

## Minorities Breathing Easier: Public Health and Public Relations Tackle Asthma



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## MaineHealth

- Non-profit, integrated healthcare delivery system
- Serves 10-county area in Maine
- ~1 million lives
- 9 acute care hospitals, home care, long term care
- Relationships with over 1,500 physicians

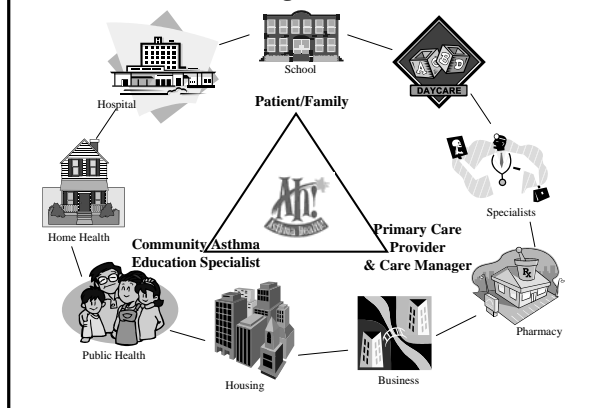
## Why Asthma?

- Maine with one of highest prevalence in nation: 8.9%<sup>2</sup>, or >100,000 persons
- Asthma rates in Cumberland County are higher than State and National averages.

## AH! Asthma Health

- Community-based asthma education program
- Based on national (NHLBI) Guidelines
- Founded on nationally recognized Chronic Care Model
- Hospital-based Community Asthma Education Specialists

## Ah! Program Model



## Minority Asthma Project

- Received grant in 2004 for community collaborative
- Brought together 12 community-based teams from the Greater Portland area to work on asthma
- City of Portland's Minority Health Program (Public Health Division, Health and Human Services Department) signed on as a team
- Identified asthma as an issue for Somali/Latino population in Portland

### Data

- Hospital data (Maine Medical Center) showed Somali and Latino immigrants had disproportionate # ED visits
- Higher incidence of asthma than general population (may be related to socioeconomic factors)

### Population Data/Prevalence

- Est. 4000 Somalis, 3,000 Latinos in Greater Portland
- Average incidence (8.9%)
- Est. 35% not diagnosed or treated properly
- Total target population: 850

### Team Assembly

- AH! Program Staff, Minority Health Staff met with communication staff at Maine Medical Center
- Communications staff recommended social marketing approach
  - Desire to address cultural context, barriers, exchanges for each population separately

### CDCynergy

- Used CDCynergy Social Marketing Planning tool to:
  - Describe the problem
  - Conduct research
  - Plan a market strategy
  - Develop an intervention
  - Evaluate the intervention
  - Implement the intervention

### Market Research: Focus Groups

Themes present in both Somali/Latino Focus Groups:

- Lack of knowledge about asthma—signs, symptoms, treatment
- General belief that Maine's cold climate causes asthma—fear of "catching asthma"
- Distrust of the American Healthcare system (prefer home remedies)
- Barriers: language, culture, access, knowledge

### Project Goals/Market Strategy Identified

- To provide Somali/Latino community members a culturally appropriate way to access:
  - Asthma information/education
  - Appropriate diagnosis and treatment

### Strategies– 4 P's

- Product/Intervention: Asthma HelpLines staffed by Somali, Latino Community Health Outreach Workers (CHOWs)
- Culturally appropriate education materials
- Access to nationally certified asthma educators

### Community Health Outreach Workers—Awralla and Nelida



### CHOW's

- Minority Health Program employees
- AH! Program provided intensive training to CHOWs (working knowledge about asthma)

### Strategies, cont'd

- Price: Free assistance from CHOWs and/or asthma educators
- Place: CHOWs conducted home visits, health fairs, provided information at gathering places (churches, markets, etc.)

### Implementation

- Promotion: Created culturally appropriate posters and business cards and placed in strategic locations
- Ran ads on City buses
- Latino and Somali programs on local access TV and radio
- Extensive media coverage of project launch





### HelpLine Results

- Reached 17% of target Somali population
- Reached 18% of target Latino population

### Testimonial

I have a Somali female patient and her three children- all with asthma. I made a home visit and noticed that it was in a very poor condition with a lot of mold. Paint was chipping every where and the heater was spitting water that made the molds even worse. I reported it to their primary care doctor and she wrote a letter to the landlord. I also gave a copy of that letter to the city's Lead Program and Code Enforcement. They also wrote a letter to the landlord to renovate the home and offered to help. (city has a program for landlords to improve home condition). The landlord is renovating the home. We have also tested all the children in the home for lead. The patient is also controlling her family's asthma better because of the education and intervention.