

Community Health Needs Assessments in Rural Communities Using Principles of Community Based Research

Community Assessment and Education to Promote Behavioral Health Planning and Evaluation (CAPE)

Webinar Presentation by: Dr. Catherine Dane Woodyard, PhD

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Presentation Contents

- ▶ Brief background on the study this methodology is based
- ▶ What is Community Based Participatory Research (CBPR)
 - Why should you incorporate the principles of CBPR into your efforts?
- ▶ What are Community Health Needs Assessments (CHNA)
 - Why should you conduct CHNAs?
- ▶ Methodology, overview of 5 part mix-methods study design
 - Strategies to incorporate CBPR principles and engage your community
- ▶ Data Analyses, Dissemination, Recommendations, and Outcomes



Background

- ▶ The methodology discussed herein was utilized initially in a CHNA conducted in a small, rural town. The purpose was to identify needs, priority health issues, assets, weaknesses, existing resources and organizations that could be utilized to improve health conditions and/or potentially partner.
- ▶ Conducting the CHNA led to building/gaining community trust, engaged residents, high participation levels, rich data sets, and an understanding of community resident's needs and desires.
- ▶ Findings have been and are being used to obtain external funding to build upon and expand programming and efforts regarding improving health status and increasing quality of life for residents.



Introduction

- ▶ Community partnership is a necessary element for improving health and quality of life and is an effective strategy for eliminating health disparities.
- ▶ A critical component in creating strong community partnerships is the use of CBPR as it allows community members, leaders and academicians an opportunity to collaborate and participate actively in the research process.
- ▶ Participants involved in CBPR share their knowledge and experience in helping to identify important issues to be examined, develop research questions in a culturally sensitive manner and use study results to help support pertinent program and policy development or social change.



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Introduction

- ▶ Through involving and building on the strengths of multiple stakeholders, CBPR offers the opportunity for **partnership synergy**
- ▶ Using a CBPR approach enhances the process of **collaboration** and collecting information in hard-to-reach communities making it a viable option and a successful approach to conducting research to improve public health and quality of life.
- ▶ As such, CBPR holds tremendous relevance as health professionals attempt to take action to address the complex and multifaceted health problems of today.



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What is CBPR?

- ▶ CBPR is a partnership approach to research that equitably involves community members, organizational representatives, and researchers in all aspects of the research process and in which all partners contribute expertise and share decision making and ownership.
- ▶ The aim of CBPR is to increase knowledge and understanding of a given phenomenon and integrate the knowledge gained with interventions and policy and social change to improve the health and quality of life of community members.



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Nine (9) Key Principles of CBPR

1. It recognizes the community as a social entity with an identity rather than as a setting or location.
2. It involves systems development and sustainability and builds on strengths and weaknesses within the community.
3. It is participatory and facilitates collaborative, equitable partnership in all phases of the research.
4. It integrates knowledge and achieves a balance between research and action for the mutual benefit of all partners.
5. It promotes a co-learning and capacity building among all partners.
6. It involves systems development through a cyclical and iterative process.
7. It emphasizes public health problems of local relevance and also ecological perspectives that recognize and attend to the multiple determinants of health and disease.
8. It disseminates findings and knowledge gained to all partners and involves all partners in the dissemination process.
9. It requires a long-term process and commitment to sustainability.

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CBPR

- ▶ Why use CBPR principles?
 - Importance of partnership/resources
 - Builds trust and fosters better relationships and collaborations
 - Community engagement/buy-in/collaboration and participation
 - The CDC and many divisions of the NIH have increasingly called for proposals that mandate the use of CBPR such that in the last few years, CBPR programs funded by NIH and CDC have tripled.
- ▶ If using CBPR principles, a necessary first step to developing effective programs is to conduct a CHNA.
 - CHNA's often serve as the initial step to engaging the community, identifying assets, needs and priority health issues, building partnerships and obtaining external funding.

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Introduction

- ▶ CHNA's are commonly conducted to determine perceived needs of communities, to identify priority health issues and existing resources and organizations, to measure community capacity and gauge interest.
- ▶ Why Conduct CHNA?
 - To understand the community's needs
 - To let resident's voices be heard
 - Many funding agencies now require a needs assessment as part of the application requirements on grant proposals

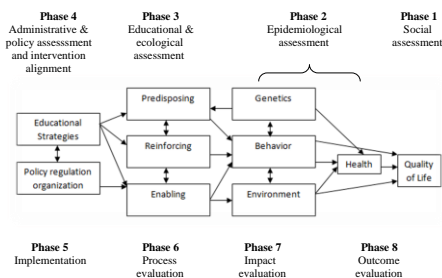
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Getting Started

- ▶ I recommend using the **Precede-Proceed** Health Program Planning Model which is model that guides the formative assessment (CHNA) and subsequent program planning, development, implementation and evaluation of your programs.
- ▶ Findings from CHNA's allow for a better understanding of the current picture of health and the environment and will identify possible solutions and necessary directions to take to improve the health of the community.

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Precede- Proceed Model



Source: Green & Kreuter, 2005, p.10.

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Methodology

1. Focus Groups
2. Interviews
 - 11 Key Informant Interviews
 - 6 informal interviews
- Environment Scan and Assessment:**
3. Assessment of the nutrition environment using the Nutrition Environment Measures Survey (NEMS)
4. Assessment of the built environment using the Rural Active Living Assessment (RALA)
5. Policy Assessment

Focus Groups

- ▶ **Participant Recruitment**
 - Community meetings
 - Worksites
 - Purposive sampling (CBPR)
 - Demographic analysis after 4 focus groups
- ▶ **8 focus groups, 67 community residents**
 - 4-12 people per group
 - 60-90 minutes
 - Conducted 2 more focus with students and teachers as follow-up.
- ▶ **Incentives: Refreshments and \$20 gift cards**

Key Informant Interviews

- ▶ **Chose interviewees purposively**
 - Input from leaders in the community
 - Existing Literature
 - Important to have representatives from all areas
- ▶ **Key Informants**
 - Mayor, Chancery Clerk, Librarian, Representative from Health Department
 - School Superintendent (school nurse)
 - Local Farmer and Land Owner, Local Business Owner
 - Hospital Administrator, Doctor, Registered Dietician
 - Executive Director of Community Organization

Built Environment: RALA

- ▶ **Rural Active Living Assessment (RALA)**
- ▶ **A PDF of the RALA and the training manual are available online for free on the Robert Wood Johnson Foundation website**
- ▶ **Developed to collect data on physical environment features and amenities, town characteristics, community programs, and policies that potentially influence levels of physical activity among community residents.**

Rural Active Living Assessment (RALA)

- ▶ Intended for use in rural communities of less than 10,000 people
- ▶ Comprehensive measure that addresses many factors important to active living in rural communities.
- ▶ The RALA provides users a resource to assess rural environments for activity-friendliness and may be used to inform the design of interventions and programs to help rural communities become more active and healthy.

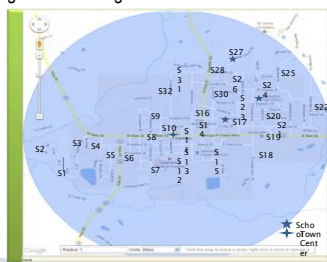
Rural Active Living Assessment (RALA)

- ▶ The RALA Tools include three separate components:
 1. Town-Wide (18 town characteristic questions and inventory of 15 recreational amenities)
 2. Program and Policy (20 questions)
 3. Street Segment (28 questions).
- ▶ Can be used individually or as a whole instrument.

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RALA Segment Assessment

- ▶ 32 segments within a 1 mile radius of the town center were strategically chosen for assessment.
- ▶ 31 segments are single lane roads/ 1 multi lane road



Rural Active Living Assessment (RALA)

- ▶ [Link to RALA Tools](#)
- ▶ Here is actual web address
 - <http://activelivingresearch.org/rural-active-living-assessment-rala-tools>



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Nutrition Environment: NEMS

- ▶ Nutrition Environment Measures Survey (NEMS)
- ▶ The environment surrounding eating and nutrition is believed to contribute to obesity and chronic diseases.
 - NEMS was developed to better understand the nutrition environment and to assess factors believed to contribute to food choices in restaurants and stores
- ▶ NEMS measures focus on surveying community and consumer nutrition environments, which include the type and location of food outlets, availability of healthful food choices and information, pricing, signage/promotion and placement of healthier food products.



Nutrition Environment Measures Survey (NEMS)

- ▶ The NEMS is comprised of two parts:
 1. NEMS-Restaurant (NEMS-R)
 2. NEMS-Store (NEMS-S)
- ▶ [Link to NEMS Instrument and website](#)
- ▶ Here is the actual website address
 - <http://www.med.upenn.edu/nems/measures.shtml>



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Policy Assessment

- ▶ Suggestions for policies to asses:
 - Joint-Use Agreements
 - Complete Streets
 - Tobacco-Free Air/ Smoke Free Air
 - School Physical Activity Policy Assessment – SPAPA
 - <http://activelivingresearch.org/school-physical-activity-policy-assessment-s-papa-0>
 - Housing and Zoning Policies
 - Helmet Policies/Ordinances
 - Policies incorporating activity and exercise into the day (city officials, other worksites, schools)
 - Vending Machine Contents

Data Analyses

- ▶ Interviews and focus groups need to be audio recorded, transcribed, and verified for accuracy.
- ▶ The transcriptions then need to be coded and content analyzed to identify themes.
 - It is suggested that two individuals code each transcript independently to identify key words, phrases and dominant themes.
 - Subsequently, the two coders discuss and compare each transcript and come to a consensus on the coding of the transcript.

Data Analyses

- ▶ The statistical package for the Social Sciences (SPSS) for Windows is user-friendly software that can be used for quantitative data analyses.
- ▶ Descriptive statistics should be computed for items included in the instruments used for the environmental scan (i.e. RALA, NEMS, S/PAPA), including measures of frequency, central tendency, and variation where applicable.
- ▶ Data analyses is often where the importance of having a university partner comes into play.

Dissemination of Results

- ▶ It is important to disseminate results to the community, all stakeholders, and funders
- ▶ Peer-Reviewed Articles
- ▶ Conference presentations
- ▶ Other meetings and invited presentations
- ▶ Local and State Media Outlets
- ▶ Websites
- ▶ Community receptions/events

Our Use of CPBR Principles

1. Community participation in developing interview guides
2. Focus group recruitment process – purposive sampling
3. Community resident's read, interpreted, and coded transcripts
4. Community reception to inform the community of results
5. Article written for paper informing residents of results
6. Community space used for focus groups
7. Community involvement in planning and hosting the results reception and presentation
8. Collaboration of project director and hospital administrator
9. Development of Community Health Committee

Recommendations

1. The use of CPBR principles
2. The use of this study methodology as a whole for the CHNA
3. The use of our participant recruitment techniques
4. The use of multiple sources of data collection (triangulation)
5. Holding community events during data analyses period, maintaining presence in the community
6. Be mindful of the scheduling of events
7. Development of a community health committee
8. Use of local newspaper – or other media outlet – as a way to reach and communicate with residents
9. Build and Nurture Partnerships
*Community/University

Outcomes

- ▶ Outcomes of a CHNA using CPBR can include:
 - The development of a sustainable network of community and university (or other organization) partners committed to improving health
 - The identification of priority health issues and behaviors influencing health, perceived needs and existing resources available to residents, allows for resident's voices to be heard.
 - Community engagement, ownership and participation
 - Findings should be used to inform future directions and program planning as well as be used as part of grant proposals for external funding in order to implement programs identified through the CHNA

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I would like to take this opportunity to thank my colleagues, the community where I work and our funders, as well as, CAPE for the invitation and opportunity to present this webinar today.

Questions and Comments

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