weeks ahead	Fair Chair	
11. Collate list of potential new exhibitors <ul style="list-style-type: none"> • Contact new exhibitors re: interest and suitability 	ongoing	Fair Chair	
12. Collect contracts and display requests from former exhibitors as they arrive. Organize in exhibitor binder. <ul style="list-style-type: none"> • Confirm number of exhibitors returning 	4-6 weeks ahead by deadline	Fair Chair	
13. Arrange for participant bags to be filled the week before the fair	4 weeks ahead	P.A.	
14. Ensure staffing & relief for all displays	4-6 weeks ahead	Fair Chair	
15. Ensure enough volunteers are available	4-6 weeks ahead	Volunteer Coordinator	
16. Order any extra signage required	4-6 weeks ahead	Operations Chair	
17. Finalize number of exhibitor spaces with Operations Chair. <ul style="list-style-type: none"> • Inform additional exhibitors selected, send package and confirm participation 	4 weeks ahead	Fair Chair	
18. Make final list of participating exhibitors Give list to Operations Chair also. <ul style="list-style-type: none"> • Update list on computer for P.A. to put on floor map 	2 weeks ahead	Fair Chair/P.A.	
19. Ensure that all displays are complete	2 weeks ahead	Resource Coordinator	
20. Check camera for supplies and batteries	2 weeks ahead	P.A.	
21. Confirm door prizes from exhibitors/sponsors list of door prizes & descriptions for participant bag (to P.A. for printing) <ul style="list-style-type: none"> • Door Prize sign • Table tents for prizes 	2-4 weeks ahead	Prize Coordinator	
22. Work with Operations Chair to complete lists of table assignments & final list <ul style="list-style-type: none"> • Give to P.A. to prepare map and send for printing 	2 weeks ahead	Fair Chair Operations Chair P.A.	
23. Prepare all resources for participant bags once maps and door prize lists back from printing. <ul style="list-style-type: none"> • Boxes ready for delivery • Do sample bag & itemized list 	1-2 weeks ahead	Fair Chair/P.A.	
24. Prepare exhibitor welcome letter for exhibitors with dates for next fairs <ul style="list-style-type: none"> • Prepare sign-in sheet • Staffing relief sheet 	1-2 weeks ahead	Fair Chair	

Task	Timeline	Assigned to	Done
25. Confirm details with all exhibitors by phone or e-mail; mail maps, schedule of events, loading instructions (e-mail), reminders for door prizes and outstanding cheques for fees	1 week ahead	Fair Chair	
26. Collect miscellaneous supplies for Information table (clips, scissors, tape, Velcro, stick-tack, pens, screwdriver, tacks)	1 week ahead	Operations Chair	
27. Ensure sufficient staff for set-up (8-10) <ul style="list-style-type: none"> • Respond to staff and exhibitor queries 	1-2 weeks ahead ongoing	Fair Chair	
28. Help with packing and moving <ul style="list-style-type: none"> • Ensure all items ready for cartage 	1-2 days ahead	Resource Coordinator and P.A.	
29. Staff the Information table	at fair	Fair Chair and P.A.	
30. After Fair – unpacking <ul style="list-style-type: none"> • Check displays for completeness 	day after fair	Resource Chair/P.A.	
31. Ensure return of all AV equipment/display boards, displays, equipment	day after fair	Resource Chair/P.A.	
32. Debrief with staff	day after fair	All	
33. Send receipts for exhibitor fees if not given at fair	week after fair	Fair Chair/P.A.	
34. Thank you letters to door prize donors		Door Prize Coordinator	
35. Review evaluation feedback from participants, volunteers, workshops	2-4 weeks after fair	With Evaluation Chair & other staff	
36. Communicate with Operations, Promotion, Resource and Evaluation Chairs to set agenda in preparation for next Fair Committee meeting	2-4 weeks ahead	Fair Chair	
37. Hold Health Fair Advisory Committee Meeting approx. 1 month after fall fair <ul style="list-style-type: none"> • review data on past year's fairs • plan for next year's fairs • select new exhibitors • deal with issues as they arise • facilitate meeting • arrange for minutes • print and distribute minutes • follow up on recommendations 		Fair Chair	
38. After winter and spring fair send evaluation data and any feedback or issues to Committee members by e-mail or mail. (No meeting)		Fair Chair	
START ALL OVER AGAIN!			

Adapted with permission, Reproductive Health Program of Region of Waterloo Public Health

APPENDIX 2 – SAMPLE HEALTH FAIR EXHIBITOR POLICIES

_____ Health Fair

Exhibitor Policies

Mandate

1. Displays must relate to the topics of: _____
(ex: health before pregnancy, early pregnancy, newborn care, child health).
2. The content and handouts of all displays not sponsored by the host organization need to be approved initially by: _____. Materials that do not support the mandate of _____ will not be allowed at the fair.
3. The _____ Committee will give input into the approval of displays and handouts at the Advisory Meetings held annually.
4. Exhibitor space will be allocated by _____, based on priorities set by _____.

Selection of Exhibitors

1. Health displays will take precedence over business displays.
2. Community organizations providing _____ services will be given priority.
3. Priority will be given to regulated professions with members who are in good standing with their college or to professions who have worked closely with _____.
4. The duplication of displays will be avoided and collaboration on topics encouraged.
5. Local exhibitors will be given preference over those outside the region.
6. Exhibitor involvement may be allocated on a rotational basis at the discretion of _____.
7. Participation at previous health fairs does not guarantee inclusion at every fair.
8. If participant and/or professional response has been negative to, or there has been a lack of interest in, a particular exhibit, continued participation of that exhibitor will be reconsidered by the host organization.

Exhibitor Obligations

1. All organizations or businesses who agree to participate in the Health Fair must sign the Health Fair Exhibitor Contract and return it with their Insurance and Display Request forms to the _____ by _____. Exhibitor fee (if applicable) must be paid by the evening of the fair. Failure to comply may result in your space being allocated to another exhibitor.
2. Exhibitors will arrive by _____ and check in at the Information Table. Displays must be staffed during the hours of the fair (_____) and will not be taken down until it is announced that the fair is over.
3. Exhibitors may not collect names or other information from participants. A mailing list of participants will NOT be provided and no direct sales are permitted at the fair.

Displays

1. _____ will determine the position of displays. Displays cannot be moved without the consent of _____.
2. _____ reserves the right to establish limits on size and means of illumination of displays.
3. Exhibitors may not affix any signs, posters, brochures, flyers or advertising materials to any wall, mirror or other surface in the facility. No latex balloons please.
4. Exhibitors will not share their table with another exhibitor without the approval of the _____.

Door Prizes

1. Exhibitors who contribute a door prize will be acknowledged at the prize table, on a sign, and in a written handout. Names for prizes will be drawn after the fair and winners will be contacted by _____.
2. All door prizes must be able to be utilized by the winner without any additional cost.
3. Ballots from the door prize draws will be destroyed after the fair and will not be shared with exhibitors. Prize donors do not receive the name of the winner of their prize.

Note: These policies are subject to change in future.

Revised: (date)

Adapted with permission, Reproductive Health Program of Region of Waterloo Public Health

APPENDIX 3 - SAMPLE EXHIBITOR CONTRACT

Exhibitor Contract for _____ Health Fair

Location: _____

Date of Fair: _____ Time: _____

Agency/Business: _____ Contact Name: _____

Address: _____ Postal Code: _____

Phone: _____ Fax: _____

e-mail: _____

Please sign the contract below and return with insurance and display request forms.

NOTE: Exhibit space will be allocated on a first come first served basis.

Insurance Guidelines:

Send insurance certificate **only if we do not have one which is current for the date of the fair**

Your insurance certificate is current expired

Indemnification Provision:

The Exhibitor agrees to indemnify and save harmless _____ from any and all costs, claims, demands, suits, actions and judgments made, brought, or recovered against _____ resulting from any negligent act and/or error or omission by the Exhibitor, its employees or volunteers in connection with this agreement.

General Liability Insurance:

The Exhibitor shall purchase and maintain third party liability insurance throughout the term of this agreement. A Certificate of Insurance evidencing the following coverage shall be forwarded to _____ prior to the commencement of the _____ Health Fair:

- \$1,000,000 Limit of Coverage
- _____ shall be named as an additional insured
- Cross Liability endorsement with a Severability of Interest clause
- Cancellation Notification – 30 days (10 days for non-payment) prior written notice by Certified Mail

I have read the _____ Health Fair Exhibitor Policies and the Indemnification and Insurance Guidelines above and agree to the conditions of this contract.

Date

Signature of Exhibitor

- **Please sign and return forms by fax or mail ASAP (deadline/fax number _____)**
- **Note: If your forms are not returned on time we cannot guarantee your space at the fair.**

Name of Fair Coordinator, _____ Health Fair

Organization: _____

Address: _____ Postal Code: _____

Phone: _____ Fax: _____

Adapted with permission, Reproductive Health Program of Region of Waterloo Public Health

APPENDIX 4 – DESIGN RECOMMENDATIONS FOR DISPLAYS

Organization: _____

Health Fair Design Recommendations for Displays

The following are recommendations intended to help make your display enticing, readable and appealing to the eye.

General Design

- The display content should be readable from 8-10 feet away
- Each components should be at least 16 inches x 20 inches in size

Main title

- The heading of the display should be in capital letters
- The letters should be a minimum of 4 inches (400-500pt)

Other titles

- Can be upper and lower case
- The letters should be 2-3.5 inches (145-200pt)

Text

- There should only be five to seven lines of text on a 16 inch x 20 inch component
- Each line should consist of only three to seven words
- Text within a component should ideally be a 2 inch minimum, but may be 1-2 inches (70pt)

Adapted with permission by Perth County from materials produced by the Middlesex-London Health Unit, who developed the above recommendations in consultation with the Health Communications Unit at the University of Toronto.

APPENDIX 5 – SAMPLE PUBLIC SERVICE ANNOUNCEMENT

_____ Health Fair Provides Access to Service Providers and Health Care Professionals

City, ON – Date – (Adapt the following as required) Can a man’s health prior to conception affect the baby’s health? Is there a safe time to drink alcohol during my pregnancy? How do I get my toddler to eat healthy foods? To find the answers to these questions and more, plan to attend a _____ Health Fair on _____ from _____ to _____, located at _____. This fair is for anyone (planning a pregnancy, expecting a baby, or with children up to six years old).

The _____ Health Fair, hosted by _____, will provide an opportunity for attendees to speak with service providers and health professionals. Displays are presented by _____, along with local agencies and businesses.

The fall fair will highlight _____. A workshop on _____ will be available at _____. Door prizes will be drawn following the keynote speaker at _____.

Admission to the event is free and free parking is available at _____. _____ is on the _____ bus route.

If you have questions about the _____ Health Fair, or questions related to _____ call _____ at _____. Moms, dads, grandparents and support people are welcome.

--30--

PSA Contact: XXX

Adapted with permission, City of Hamilton Public Health Services

APPENDIX 6 – SAMPLE PRENATAL HEALTH FAIR PARTICIPANT EVALUATION

_____ Health Fair

.....
Evaluation – Date

If you complete the survey you will be eligible to WIN a prize (stroller, gift certificates, gift baskets). It's that easy. The information you give will be kept completely confidential.

If you have any questions please contact _____ at _____
(organization and phone number).

PLEASE PRINT ALL ANSWERS

The _____ Health Fair

1) Are you currently involved with a _____ program or a program displayed at the Fair (for example – attending Prenatal classes, Ontario Early Years Centres, etc.)?

Yes – Which program(s)? _____

No Don't know

2) How did you find out about the Health Fair?

Newspaper

Radio

Poster – Where was the poster? _____

Flyer – Where was the flyer? _____

At a class – Which class? _____

Website – Which website? _____

I was told – Who told you (family, friend etc)? _____

Other: _____

3) Why did you come to the Health Fair today? _____

4) What are the three MOST important things you learned at the Health Fair?

A. _____

B. _____

C. _____

5) Did you get all the information you were hoping for at the Health Fair?

Yes No - What information was missing for you? _____

6) Would you recommend the _____ Health Fair to friends?

Yes No - Please tell us why: _____

7) Would you like the Health Fair to continue?

Yes No - Please tell us why: _____

8) What would you suggest to improve the Health Fair for the future?

9) Any other comments?

Some Information About Yourself

10) Gender

Male Female

11) How old are you?

19 years or younger 20-24 years 25-34 years 35-70 years or more

12) What are the first 3 letters of your postal code? _____

13) Are you or your partner pregnant?

Yes - Due Date? _____ No - Are you planning a pregnancy? Yes No

14) Do you have any children?

Yes - How many? _____ No

15) What is the main language you speak at home?

Arabic Cantonese English Farsi French Hindi
 Italian Mandarin Portuguese Punjabi Spanish Urdu

Other: _____

16) What is your highest level of education?

Less than High school High school Some College/ University
 College/ University degree Other: _____

17) Are you:

Employed (full or part-time) Sick leave, maternity leave, strike Unemployed
 On Disability Student On Ontario Works

Other: _____

If you would like to be eligible for a prize please leave your contact information on the attached ballot form. Thank you very much.

Used with permission, City of Hamilton Public Health Services

APPENDIX 7 – SAMPLE EXHIBITOR EVALUATION

_____ Health Fair

Evaluation for Exhibitors – Date

If you complete the survey you will be eligible to WIN a prize. As well as a chance to win a prize, your answers will help us plan future events. The information you give will be kept completely confidential. If you have any questions please contact _____ at _____ (organization and phone number).

PLEASE PRINT ALL ANSWERS

The _____ Health Fair

1) How did you find out about the Health Fair?

2) What attracted you have an exhibit at the Health Fair?

3) Would you recommend the _____ Health Fair to other exhibitors?

Yes No – Please tell us why: _____

4) Would you like the Health Fair to continue?

Yes No – Please tell us why: _____

5) What would you suggest to improve the Health Fair for the future?

6) What were you hoping to accomplish here today; did you achieve what you set out to accomplish?

7) Any additional comments?

Some Information About Yourself

8) Are you:

Sponsoring agency Community Agency Business

If you would like to be eligible for a prize please leave your contact information on the attached ballot form. Thank you very much

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APPENDIX 8 – SAMPLE POST TELEPHONE SURVEY

_____ Prenatal Health Fair

Post Telephone Survey

Instructions to staff: Please complete 4-8 weeks after the Health Fair. Circle or check responses and make note of any comments.

Greetings:

My name is _____. I work for _____. Several weeks ago, you attended a _____ Health Fair at the _____. At this fair, you gave us your name and phone number and you agreed to participate in a quick telephone survey to see if you have made any changes related to your health as a result of attending this fair. We are collecting further information from women so that we can make the _____ Health Fairs even more useful for other women. The survey will take approximately 10 minutes to complete over the telephone. No names will be used in any documents produced from the surveys. Your responses are completely confidential. You don't have to answer questions that you are not comfortable with. Are you still interested in completing this survey?

Yes No Call back. Time: _____

Questionnaire:

1. Were you pregnant when you attended the (date of fair) Prenatal Health Fair?

Yes No

If yes: How many weeks pregnant were you at the Prenatal Health Fair? _____

2. Since attending the Prenatal Health Fair, have you read through any of the brochures or materials you collected?

Yes No

If yes: a. Can you estimate how many? _____

b. What information was most useful? _____

c. Was there any information missing from the Prenatal Health Fair? _____

3. Do you think that your attendance at the Prenatal Health Fair influenced you to make any changes related to your health before or during pregnancy? Yes No

4. At the Prenatal Health Fair, we provided different information to help with any questions or concerns you may have about having a baby. We want to know if you have made any of the following changes in your daily life as a result of the information that you received from the Prenatal Health Fair.

a. Have you started taking vitamins? Yes No

If yes, what vitamins? _____ Comments: _____

b. Have you started taking folic acid (folate)?

Yes No Comments: _____

c. Have you started drinking less alcohol?

Yes No N/A Comments: _____

d. Have you stopped drinking any alcohol?

Yes No N/A Comments: _____

e. Have you changed any of your eating habits?

Yes No Comments: _____

f. Did your health care provider discuss having an HIV test with you? Yes No

g. Have you decided to get an HIV test? Yes No

h. Did you get an HIV test?

Yes No Comments: _____

i. Did you receive testing for any other sexually transmitted diseases?

Yes No Comments: _____

j. Have you reduced your smoking?

Yes No N/A Comments: _____

k. Have you quit smoking?

Yes No N/A Comments: _____

l. Have you signed up for prenatal health classes? Yes No

If yes, what classes? _____ Comments: _____

m. Have you decided to breastfeed? Yes No

n. Did you gain any additional information about feeding your baby at the Prenatal Health Fair?

Yes No

o. Have you modified or improved your physical activity?

Yes No Comments: _____

p. Have you made any decision regarding the type of car seat you will be using that was influenced by attending the Prenatal Health Fair?

Yes No Comments: _____

q. Do you have other children?

Yes No Comments: _____

If yes: Have you decided to do anything different to keep your next baby safe in the car as a result of the Prenatal Health Fair?

Yes No Comments: _____

r. Have you made any other changes that we have not asked today?

Yes No Comments: _____

5. Has your partner or other support person changed any of their habits since attending this fair?

Yes No

If yes, could you please explain what changes they have made? _____

6. Have there been other factors or programs that have influenced personal changes related to your health for pregnancy besides the Prenatal Health Fair? For example, prenatal health programs with your midwife. Yes No

If yes, what are those factors? _____

7. Do you have any further comments you would like to make about the Prenatal Health Fair?

8. (Only ask if not indicated on the Health Fair form). What year were you born in?


Closing Comments:

Thank you very much for answering this survey. We will use this information to evaluate the fairs and improve future health fairs. If you have any questions regarding prenatal health, call _____. If you have any questions regarding this survey, please call _____. I appreciate the time you spent talking to me today. Have a good day. Good bye!

Post telephone interview completion date: _____ By: _____

Database entry date: _____ By: _____

Adapted with permission, Reproductive Health Program of Region of Waterloo Public Health



Best Start: Ontario's Maternal, Newborn and
Early Child Development Resource Centre
180 Dundas Street West, Suite 1900, Toronto, Ontario M5G 1Z8

Tel: 1-800-397-9567 or 416-408-2249

Fax: 416-408-2122

beststart@healthnexus.ca

www.beststart.org

best start
meilleur départ 

by/par health  **santé**

The Best Start Resource Centre supports service providers across Ontario through consultation, training and resources, in the areas of preconception, prenatal and child health. The Best Start Resource Centre is a key program of Health Nexus.