

Latinas, Tabaco, y Cancer: Building Solidarity for a Healthier Community

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Objectives

1. Discuss the Latinas, Tabaco, y Cáncer (LTC) program, an ongoing community-based holistic health promotion program focused on towards immigrant women
2. Describe the community capacity building efforts including core concepts of participation, empowerment, collective efficacy, and social capital.
3. Share findings from the recent survey of program participants and opportunities for next steps





Tobacco & Health

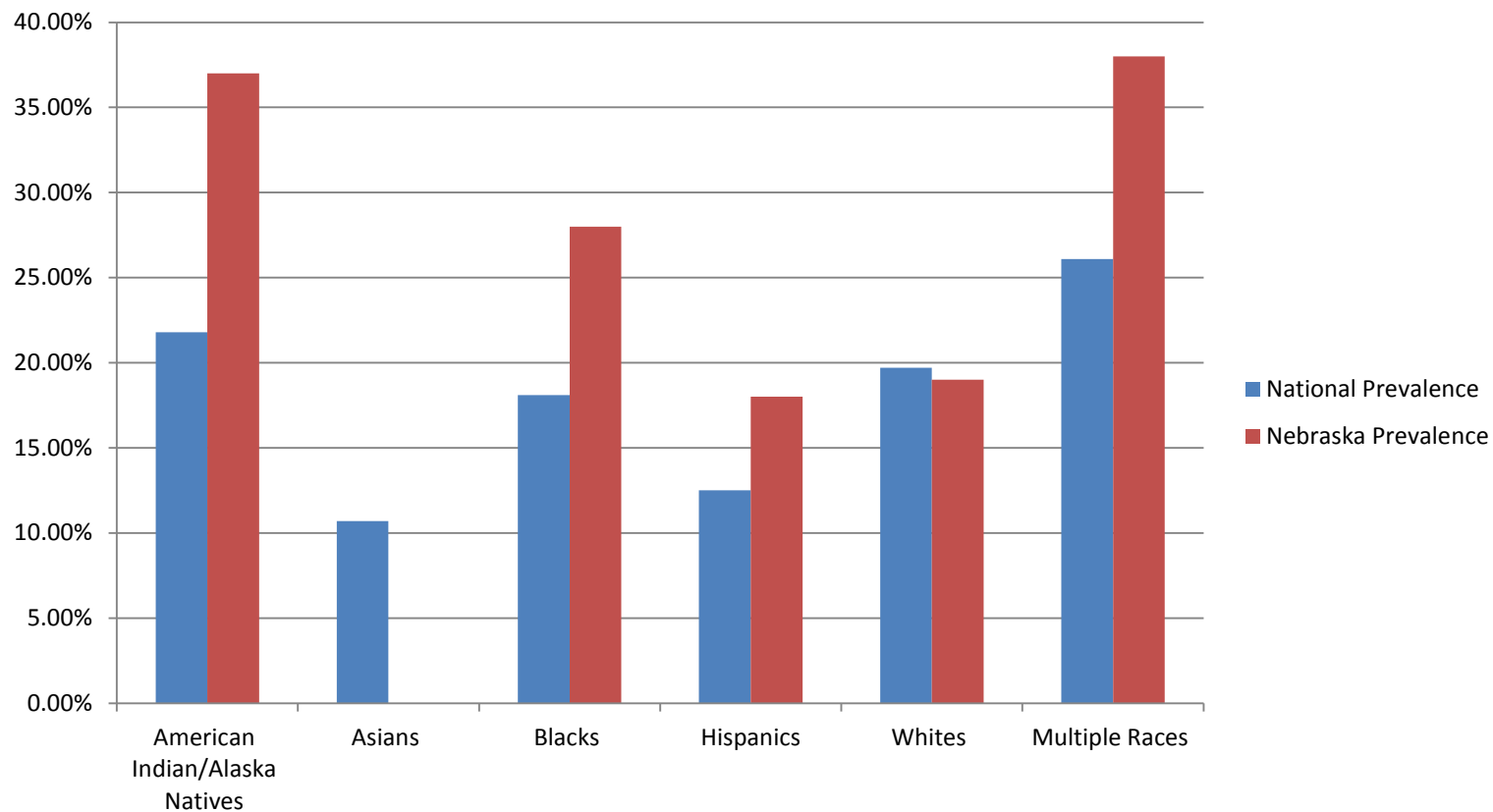
Smoking behaviors vary widely across Hispanic/Latino groups in the U.S. Data should be unaggregated to expose trends and behaviors across the subgroups. [Kaplan et al., 2014]

- Percent of Hispanic men 18 years and over who currently smoke cigarettes: 16.7% (2010-2012); Percent of Hispanic women 18 years and over who currently smoke cigarettes: 8.4% (2010-2012) [CDC. MMWR, 63 (2), January 17, 2014]
- Smoking rates among Latinas are lower than among Whites, but almost half of Latinas who ever smoked remain current smokers. [CDC. MMWR, 63 (2), January 17, 2014]
- According to a recent survey, prevalence of current smoking was highest among Puerto Ricans (men, 35.0%; women, 32.6%) and Cubans (men, 31.3%; women, 21.9%). Dominicans had the lowest smoking prevalence (men, 11.0%; women, 11.7%). [Kaplan et al., 2014]

Latinos are still the least likely to be covered by any type of health insurance (30.4%) and have less access to health education and health promotion services that are culturally and linguistically appropriate. [CDC, Summary Health Statistics for the U.S. Population: National Health Interview Survey, 2012]



Tobacco Use Prevalence



Source: Centers for Disease Control and Prevention. [Current Cigarette Smoking Among Adults—United States, 2005–2012](#). Morbidity and Mortality Weekly Report 2014;63(02):29–34; Tobacco Free Nebraska. Data and Trends on Tobacco Use in Nebraska, 2013.







Founded in 2005 and is an ongoing community-based holistic health promotion program designed for Spanish-speaking immigrant women in the Omaha, Nebraska metropolitan area.

The group is engaged to fight tobacco, prevent cancer, and support mental well-being through education, social support, and advocacy to address issues of substance use, exposure to secondhand smoke, depression, isolation, and enhance self-esteem.

VISION: To create an active & successful network of Latinas to improve community health

GOALS:

1. Increase personal and family healthy decision-making.
2. Increase community capacity for positive social change.
3. Increase overall well-being by promoting healthy lifestyles as individual women, wives, mothers, and engaged community members.



Why Target Women?

- The family is the primary unit within Hispanic culture and is part of the underpinning of strong cultural value system.
- Latinas are gatekeepers for their family's health.
- Engaging the family, through the mother, has been a successful strategy to improve the family's health.

Additional Benefits:

- CNN Factor – Comadre News Network
- Available Time





Program Specifics

- Trusted bilingual and bicultural women lead the groups using an interactive approach that addresses the cultural, physical, emotional, spiritual, and social components of health and disease.
- The group is conducted in a popular education format to reach lower educated and lower literate populations.
- Childcare is provided at no charge. Children are supervised and encouraged to participate in age-appropriate activities related to the topics being discussed.



Program Specifics

Meetings are held every other month and are conducted completely in Spanish. Standard meeting components include:

- A self-awareness journaling activity
- An educational presentation on a health issue
- Lunch
- A facilitated interactive activity
- Community project planning/Small group meetings

Additional activities take place during the months where there is not a regular meeting.





Si deseas dejar un
mensaje a una
Sobreviviente de cáncer
de seno, o algún
mensaje a una que

Sample Journal Topics

- Go on, although everyone expects you to quit
- Never stop dreaming, they may take away a dream, but they can't never take away the desire to dream
- Being a woman, more than a physical body, but it is an essence of being
- Woman, show the world the beauty in you
- I know I have to change something. What is it?
- The strength of our hands
- How much do I love my heart?
- There are two ways to diffuse light, be the candle, or be the mirror that reflects it
- How much of this reflection is in your own life? (The exercise required each participant to reflect on someone else's reflection.)
- The world is going through difficult times, however, I am blessed ...



Latinas, Tabaco, y Cáncer Projects

- Heart Healthy Recipe Book
- World No Tobacco Day Car Wash for Cigs
- Advocating at the State Capitol
- TV Commercials
- Radio/TV Shows
- Latinas, Tabaco, y Cáncer Quilt
- Mujeres Unidas Fotonovela
- Communication & Smoke-Free Home Promotora Training
- Smoke-Free Home/Apartment Visits
- Beauty Salon Outreach
- Sencillamente Latinas Poetry Book
- Community Parades: Cinco de Mayo, PRIDE Parade, & NAMI Walk



LATINAS

Tabaco y Cáncer



Latinas, Tabaco, y Cáncer Projects



Fotonovela:

- English
<http://www.unmc.edu/publichealth/crhd/about/fotonengl2012small.pdf>
- Spanish
<http://www.unmc.edu/publichealth/crhd/about/fotonspan2012small.pdf>

Poetry Book:

<http://www.unmc.edu/publichealth/crhd/about/latinas-poetry-book-2012.pdf>





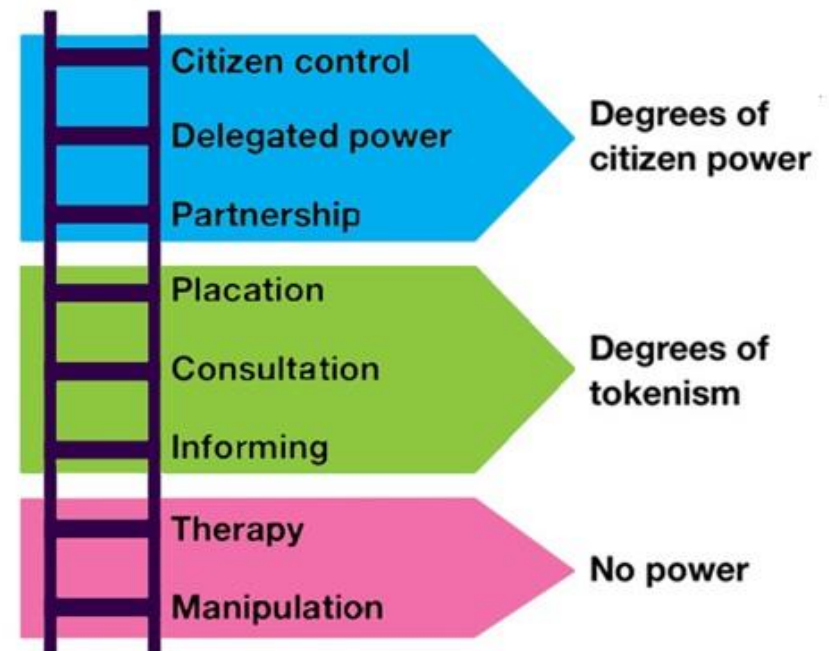
Definitions

Participation: Involvement in situations or actions that impact enhance well-being.

Empowerment: The process of increasing the capacity of individuals or groups to make choices and to transform those choices into desired actions and outcomes (World Bank, 2011).

Collective Efficacy: Shared belief that we can accomplish what we set out to do together.

Arnstein's Ladder of Public Participation



SOURCE: Arnstein, Sherry R. *A Ladder of Citizen Participation*.
Journal of the American Planning Association. 1969, 35(4): 216-224.



The “Social” is Important

- Social capital may directly affect individual well-being through its effects on health and happiness, education, and family welfare.
- Social relationships can provide both:
 - Emotional support: advice, support, and friendship
 - Instrumental support: material aid and services, information, and new social contacts
- Those with lower socioeconomic status tend to rely heavily on social ties to compensate for the lack of formal resources.
- Women generally have smaller social networks but place greater emphasis on close relationships than do men. Women are also more likely to accept informal support.



LTC Participant Survey: Participant Characteristics

Age (Years)	N (%)
21-40	37 (52.9)
41-64	29 (41.4)
65+	4 (5.7)
Latino Subgroup	
Mexican	59 (83.1)
Central American	8 (11.3)
Puerto Rican	3 (4.2)
Other	1 (1.4)
Nativity	
Born inside U.S.	2 (2.9)
Born outside U.S.	67 (97.1)
Language Spoken in the Home	
Spanish	57 (81.4)
English	13 (18.6)
English Proficiency	
None	15 (21.7)
Poor	33 (47.8)
Fair	10 (14.5)
Good	11 (15.9)
Relationship Status	
Married	43 (60.6)
Unmarried Couple	9 (12.7)
Separated/Divorced	11 (15.5)
Never Married	4 (5.6)
Widowed	4 (5.6)

Have Children	N (%)
Yes	51 (79.7)
No	13 (20.3)
Educational Attainment	
No Formal Schooling	3 (4.3)
Elementary (grades 1-8)	22 (31.9)
Some High School	10 (14.5)
Completed High School/GED	17 (24.6)
Some College/College Graduate	16 (23.2)
Employment Status	
Employed Outside Home	17 (24.3)
Unemployed	4 (5.7)
Homemaker	37 (52.9)
Student	3 (4.3)
Annual Household Income	
Less than \$10,000	16 (28.1)
\$10,000-\$15,000	11 (19.3)
\$15,000-\$20,000	8 (14.0)
\$20,000-\$25,000	6 (10.5)
\$25,000-\$35,000	13 (22.8)
\$35,000 +	3 (5.3)
Housing Status	
Own	25 (35.7)
Rent (House)	26 (37.1)
Rent (Apartment)	13 (18.6)
Other	6 (8.6)



LTC Participant Survey: Health Status

- Overall, participants rated their health fairly high, and no participants rated their health as poor.
- Almost 2/3 of participants did not have health insurance, but most did have a regular doctor.
- 35.7% of participants were unable to see a doctor within the last 12 months due to economic/cost reasons.
- 65% of participants scored at or above on the Warwick-Edinburgh Mental Well-being Scale (WEMWBS)

Self-Rated Health	N (%)
Excellent	8 (11.4)
Very Good	17 (24.3)
Good	23 (32.9)
Fair	22 (31.4)
Health Insurance Coverage	
Yes	24 (32.4)
No	43 (62.3)
Don't Know/Not Sure	2 (2.9)
Regular Doctor	
Yes	44 (63.7)
No	23 (33.3)
Unable to See Doctor Due to Cost	
Yes	25 (35.7)
No	43 (61.4)



LTC Participant Survey: Tobacco

- Over 40% of participants had tried tobacco at some point in their life.
- Only 12.2% of participants were current or intermittent smokers.
- Very few participants allowed smoking in their homes and cars.
- Most participants had basic knowledge of the dangers of tobacco.
- Approximately 30% were unclear regarding level of safe secondhand smoke exposure, the right to smoke, legal options for smoke-free environments like smoke-free apartments, and tobacco industry targeting.

Ever Tried Tobacco	N (%)
Yes	27 (42.9)
No	36 (57.1)
Current Smoker	
Yes	6 (12.2)
Every Day	1 (2.0)
Some Days	5 (10.2)
No	41 (83.7)
Others in Household Smoke	
Yes	13 (18.3)
No	58 (81.7)
Smoking Allowed	
In Home	3 (4.5)
In Car	3 (4.6)



LTC Participant Survey: Self-Efficacy, Connectedness, Social Capital

Self-Efficacy:

- The General Self-Efficacy Scale is a 10-item psychometric scale that is designed to assess optimistic self-beliefs to cope with a variety of difficult demands in life.
- 52.8% of participants scored at or above the U.S. average.

Connectedness/Belonging:

- 96.7% said they felt like they were part of the group.
- 96.9% said that participating in the group was a positive experience.
- 91.9% said they feel a bond with others in the group.
- 98.4% believed that by working together problems in Omaha could be resolved.

Social Capital	N (%)
Actively participated in an association	31 (50.0)
Made a personal contact with an influential person	29 (46.8)
Made the media interested in a problem	12 (20.7)
Actively participated in an information campaign	24 (39.3)
Actively participated in an election campaign	4 (7.0)
Contacted your elected representative	5 (9.8)
Talked with other people in your area about a problem	25 (44.6)
Notified the court or police about a problem	9 (17.3)
Made a monetary or in-kind donation	23 (41.8)
Volunteered for a community/charitable organization	32 (55.2)



LTC Participant Survey: Program Results

Most participants came to the group as a result of a friend inviting them to attend a meeting.

People participate because they are interested in learning about health and information about community resources.

Key components of the program identified by participants include:

1. Location in the community
2. Provision of childcare
3. Opportunity to network with other women
4. Engagement and bonding with program facilitators
5. Opportunity to get involved in the community

- 28.6% of participants are members of the online LTC Facebook group
- 47.1% are friends with at least one of the program facilitators on Facebook.



LTC Participant Survey: Program Results

Participants share information that they received from the group:

- 77% of share with family
- 58.1% share with friends in Omaha
- 18.9% share with friends outside of Omaha

73.3% of participants reported that they have changed an individual health behavior or that of a family member.

Participants' reasons for participating:

- Like the program
- Fun
- To learn/information is useful
- To improve my health
- Chance to improve the community/volunteer





Impact of Latinas, Tabaco, y Cáncer

Implementation of this intervention has resulted in Latina women:

- Adopting preventative health behaviors
- Influencing the behaviors of their family members
- Changing the social norms of the community

Participants have become avid advocates for health and positive community role models.

A significant contribution of this program to the community has been to serve as a promoter of women, Latino issues, and provider of accurate information, quality resources, and access into a community health support services net.



Impact of Latinas, Tabaco, y Cáncer



- Developed a social support network of concerned women: Mothers, Wives, Daughters, and Friends
- Participation empowers participants and provides a sense of accomplishment and pride in reaching set goals both individually and collectively.



Impact of Latinas, Tabaco, y Cáncer

Participants have developed projects to educate others and the community, in turn forming a team of promotoras.

- Skills such as group facilitation, advocacy, and project planning that have been developed among participants as a result of this program can be transferred to other health issues or community concerns.
- Women have become engaged in other health promotion programs such as *SaludABLE Omaha*, the *American Heart Association*, and various parent organizations such as the PTA.



Impact of Latinas, Tabaco, y Cáncer

This intervention has decreased barriers to seeking health information and services by using an interactive culturally and linguistically appropriate format that meets community needs.

Women have advocated for stronger tobacco control policies at a local and state level, but also become engaged in many community policy initiatives from public health to education to political organizing.



Impact of Latinas, Tabaco, y Cáncer

Latinas, Tabaco y, Cáncer has been awarded:

- South Omaha Neighborhood Alliance (SONA) Project of Merit Award, 2006
- American Psychiatric Foundation's Award for Advancing Minority Mental Health, 2011

Latinas, Tabaco, y Cáncer was part of SAMHSA's Service to Science Initiative 2013.



Community Transformation

Latinas, Tabaco, y Cáncer has opened the doors of conversation for a number of other health risk factors including: mental health issues, domestic violence, alcohol abuse, obesity prevention, and affordable safe neighborhoods.



Latinas, Tabaco, y Cancer Video: <http://youtu.be/geXpVjH5vY4>



Conclusions

- LTC is a valuable community-based program that helps to build a sense of belonging and community while fostering self-efficacy and social capital.
- Although the basis for the program is tobacco prevention, the effects are far-reaching and foster community development across the ecological spectrum: individual, interpersonal, organizational, and societal levels.



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