

Community Partnerships on Obesity & Diabetes

Claire Townsend, DrPH

Department of Native Hawaiian Health

April 9, 2015

Community-Based Participatory Research

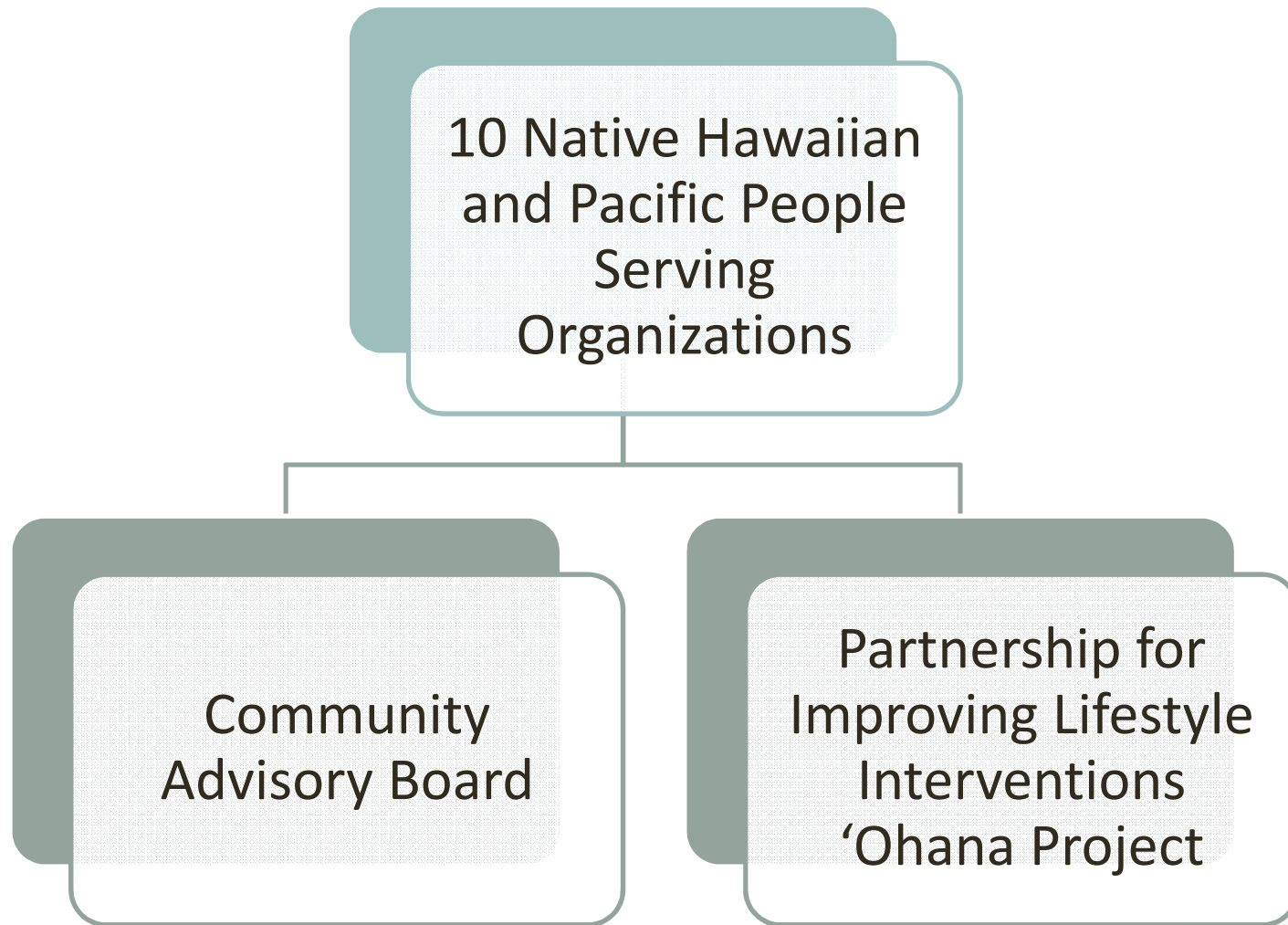
“Collaborative approach to research that involves all partners in the research process and recognizes the unique strengths that each brings. CBPR begins with a research topic of importance to the community with the aim of combining knowledge and action for social change to improve community health and eliminate health disparities.”

W.K. Kellogg Community Scholar's Program (2001)

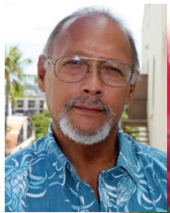
What makes a Community?

- Communities of Place
 - Neighborhood, Island, County, State
- Communities of Identity
 - Culture, values, history, ethnicity
- Communities of Power
 - Laws, policies, public opinion

Community Engagement



PILI 'Ohana Project



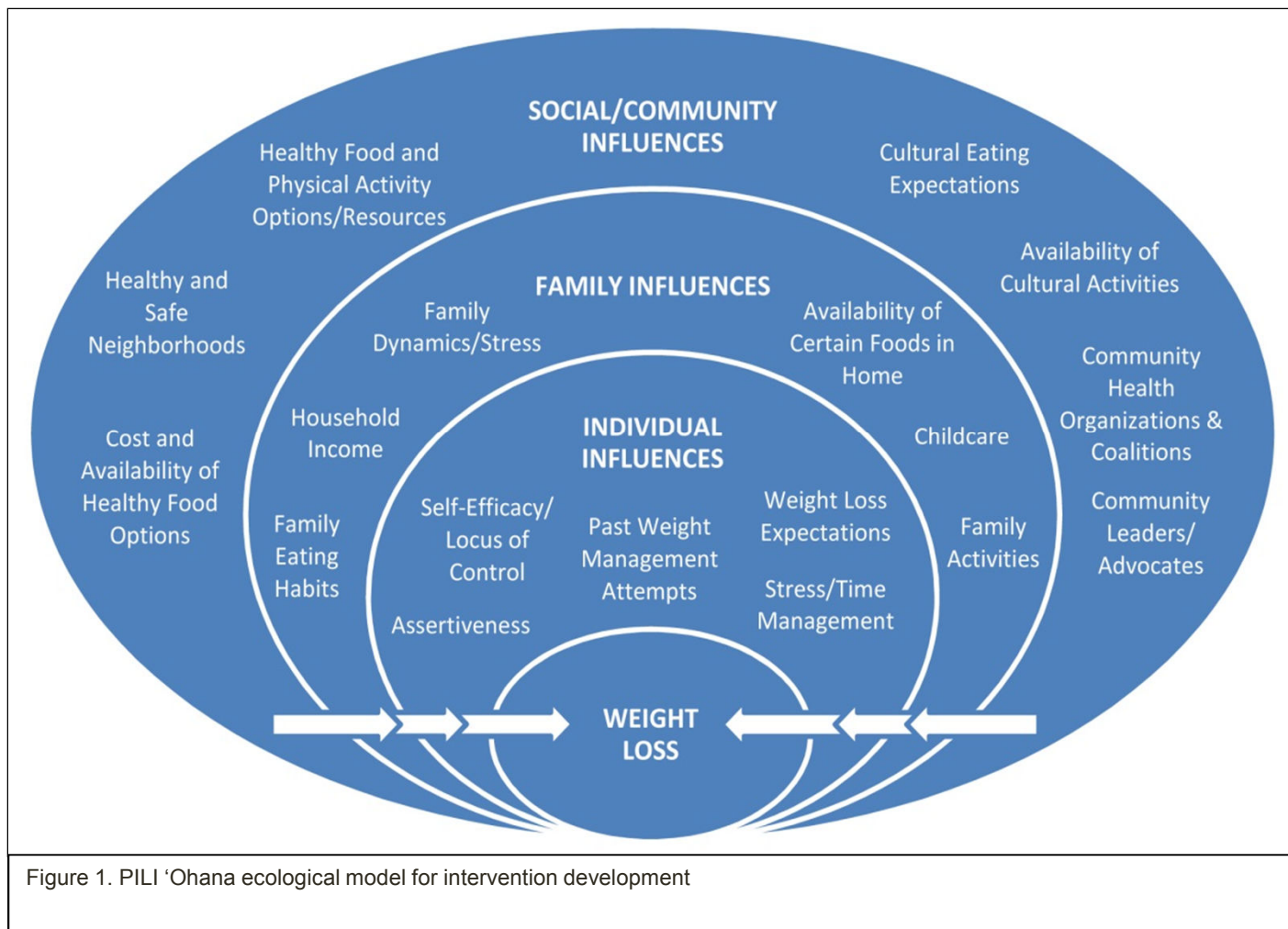
Partnership for Improving Lifestyle Intervention

Nacapoy, AH, et. al (2008). Partnerships to address obesity disparities in Hawaii: The PILI 'Ohana Project. *Hawai'i Medical Journal*, 67(9), 237-241.

Obesity and Type 2 Diabetes

- Native Hawaiians 72.5% are overweight or obese
 - Difference is in obesity
- Native Hawaiians have the highest prevalence of type two diabetes (12.5%)
 - Highest diabetes-related mortality rate
 - Diagnosed younger
 - More preventable hospitalizations
 - More complications

Determinants of Weight Loss



*In: Mau, MK et al. (2010). Translating Diabetes Prevention into Native Hawaiian and Pacific Islander Communities: The PILI 'Ohana Pilot Project. *Progress in Community Health Partnerships: Research, Education, and Action*, 4(1), 7-16.

PILI Lifestyle Program

- 9-month healthy lifestyle program
- Culturally-adapted
- Focuses on:
 - Healthy eating
 - Being physically active
 - Stress and time management
 - Family and community supports



Kaholokula, J.K., et. al (2012). A Family and Community Focused Lifestyle Program Prevents Weight Regain in Asian and Pacific Islanders: A Pilot Randomized Controlled Trial. *Health Education & Behavior*. May 6. 39(4), 386-395.

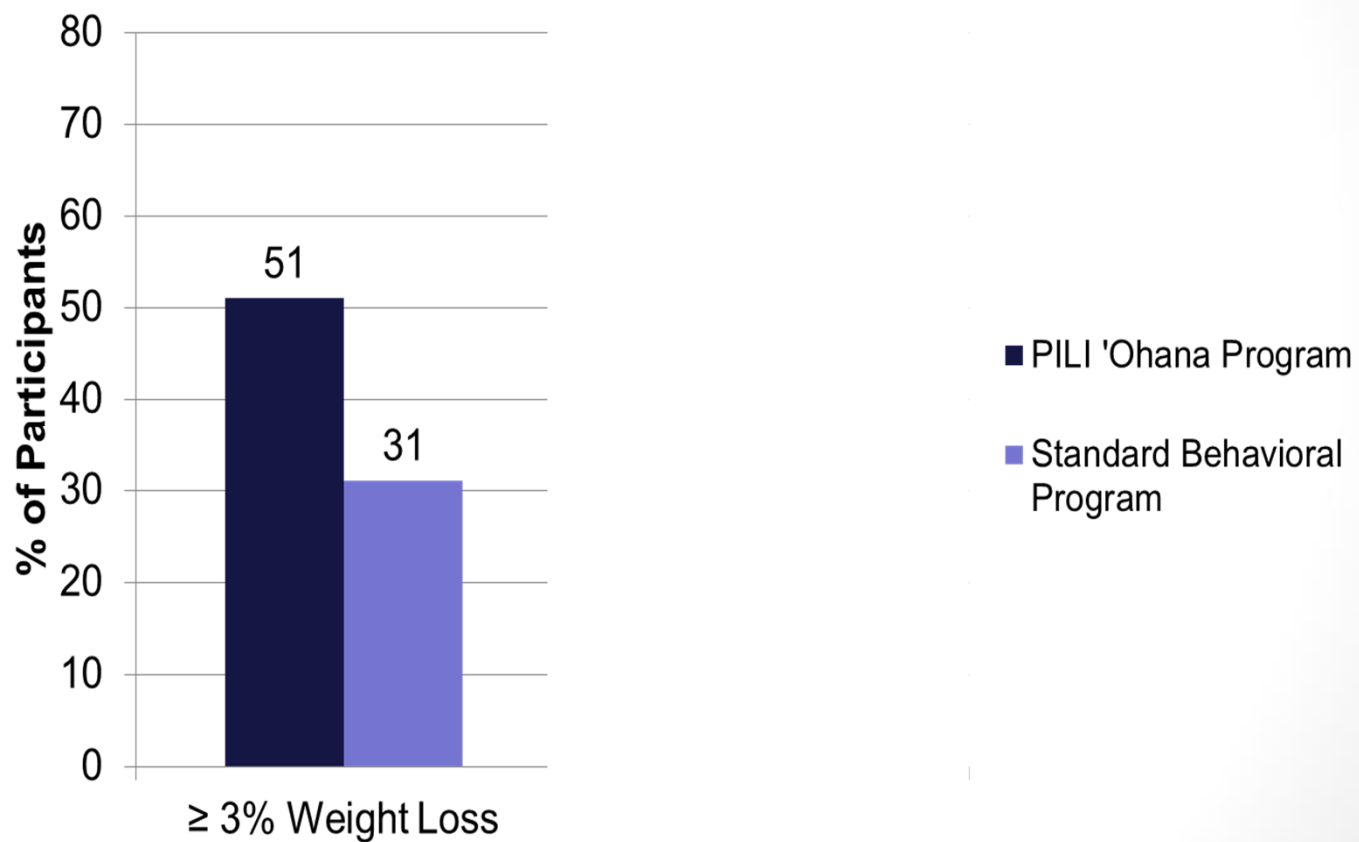
Table 2. Summary of Adaptations from the DPP-LI Matched to the PILI 'Ohana Lifestyle Intervention (POLI)

POLI Lesson and Topic (Translated Curriculum)	DPP-LI Session and Topic (Original Curriculum)
Lesson 1: Introduction to PILI Lifestyle Intervention: <ul style="list-style-type: none"> • Change? It's No Big Thing • The Benefits of Lifestyle Change • Setting Goals • Ways To Stay Motivated 	Session 1A: Welcome to the Lifestyle Balance Program Session 12: The Slippery Slope of Lifestyle Change Session 16: Ways to Stay Motivated
Lesson 2: Getting Started <ul style="list-style-type: none"> • Being Active • Exercising Safely • Three Ways To Eat Less Fat 	Session 1B: Getting Started Being Active Session 3: Being Active: A Way of Life Session 5: Three Ways to Eat Less Fat
Lesson 3: Get Moving <ul style="list-style-type: none"> • Tracking Progress • Being A Fat Detective (Finding Hidden Fats) • Move Those Muscles (Long-Term Benefits) 	Session 1B: Getting Started Being Active & Getting Started Losing Weight Session 4: Be a Fat Detective Session 2: Move Those Muscles
Lesson 4: Making It Fun <ul style="list-style-type: none"> • Healthy Eating With the Plate Method • The 3 Right Ways To Healthy Eating Out • Heart-Strengthening Activities 	Session 6: Healthy Eating Session 10: Four Keys to Healthy Eating Out* Session 13: Jump Start Your Activity Plan
Lesson 5: Keeping It Going <ul style="list-style-type: none"> • Tip The Calorie Balance • Economics of Healthy Eating (Meal Planning)[§] 	Session 8: Tip the Calorie Balance
Lesson 6: Taking Charge <ul style="list-style-type: none"> • Of What's Around You (Battling Temptation) • Make Social Cues Work for You 	Session 7: Take Charge of What's Around You Session 14: Make Social Cues Work for You
Lesson 7: Talking It Out <ul style="list-style-type: none"> • Problem Solving Skills (Exploring Options) • Talking With the Doctor (General Skills for Effective Communication)* 	Session 9: Problem Solving
Lesson 8: Wrapping It Up <ul style="list-style-type: none"> • Managing Negative Thoughts and Emotions • Controlling Stress • Review of All Lessons 	Session 11: Talk Back to Negative Thoughts Session 15: You Can Manage Stress

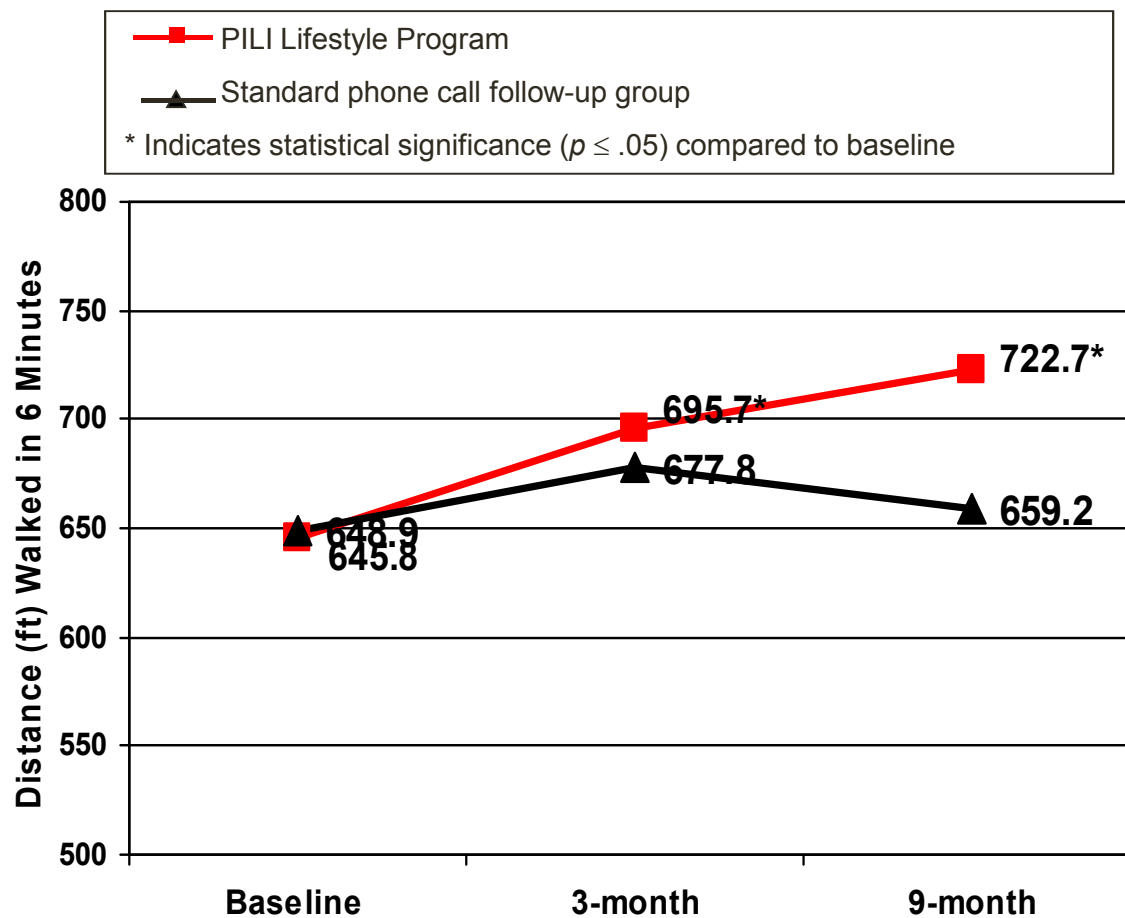
* Supplemented with materials from the "Sugar WATCH" lifestyle curriculum.

[§] Specifically developed to address issue of the high cost of eating healthy (per focus groups and previous education sessions to similar populations).

PILI Weight Loss



PILI Physical Functioning



Partners in Care

- Culturally-adapted diabetes self-care program
- Based on ADA guidelines
- Basic information about diabetes care
- Encourages working with their diabetes team and asking questions
- Emphasizes goals for blood sugar levels, blood pressure, and lipids.

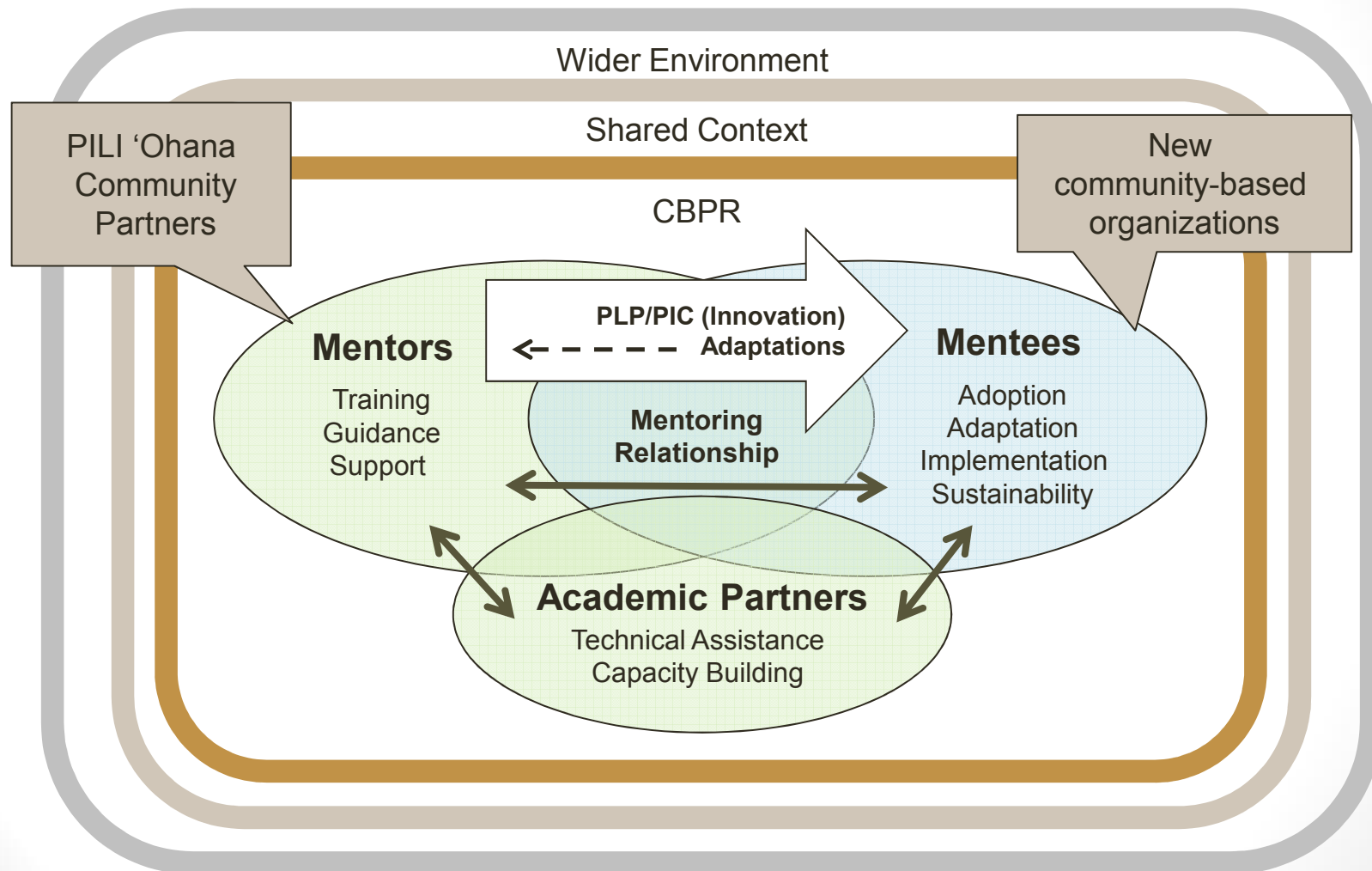


Sinclair, K.A., et. al (2012). Outcomes from a diabetes self-management intervention for Native Hawaiians and Pacific Peoples: Partners in Care. *Annals of Behavioral Medicine*.

PIC: Partners in Care

- Participants had an average drop in A1c of **1.6%** in 3 months compared to 0.3% for control.
- Participants significantly improved their:
 - Diabetes self-care activities
 - Diabetes care profile
 - Problem areas in Diabetes

Mentoring Model



Delafield, R. et. al. (in progress) A CBPR guided model for dissemination of evidenced-based interventions

Benefits of CBPR to Research

- Two-way translation orientation
 - Contextual, cultural
 - Research, scientific
- Broaden definition of evidence
 - Practice and Culturally-based Evidence/Indigenous theories, norms, practices
- Efficacy vs. effectiveness



Kaholokula J.K., et. al. The PILI 'Ohana Project: A Community-Academic Partnership to Eliminate Obesity Disparities in Native Hawaiian and Pacific Islander Communities. In V. M. Brennan, S. K. Kumanyika, and R. E. Zambrana. Obesity Interventions in Underserved US Communities: Evidence and Directions. Johns Hopkins University Press in 2014.

What about the Community?

- Builds “social capital” -- social ties, networks, and support -- associated with well-being
- Uncover and mobilize community assets, strengths, and resources
- Enhance each individual community’s reach and apparent effectiveness



Acknowledgements

- PILI 'Ohana Project: Drs. Keawe'aimoku Kaholokula and Marjorie Mau, DNHH; Dr. Claire Hughes, Hawai'i Maoli; Donna-Marie Palakiko, Ke Ola Mamo; Puni Kekauoha, Kula no na Po'e Hawai'i; Sheryl Raneses, Kōkua Kalihi Valley.
- The project described was supported by Award Number R24MD001660 from the National Institute on Minority Health and Health Disparities. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Center on Minority Health and Health Disparities or the National Institutes of Health.
- The project was also supported by the Office of Hawaiian Affairs and Hawai'i Medical Service Association.