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The Healthy Connections Project: A Community-Based Participatory Research Project Involving Women at Risk for Diabetes and Hypertension

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What Is the Purpose of This Study?

• The purpose of this study was to develop, implement, and evaluate a community health worker (CHW) intervention in Detroit, Michigan, using a community-based participatory research approach.

• The Healthy Connections project builds on the East Side Village Health Worker Partnership, a community-based participatory CHW effort to address social determinants of health on Detroit’s east side that began in 1995.

• The project was designed to recruit community member and provide training as Healthy Connections Advocates (HCAs; CHWs).

• The HCAs were to promote hypertension and type 2 diabetes prevention/treatment through two intervention components:
  1. House Parties, which involved screening and information sharing; and
  2. Informal social networks, which involved disseminating preventive health information.

What Is the Problem?

• African American and Latina women residing in neighborhoods with lower socioeconomic status are at increased risk of hypertension and type 2 diabetes

What Are the Findings?

• Of those who participated in the HCA (n = 12) training program, 67% (8) became certified as HCAs.

• A total of 1,428 individuals had their blood pressure and/or glucose screened at these gatherings.

• Of those who attended House Parties, 93% were African American, 4% Hispanic, 2% non-Hispanic whites, and 1% other racial and ethnic groups.

• Of the individuals who participated in the House Parties, 70% (953) had blood pressure readings that were considered prehypertensive, high, urgent, or emergency.

• Of those who had high, urgent, and emergency blood levels read, 55% indicated that they had not been previously diagnosed with high blood pressure.

• Of the informal social network members who returned survey forms, 28% (62) indicated their willingness to participate in interviews to assess those interactions; of those, 87% were African American and 40% were 60 years or older.

• Of those who returned forms, more than half received health information on diabetes screening (69%), hypertension screening (68%), healthy eating (69%), and physical activity (58%).
Who Should Care Most?

- CHWs.
- CHWs employers such as health departments, nonprofit organizations, hospitals, community health centers, and community- and faith-based organizations.
- Academicians.
- Primary care providers.
- Public health professionals and other allied health workers.
- CHW programs funders, including state, local, and national governments, foundations, and philanthropies.

Recommendations for Action

- The findings from the study suggest that CHW interventions may be a viable component of multilevel interventions to address health disparities in hypertension and type 2 diabetes.
- The potential to implement CHW intervention at a broader scale may offer important approaches for future interventions.
- The insights, skills, and expertise of members of the Steering Committee were critical in the development of training materials, implementation of initial and ongoing training programs, design of the House Party protocols, and documentation of the project forms, and provided support and oversight to the project.
- Results of this study suggest that the HCAs were effective in reaching women at high risk of hypertension and type 2 diabetes for screening and dissemination of health information.