Prevention Research Center of Michigan

PRC MI

New Horizons in Health Partnerships

2009

Prevention Research Center of Michigan faculty, staff and student interns

Dear Readers:

As we prepare this report, we are embarking on a new chapter for the Prevention Research Center of Michigan. In October of 2009, we begin a new five-year funding period. Our core research project, developed with our community partners, focuses on promoting healthy sexuality among young adults. Sexually transmitted diseases, including HIV/AIDS, are a serious problem in Genesee and surrounding counties and disproportionately affect the African American community. We will build on an existing peer education program by using social technologies to reach networks of people who may be at risk for infections. This project challenges us to develop creative solutions to a public health issue that has been intractable to prior prevention efforts. As technologies such as Facebook and Twitter change the nature of social relationships, we must adapt our prevention efforts to explore how these tools can be used to improve health.

Innovation is a vital component of the projects featured in this report. African American men have among the shortest life expectancies of any population group in the country, yet few health initiatives address their needs. Men 4 Health is a project to learn from African American men about factors in their lives and communities that positively and negatively affect their health. The goal of Men 4 Health is to gather information about barriers to positive health behaviors among urban African American men and to design specifically tailored interventions. Another current PRC/MI project is using new media technologies to enhance the work of local health departments. Local Public Health 2.0 is assisting health departments to use interactive technologies to improve their internal and external communications. PRC/MI and the UM Health Sciences Libraries are working to adapt programs such as blogs and wikis to meet public health department needs. The investigators hope to create a Web 2.0 tool kit that can be used by many public health providers.

A long-term goal of our partnership is to share our experiences in community based research with other academic and community organizations. We have received a grant from the National Institutes of Health to develop a series of workshops to prepare community organizations and academics to form collaborative research partnerships for disease prevention and health promotion. This grant is unique because it provides funding directly to the university and to the lead community partner organization, YOUR Center. We offered the first round of trainings the spring of this year and will repeat the modules in the fall of 2009.

We are looking ahead to the next five years with great anticipation and will keep you updated on the progress of our core Healthy Sexuality project and other PRC/MI activities.

In good health,

Marc Zimmerman, Ph.D.
Principal Investigator and Director

Susan Morrel-Samuels, MA, MPH
Managing Director

Partnerships in Research: Engagement for Action

Participants in the PIR Community Engagement Module discuss research.

The word "community" evokes images of people gathering to celebrate common interests. By contrast, the word "research" may bring to mind an isolated academic in front of a data-filled computer screen. Community members and researchers who work together to accomplish mutual goals must bridge many conceptual and cultural divides. Partners in Research: Engagement for Action (PIR) prepares university faculty and community organization staff to develop strong research partnerships. Academic researchers and community-based partners face challenges when embarking on collaborative projects. PIR equips participants to build lasting partnerships based on respect, communication, and trust. PIR includes three components: Community Engagement, Researcher Engagement, and Policy Engagement.

In the spring of 2009, community partners and researchers participated in workshops to learn about community-based research and to form new partnerships. The two groups engaged in discussions and participated in hands-on activities to lay the groundwork for research collaborations. The community participants included faith leaders, health department staff, health advocacy group members, community organizers and retirees. Faculty and staff from the UM Ann Arbor and Flint campuses comprised the academic group. Participants' research interests included access to healthy food and physical activity, health literacy, environmental issues and health disparities. Both groups were eager to network with potential contacts and learn more about ways in which the research process can benefit communities.

Community Engagement

PRC/MI community partners developed and led the Community Engagement Module. The workshops introduced participants to the history of health research, how research is conducted, how to assess the risks and benefits of participating in research, and how research can be used to improve community health. Participants discussed case studies that included differences in opinion that emerged from community and academic collaboration. For example, one case concerned a project in which community members had little input in the research design and wanted to change the intervention that researchers had proposed. The discussion centered around approaches to reaching a mutually acceptable solution. Community members were encouraged to brainstorm ideas for new research to address their health priorities.

The Researcher Engagement Module prepared researchers to collaborate with community organizations. Researchers learned about the benefits and challenges of partnering with communities, the principles of community-based research, and how to communicate scientific concepts to diverse audiences. The participants received a first-hand exposure to the community through a windshield tour of Flint, led by a local organizer.

The tour included visits to YOUR Center, which provides HIV/AIDS prevention services; the Sylvester Broome Jr. Training Technology Center, which offers education, job training, and placement for youth; and the Rosa Parks Peace Park, which was designed and built by teens from Youth Empowerment Solutions for Peaceful Communities (YES). Participants from the community and researcher trainings gathered after the tour for lunch and networking.

Policy Engagement

This module brought researchers and community partners together to learn about the policy process. The Director of Government Relations at the UM School of Public Health demonstrated how to combine scientific evidence with community experience to inform policy makers. Groups of researchers and community partners developed communication materials to achieve policy goals for health issues such as HIV and STI prevention.

Outcomes

Comments from participants in PIR included the following: "The respect and give and take between the community and university partners provides a terrific model for what can be accomplished. The impact of the integrity of the science and the quality of the relationships is very tangible." "This training was very educational, interesting, engaging and thought-provoking. I learned a lot." Pre and post-test results indicated that community and university participants showed significant improvements in the areas of trust, communication, equity, commitment, and policy efficacy.

The Prevention Research Center of Michigan (PRC/MI) and Community Based Organization Partners (CBOP) are collaborating with the Michigan Institute for Clinical Health Research (MICHR) and the UM SPH Community-Based Public Health program on the PIR project. PIR is funded by the National Institutes of Health under a unique mechanism that provides linked grants to academic and community organizations.

For more information please contact Susan Morrel-Samuels (734/647-0219, sumosa@umich.edu).

Pillars of Partnership

PIR participants were asked to create structures that represented strong research partnerships. The structures provided a basis for discussions about trust, communication, equity, and commitment.

Community Partner Spotlight

Bettina Campbell, MSW
Community Principal Investigator of
PIR and Healthy Sexuality Core Project

Bettina Campbell, Executive Director of YOUR Center in Flint, is the Community Principal Investigator of two new PRC/MI projects, Partners in Research and the healthy sexuality core research project.

In collaboration with other members of the Community Based Organization Partners (CBOP), Mrs. Campbell coordinated development of the PIR Community Engagement Module and worked with other CBOP members to recruit participants and conduct the training program.

Mrs. Campbell has also been a driving force in the development of the new core research project. As part of her work with YOUR Center, she organizes HIV Outreach, Prevention and Education (HOPE) parties to reduce the spread of STI/HIV by providing culturally specific health education and risk reduction activities to African American men and women.

Although community PI's face time and resource constraints, Mrs. Campbell believes that community-based research is important because it provides valuable benefits.
"It gives communities access to quality research. The community realizes the need to create sound, reliable research instruments to do the work that we do."

New PRC/MI Research Project Promotes Healthy Sexuality

Need: Sexually transmitted infections and HIV/AIDS are serious health problems in Genesee and Saginaw counties. African Americans in these counties are disproportionately affected.

Population: The Healthy Sexuality project will focus on 18-24 year olds. This age group has higher rates of STIs than older adults. They are also forming health habits that may have negative or positive influences over their life-course.

Goals: The Healthy Sexuality program will: a) promote knowledge, healthy behaviors, attitudes, and perceived norms; b) develop positive peer networks for healthy sexuality; c) increase STI testing; and d) reduce rates of STIs.

Program: The program has two parts: Peer Education House Parties and Social Technologies. The house parties provide safe and culturally-sensitive environments for education and support. The social technologies expand educational opportunities, enhance peer mentoring, establish online sources of information, and create an online community to reinforce healthy sexuality norms.

Men 4 Health

When African American men gather together

on a Saturday or Sunday afternoon to watch a football game, what do you expect them to snack on? Chips? Buffalo Wings? Beer? How do you think they would react if offered salad with grilled chicken, water and fruit? When they get together at other times, are African American men typically sedentary or active?

Brotherhood - Healthy Eating
MEN 4 Health
Physical Activity - Reduce Stress

If you ask men how they could be healthier, most of them know they should be eating more fresh fruits and vegetables, less sugar and high fat foods, and being physically active. Many African American men in Southeast Michigan, however, aren't following their own advice. Why, and what can we do about it?

Men 4 Health (M4H) is a five-year community-based participatory research project that is working with men and community-based organizations in Southeast Michigan to learn about and improve the eating, physical activity, and overall health of African American men who are 35 and older. It is at this time in their lives that African American men start to develop a host of chronic diseases associated with poor eating habits and inadequate physical activity. Men's health does not occur in isolation; spouses and other women often play critical roles in men's health behaviors. Thus, along with men's perspectives on their own health, it is important to consider women's roles in men's health and their perspectives on the factors that may hinder or promote healthy lifestyles.

To date, we have conducted focus groups with 110 African American men and 77 significant women in their lives. From our preliminary data, men have indicated that time, daily demands, having a physician-diagnosed health problem, and availability of healthy food and places to exercise were critical factors influencing their eating and activity level. Significant women in men's lives suggested that their own health habits, men's age and life stage, and support from family were important factors affecting men's health behaviors. We plan to collect additional information on what may motivate African American men to engage in healthier behaviors and the potential roles that men's organizations (fraternal, social, civic, and religious groups), faith-based institutions, and community-based organizations could play in men's health promotion.

What we learn from our discussion groups and other data will help us create a program that addresses the health needs of African American men. We know, however, that this is a particularly complex task. African American communities in Southeast Michigan lack affordable and easily accessible places for physical activity, purchasing fresh fruits and vegetables, and eating healthy food. Even if African American men can access these resources, making their own health a priority is often secondary to meeting competing goals such as earning an adequate income and having sufficient time and energy to meet the demands of being a worker, a spouse, and a parent. African American men may cope with stressors in their lives by eating high-fat comfort foods, engaging in sedentary 'escapist' activities (i.e., watching television and movies, playing video games), and being physically inactive. M4H recognizes the complexity of challenges that African American men face, and we look forward to continuing to work with communities to develop strategies that will help African American men live longer, healthier lives.

Men 4 Health is funded by the American Cancer Society, the UM Comprehensive Cancer Center's Cancer Research Committee, and The Michigan Center for Urban African American Aging Research.

Access to healthy food, at the market and at home, is key to improving African American men's health.

"I think getting older…sometimes we can get an attitude: I'm going to die anyway, so I might as well eat what I want to eat and keep on eating. But I think the challenge is really to look at it and say, `Do I want to live longer? Do I want to invest in healthy eating?´ And I think that's the most difficult part for us, as black men, to really say, `Hey, I really need to adjust my eating habits.´"

For More Information

For more information about M4H, please contact Derek Griffith, PhD, Principal Investigator (derekmg@umich.edu; 734/936-1318) or Julie Allen, MPH, Managing Director (joallen@umich.edu; 734/647-0542).

Web 2.0 in Local Public Health

Web 2.0 technologies, including blogs, wikis, and social networking web sites, emphasize community building, communication, and collaboration and are at the forefront of how people are finding and sharing health information online. Web 2.0 has enormous potential to revolutionize ways in which public health workers reach their communities and improve communication within their organization and within the profession.

Over the past 18 months, the Prevention Research Center of Michigan has partnered with the University of Michigan Health Sciences Libraries, Genesee County Public Health Department and Monroe County Public Health Department to explore the use of Web 2.0 technologies in local public health.

The goal of Web 2.0 in Local Public Health is to develop best practices for integrating technologies into the work of local public health departments in order to improve communication and information sharing within the department, between partner organizations, and with the populations that they serve.

What is Web 2.0?

The concept of Web 2.0 describes all of the websites and applications that allow users to contribute and share ideas, and to interact within an online environment. Examples include blogs, wikis, virtual worlds, social networking sites, social bookmarking, and video sharing sites. Web 2.0 technologies are inexpensive, widely available, and do not require any special technology skills to implement. For these reasons, they are ideal tools for local public health departments.

Web 2.0 technologies can be implemented to improve efficiency and effectiveness in many aspects of public health practice, including individual professional development, internal departmental communications, inter-departmental collaborations, and communication and outreach to the populations that each organization serves.

Needs assessment

The project team surveyed the entire staff at both health departments to assess their knowledge, attitudes and use of Web 2.0 technologies. Although many of the technologies were viewed as more suitable for a younger generation, over 97% of the staff responded that they were very interested in learning how they could be applied in the workplace.

Training and Implementation

The project team provided training on a wide variety of Web 2.0 technologies and worked with both health departments on projects which integrate technologies into their work. The projects addressed both internal and external health department communications.

At Genesee County, the team held a kick-off meeting where they introduced Web 2.0 concepts. Health department staff brainstormed ideas about how these technologies could be used. Ideas included a searchable policy wiki, collaborative writing tools for policy and press release editing and approval and a blog for announcements. The participants also discussed using social networks for tobacco reduction outreach and STI prevention.

Examples of Web 2.0 applications for health departments include:

- Departmental wiki for meeting minutes and report writing
- Staff blog for announcements and discussion of issues and current topics
- SlideShare to share PowerPoint presentations with colleagues and the public
- Public blog to promote health clinics and community events
- Program or department Facebook fan page to share information
- Mapping Mashup to display geographic data for the public
- Social bookmarking to gather collections of web site links to share with the public

After setting priorities and evaluating possible platforms, the staff decided to develop a Google-based Intranet site. The wiki-based site incorporates a shared calendar and a blog to post staff announcements. The site also includes a wiki-based policy manual that allows staff to search and comment on existing policies. The project team also provided in-depth training on using Google Docs, which will allow the health department staff to easily route, edit, and approve documents.

At Monroe County, the project team worked with the management, marketing, and technology teams. They decided to create technology quick tip videos using Jing, a simple screen capture application. They are posting these videos on a blog monthly. They are also considering using social network sites for their WIC program.

For more information, contact Alison Grodzinski, alisonrg@umich.edu. This project is supported under a subcontract, NO1-LM-6-3503, CFDA 93.879, between the Board of Trustees of the University of Illinois and the University of Michigan.

Keys to Success

Coaching. One of the main roles of the team was to support and encourage the staff in the use of technologies. The team met with staff in all departments, held trainings on specific projects or technologies and implemented a help line for additional questions. It was essential that we remained available to provide feedback and encouragement throughout the process.

Creativity. Web 2.0 tools are plentiful, and the landscape is constantly changing. A first step is to identify a need within the workplace and then think creatively about the tool that is best suited. It is very easy to become excited about using a specific technology because it is popular and trendy. However it is important to keep in mind that what is popular today may not be popular tomorrow. Remaining flexible is essential.

Commitment. Finally, there needs to be a strong commitment to the core principles of Web 2.0 technologies by all parties involved - the administration, the IT staff, and the public health workers who will be creating and maintaining the content. Commitment to train, implement, and maintain a Web 2.0 presence at all levels is essential to success.

Selected Publications

Adolescent Violence: Risk, Resilience, and Prevention

Kretman, S.E., Zimmerman, M.A., Morrel-Samuels, S., and Hudson, D. (2009). In R.J. DiClemente, Santelli, J.S., and Crosby, R.A. (Eds.), *Adolescent Health Understanding and Preventing Risk Behaviors* (pp. 213-230). San Francisco, CA: Jossey-Bass.

This chapter describes a resiliency model as it applies to violent behavior among adolescents. The authors contrast interventions based on a deficit-oriented approach, which focuses on adverse outcomes related to specific risk factors, and resiliency theory, which focuses on enhancing resources to improve health and reduce youth violence. The chapter includes examples of resiliency based interventions.

The Association of Incarceration with Community Health and Racial Health Disparities

Kruger, D.J., De Loney, E.H. (2009).

Progress in Community Health Partnerships, 3(2), 113-121.

This study used data from the Speak to Your Health! Community Survey to explore how incarceration of a friend or family member is associated with physical and mental health. Respondents with a recently incarcerated friend or relative reported poorer mental and physical health, even when their demographic characteristics and health-related behaviors were taken into account. African Americans were more likely to know someone who was incarcerated and to feel closer to that person. These results show that mental and physical health may be affected by having a close friend or family member in prison. The authors suggest that more attention is needed on the effects of incarceration on those left behind.

Assessing Emergency Response Training Needs of Local Environmental Health Professionals

Reischl, T.M., Sarigiannis, A.N., and Tilden, Jr., J. (2008).

Journal of Environmental Health, 71(2), 14-19.

The Michigan Center for Public Health Preparedness and the Michigan Department of Community Health conducted a survey of environmental health professionals to determine their self-rated level of confidence for demonstrating relevant emergency planning and response competencies and their specific training topic preferences. The survey established baseline needs assessment data to track progress toward increased readiness after implementation of planning, training, and other activities.

Growing Vegetables and Values: Benefits of Neighborhood-Based Community Gardens for Youth Development and Nutrition

Allen, J.O., Alaimo, K., Elam, D., and Perry, E. (2008).

Journal of Hunger and Environmental Nutrition, 3(4), 418-434.

This paper describes two case studies exploring the effects of neighborhood-based urban community gardens on youth development in Flint, Michigan. The gardens provided youth with constructive activities during their free time, an outlet for community involvement and improvement, and opportunities for interaction with neighbors, peers, and adult mentors. They also learned about nutrition and were able to eat the fresh vegetables they grew in the garden.

Mapping a Message for Faith Leaders: Encouraging Community Health Promotion With Local Health Data

Kruger, D.J., Lewis, Y., and Schlemmer, E. (2009).

Health Promotion Practice OnlineFirst, 1-8.

Mapping a Message for Faith Leaders (MMFL) provided neighborhood level data from the Speak to Your Health! Community Survey to churches in a coalition coordinated by Faith Access to Community Economic Development (FACED), a faith-based nonprofit. The information was distributed in newsletter format to the churches and was used by faith leaders for community-specific health promotion purposes.

Selected Current Projects

Developing Locally-Tailored Prevention Programming for Children of Incarcerated Mothers

The PRC/MI is collaborating with Motherly Intercession on a project to tailor a family intervention for children of incarcerated mothers and their caregivers. The intervention will provide academic and social support for children and offer caregivers and parents parenting education. Motherly Intercession provides a variety of social service programs for children and their mothers in correctional facilities, including Bonding from a Distance, a program in which children visit their incarcerated mothers, and Love and Learning, an afterschool program focused on academic support and tutoring. This two-year project is funded by the National Institute of Mental Health. For more information, please contact Alison Miller, PhD, at alimill@umich.edu, or Shirley Cochran at scoc736955@aol.com.

Variations in Immunization Practices

The goal of Variation in Immunization Practices (VIP) is to conduct rigorous research on key immunization issues of the day. VIP researchers have studied such topics as practice-level costs and reimbursement for childhood immunizations, nurses' attitudes and behaviors around flu vaccination, physician preferences related to new childhood immunization recommendations, and insurance coverage for adolescent and adult vaccines. Findings have been presented directly to CDC officials to inform recommendations and policy decisions, and have been published in peer-reviewed journals. For more information, please contact Sarah Clark at saclark@umich.edu.

Managing Epilepsy Well Network for Epilepsy Self Management

The PRC/MI is participating in the Managing Epilepsy Well Network for Epilepsy Self Management in partnership with the Epilepsy Foundation of Michigan and the Center for Managing Chronic Disease. The goal is to study the experiences and effects of self management interventions for epilepsy and other chronic diseases. In addition to conducting a review of existing programs to identify chronic disease and epilepsy self-management models, researchers will interview more than 50 program directors to better understand their design and implementation. The study team will work with an expert panel to make recommendations for the implementation and evaluation of promising interventions. For more information, please contact Shelley Stoll at scstoll@umich.edu.

ACTS of Wellness

The Prevention Research Center of Michigan, the UM Cancer Center, and the University of North Carolina are partnering to develop, implement, and evaluate the effectiveness of a program to increase colorectal cancer screening among adults age 50 and over who are members of African American churches. Using community-based participatory methods, the research team has adapted evidence-based interventions to develop a culturally appropriate multi-component program. Interventions include personally custom-tailored health communications and videos, interpersonal peer counseling based on motivational interviewing principles, decision aids, and church activities. For more information, please contact Aisha Langford at alangfor@umich.edu.

Reducing Childhood Obesity: The Effects of School-Based Interventions

This research project will evaluate the Blue Cross Blue Shield of Michigan (BCBSM) Building Healthy Communities grant program. We will focus on the effects of BCBSM investing in a school-based preventive intervention strategy in approximately 30 elementary schools throughout the State of Michigan. This multi-level strategy, *Building Healthy Communities: Engaging Elementary Schools and Community Partners*, provides grants to support schools in completing school- and community-based assessments, implementing physical activity and nutrition curriculums for students and families. The results of this study will inform the development of successful school-based and community-based interventions to address childhood obesity. For more information, please contact Tom Reischl at reischl@umich.edu.

For a complete list of PRC/MI projects see: http://www.sph.umich.edu/prc/projects/

PRC MI Prevention RESEARCH CENTER of MICHIGAN

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