Co- Learning with Community Members: How to Measure What Matters to Stakeholders

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Workshop Description

- In this workshop, we will discuss efforts to learn with community members about health issues that are of concern to them and about how to address them.
- Several of these efforts have used focus groups as key means for learning what matters to community stakeholders.
- We will provide examples of the methods and results of these co-learning activities.
Introductions

- Name and Affiliations
- What is your community engaged research experience?
- Do you have any upcoming meetings with the community?
- Have you ever used focus groups as a community assessment tool?
Rationales for and Uses of Focus Group

- Concept exploration
- Community Needs Assessment
- Identification of ideas about health
- Instrument development
- Testing existing measures
- Translation and adaptation of measures
- Development of new measures
Selection of Participants

- Who are the key participants?
  - Age, Gender
  - Ethnicity
  - Language Abilities
  - Roles

- How will you select/recruit participants?

- 8-10 people is ideal
  - how many will you need to recruit to get 8-10?

- People who are willing and able to talk

- Key people in community to help you
Development of structure and agenda for focus groups - 1

- **Welcome**: often helpful to have a senior person from project do this
- Broad exploration or Specific task?
- Be realistic about time
  - 1.5 - 2 hours is reasonable
- **Orientation** to the focus group
  - Keep it clear and simple
  - Don’t give away too much of purpose
Development of structure and agenda for focus groups - 2

- Process you will use to run the group:
  - Questions
  - Participation

- Make clear the **participants are the experts**; there to learn from them
  - Very powerful part of a focus group
  - Also makes it useful and fun
Development of questions for focus groups

- Develop open-ended questions that elicit people’s input
- Define the broad areas that you are concerned about
- State in appropriate language for the group
  - educational level
  - translation into other languages
  - idiomatic expressions
Latinos’ Perspectives on Mental Health
Conducted for Changing Minds, Advancing Mental Health for Hispanics

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Changing Minds, Advancing Mental Health for Hispanics
Purpose

- To identify key issues in community mental health for Latinos

- To provide guidance for developing interventions for improving access to mental health services for the Latino community
Key Areas of Discussion

- How do Latinos define mental health and mental illness?
- What mental health problems do they recognize?
- What are the barriers Latinos face to accessing mental health services?
- What kinds of programs would help improve Latinos’ knowledge of mental health problems and access to mental health services?
Key area 1: What is mental health?

- Being able to function and contribute to society
  - Not abusing drugs or alcohol
  - Being capable of social interaction
  - Not aggressive
How to remain mentally healthy

- Social connections are key to good mental health across Latino groups

- Across groups, it was understood that everyone has problems but it is the way one *copes* with them that determines if one is healthy/unhealthy
Key Area 2: Mental Illnesses

- Depression
  - death of family member
  - reaction to news such as Sept. 11th
  - loss of job
  - isolation

- Stress/Anxiety
  - alcohol use
  - domestic violence

- Nervios (crisis nerviosa, ataque de nervios)

- ADHD (younger population)
Key area 3: Barriers to care

- Transportation
- Communication problems
- Money/lack of insurance
- Stigma
- “Coldness” of providers
- Lack of knowledge of where to go for help
Key area 4: Improving knowledge

- An advertisement campaign to educate the public about mental illness
  - Spanish TV, newspapers and radio stations
  - Information given by doctors/researchers
  - Posters and other information in churches, workplaces, public places
  - 800 number (if in Spanish)
  - Information about alcohol abuse, stress management, and domestic violence

- Focus on reduction of stigma of mental illness in Latino community
General views:
Mental health services

- Majority of respondents have positive view of mental health services
- Difference of opinion about the degree of accessibility of mental health services
- Majority of respondents believe mental health services are too expensive
- General preference for therapy interventions over prescription medications
Focus Groups

- 12 focus groups
- 110 participants
- Represent community participants and community resources
- Broad range of age, gender and ethnicity
Access to health care

ACCESS to health care is the key health issue in the community

Access means different things: respect, transportation, insurance, language, knowledge
Health Education

There is a great need for various kinds of health education:

- How to navigate the health care system
- Specific health problems
- Preventive interventions, like vaccination and screening
- Childcare and parenting
Major Health Problems: Adults

- Diabetes
- Depression
- High Blood Pressure
- Cancer: breast and prostate
- Domestic Violence
- Reproductive & Sexual Health
Major Health Problems: Children and Adolescents

- Oral health
- Obesity, diet & diabetes
- Asthma
- Alcohol and Drugs
- Immunizations
- Sexual Health: pregnancy, STD’s
- Cigarette smoking
Need for Expanded Resources

- Expanded school-based health resources
- More primary care clinics closer to different neighborhoods
- More health education and outreach
- Utilize churches as untapped resource in the community
“We Eat Meat Every Day”
Ecology & Economy of Diet in Oaxaca & New Jersey

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Purpose of Study

- To compare dietary practices between Mexicans living in New Brunswick and Oaxaca, Mexico
- To understand processes of dietary change produced by migration
- To identify food preferences among Oaxacans
- To propose interventions to improve the diets of people from Oaxaca in New Brunswick
Approach to the Study

- Focus groups in New Brunswick & Oaxaca
  - 4 in New Brunswick: 3 women, 1 men
  - 3 in Oaxaca: all women
- Discuss issues of foodways and dietary change
- Focus groups in Oaxaca with people from same communities as in New Brunswick
Profile of Participants

New Brunswick

- N=23
- Female=17
  - Mean 8 yrs in NB
- Male=6
  - Mean 10 yrs in NB
- Spanish primary language
- Education
  - Primaria 48%
  - Secundaria 35%
  - Preparatoria 17%

Oaxaca

- N=32
  - 8 urban, 10 town, 14 rural
- Female=31; Male=1
- All but 1 speak Spanish as primary language
  - 6 speak indigenous languages
- Education
  - No education 22%
  - Primaria 62%
  - Secundaria 6%
  - Preparatoria 9%
- Refrigerators & Stoves mostly in urban area
Children in New Brunswick

- Often not eating typical Mexican foods
  - Extra burden on food preparer to make different meals for different family members
    - Adults prefer Mexican diets with *sabor*
    - Children prefer more American diets
  - Women in New Brunswick usually cook once a day because of own work schedules
    - Have to adapt cooking for different family members

- Difficult for adults to monitor what children are eating

- Greater availability of “junk foods” in U.S.
Thoughts for Nutrition Education

- Oaxacans have rich ideas about what is a good diet
- Limits are not lack of knowledge
  - Major limit is economics
  - Diet linked to what people were used to eating in Mexico
  - Do not know how to use many new foods available in U.S.
- Lack of supermarkets
  - Those in city are high cost and low quality
Thoughts for Nutrition Education

- Role of schools
  - In Mexico, food sold at schools often from small vendors
    - Concern about cleanliness and quality
    - Often sell snacks of high profit and low food value
  - In New Brunswick, students prefer to buy lunch
    - Stigma of eating traditional foods
    - School lunch programs
    - Quality of foods a concern

- Build on New Jersey Fresh program – introduce new vegetables & recipes to Mexican families
  - Expand community gardens in schools
Concluding Thoughts

- Build nutrition education on Mexican diets
- Emphasize freshness of foods
- Develop farmer’s market/ mercado in New Brunswick
- Work with schools to improve school meals and also incorporate Mexican foods
- Work with families to identify strategies for having children eat Mexican diets
- Develop recipes that are easier to cook and fit with complex family schedules
Key Reference

  - The Focus Group Guidebook
  - Planning Focus Groups
  - Developing Questions for Focus Groups
  - Moderating Focus Groups
  - Involving Community Members in Focus Groups
  - Analyzing and Reporting Focus Group Results