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EVALUATING THE IMPACT OF HEALTH EDUCATION AT A FEDERALLY QUALIFIED HEALTH CENTER FOR PERSONS WITH DIABETES

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Authors

Tukiainen, E
Solares, J
Hochman, M
[et al.](#)

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distribution. A literature review of the most effective aspects of successful obesity interventions revealed that long-term programs emphasizing behavior change are most effective in achieving desired outcomes. Therefore, four separate materials were created for distribution that offered tips for implementing these strategies as well as other nutrition information and healthy suggestions. These materials were distributed with a healthy snack and recipe cards at the food distribution, where meaningful conversations about nutrition were also had.

Summary of Results: More than half of the clients receiving food (75 of 130) stopped by the table to pick up materials, learn about better nutrition, and get a healthy snack. This was well-received by both the food bank coordinators and clients. This intervention opened the door for continued partnership between WMH (who sponsored the printing of materials) and the food bank by highlighting a potential niche that allows the food bank to offer more services and the hospital to reach out to a specific segment of the community. WMH later used these materials for community education at Weiser's annual National Oldtime Fiddlers Contest & Festival.

Conclusions: This brief intervention was part of a much bigger project of promoting health in Washington County, ID. The partnership and education established by this project was a step in the process of addressing the major health issue of obesity, reaching a relatively small number of people. However, its impact was large in illustrating the power of building partnerships and starting with small projects in order to make way for larger-scale interventions.

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EVALUATING THE IMPACT OF HEALTH EDUCATION AT A FEDERALLY QUALIFIED HEALTH CENTER FOR PERSONS WITH DIABETES

Tukiainen E¹, Solares J³, Hochman M³, Steers N², Mangione CM^{1,2}. ¹David Geffen School of Medicine at UCLA, Los Angeles, CA; ²UCLA Fielding School of Public Health, Los Angeles, CA and ³AltaMed Health Services, Los Angeles, CA.

Purpose of Study: This project aims to evaluate the effectiveness of a health education program implemented by AltaMed Health Services (a non-profit organization comprised of multiple FQHCs) in Los Angeles and Orange County. Our goal is to determine whether participation in a health education program leads to improvement in glycemic control, lipid profile, body mass index and blood pressure compared to patients receiving usual care but did not participate in the program.

Methods Used: We conducted an observational pre-post evaluation of patients with diabetes at AltaMed. We compared changes in HbA1c, BP, LDL-c levels, and BMI among those who attended the class compared to contemporaneous control group.

Summary of Results: We have analyzed data from 1355 patients with diabetes, of whom 368 patients received health education classes and 987 patients did not. Both intervention and control group were similar with approximately 56% female participants. Mean age for both groups was about 54 years and both groups were approximately 90% Hispanic. Unadjusted change in A1c from baseline to 6 months post for the intervention group was -1.4% (SD=0.1) and for the control group was -0.8% (SD=0.1). Both unadjusted and adjusted analyses of the change in BP, LDLc, and BMI are currently underway.

Unadjusted Change in A1c Levels

Variable	Diabetes Education (N=368) (mean ± SD)	Control (N=987) (mean ± SD)	P-value
Baseline A1c (%)	10.2 ± 1.7	9.8 ± 1.6	0.0006
Post A1c (%)	8.7 ± 1.8	9.0 ± 1.7	0.009
Change Pre to Post	-1.4 ± 2.2	-0.8 ± 1.8	<0.0001

Conclusions: Patients exposed to the health education program had significantly greater improvement of -0.6 (SD=0.1) in A1c. Improved glycemic control is associated with long-term reduction in microvascular complications.

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PROMOTING THE ADOPTION OF APPROPRIATE INFANT AND YOUNG CHILD FEEDING PRACTICES IN RURAL VIETNAM THROUGH PEER-TO-PEER SUPPORT GROUPS

Rowan B. University of Washington School of Medicine, Seattle, WA.

Purpose of Study: Childhood malnutrition is a primary contributor to disease in La Hien, a rural commune in northern Vietnam. In 2012, 15 % of children under 5 in the commune were underweight, despite national malnutrition control programs. Previous research suggests childhood malnutrition in the region is largely attributable to inappropriate infant and young child feeding (IYCF) practices. The goal of this project was to increase IYCF knowledge and promote the adoption of appropriate IYCF practices through the creation of village-level peer-to-peer support groups.

Methods Used: A 3-day training course in IYCF support group facilitation was developed using materials from various standard sources, focusing on communication skills and key IYCF recommendations. Vietnamese medical students participated in an initial training and helped to implement a cascade training for village health workers (VHWs) and partnered community members. Students then assisted the newly trained facilitators with their village's first support group meeting.

Summary of Results: Four medical students completed the initial training and implemented the training of 3 VHWs and 3 community members. Each village hosted their first support group meeting with 7-9 participants. Facilitators led discussion, answered questions and distributed IYCF pamphlets, successfully integrating IYCF knowledge with their new facilitation skills. Participants agreed that the meetings were useful and at least two villages plan to continue meeting. Medical students and the local university have agreed to provide follow-up and support, and the commune health center hopes to potentially expand and integrate the project into its current nutrition program. The training materials have also been left with the university to guide future student-led projects.

Conclusions: Village-level peer-to-peer support groups can be an effective way of promoting IYCF discussion and increasing IYCF knowledge among caregivers. This project suggests that these support groups can be successfully implemented in rural areas through local, student-led trainings of VHWs and community members, especially if coupled with the continued support of a regional university. Future work will be necessary to determine if these meetings achieve the goal of increasing uptake of appropriate IYCF behaviors.

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TOBACCO USE INITIATION PREVENTION IN BROWNING, MT

Welder ED. University of Washington School of Medicine, Seattle, WA.

Purpose of Study: Tobacco use is the number one cause of preventable death among American Indians, occurring at twice the mortality rate of other demographic groups in the US. Accordingly, 14.7% of American Indian students living within Montana reservations reported typically smoking 20 or more days per month, compared to 6.4% statewide. This project aims to reduce tobacco use by addressing the problem of tobacco use initiation among Browning youth.

Methods Used: This intervention specifically targeted the use of corporate tobacco, rather than ceremonial tobacco, because studies show that culturally sensitive tobacco use prevention is more effective than other interventions. Collaborative partners included both Tribal Health and local high school volunteers. Tribal Health helped to secure access to community events while high school volunteers, as young locals familiar to the community, made the booths more approachable for the youth. Youth were encouraged to pledge to be "corporate tobacco free" by tracing their hands and signing their names on poster boards while educators discussed the difference between corporate tobacco and ceremonial tobacco, as well as the dangers of tobacco use. Booths were set up at Blackfeet Youth Day and North American Indian Days, both