

Nuestra Salud Community Assessment Project: Spanish-speaking Parents of Children with Asthma

Our Organization

Nuestra Salud (translation: "our health") was founded to address the void in culturally and linguistically sensitive programs that meet the health care needs of Hispanics around issues of cancer. diabetes, asthma, tobacco control, and other chronic diseases. Nuestra Salud works to increase collaborative. interdisciplinary and interagency partnerships with community-based organizations, higher education researchers, and state/city elected officials.

Nuestra Salud is incorporated in New Mexico, based in Albuquerque, but works to link services nationally and bi-nationally. Nuestra Salud provides health education, patient navigation and psychosocial family support group services.

Nuestra Salud currently partners with the University of New Mexico, New Mexico's, Asthma Control Program, Tobacco Use Prevention and Control (TUPAC) program, the Mexican Consulate, as well as many community-based organizations serving the Hispanic and Spanishspeaking community.

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Project Goals

Nuestra Salud partnered with the New Mexico Department of Health Asthma Control Program in 2015-2016 to implement a series of focus groups to increase understanding about asthma care and control among <u>Spanish-</u> <u>speaking Hispanic families who have children with asthma</u>. Topics covered in the focus group included:

- Knowledge and perceptions about asthma
- Experience of clinic visits
- Insurance coverage
- Acceptability of interventions to improve medication adherence and asthma control

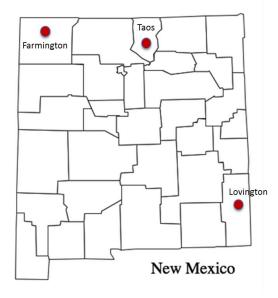
Population of interest

Focus group participants were:

- Spanish-speaking (self-identified, Spanish language only or prefer speaking in Spanish)
- Parent of a child or adolescent with asthma

Methods

Participants were recruited using local Spanish-language promotional materials and community-based partners. 90-minute focus groups were held in 3 New Mexico communities (see map), led by a bilingual moderator. Participants completed a short demographic and knowledge survey prior to the group's discussion. Groups were audiotaped and transcribed. Content analysis was used to identify key themes brought up by participants.



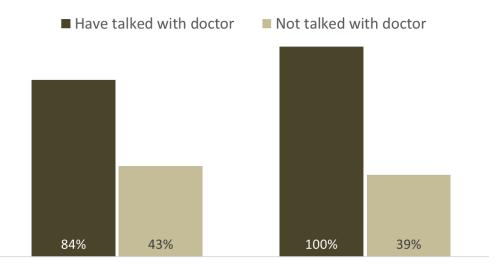
Participants

57 total parents participated in a total of six groups (two per community). Participants included 43 women and 14 men. Most (77%) were married or in a partnership. Most (95%) were immigrants; half had been in the U.S. fewer than 10 years. More than half (60%) had not completed high school, and more than half (61%) said their total household income was \$20,000 or less per year. One-third (35%) did not have health insurance.

Participants reported having between 1-7 total children; one in four (23%) had more than one child with asthma. Most of the participants' children with asthma were taking some kind of medication (91%).

What did we learn?

Fewer than half (44%) of parents had ever talked with a doctor about what causes asthma. People who had talked with a doctor about causes of asthma were more likely to believe that asthma attacks can be prevented and that asthma can be controlled (see chart at right). Talking with a doctor about causes of asthma was also



Believe asthma attacks can be prevented

Believe asthma can be controlled

associated with increased knowledge about important asthma risk factors and triggers.

Key themes that emerged during the focus groups included:

- Spanish-speaking parents need and want more information about their children's asthma risk; they also want to learn more about the importance of planned asthma care visits, preventive asthma medications, long-term use of asthma medications, triggers or risk factors and self-management
- Good communication with providers is essential to receiving information; healthcare systems currently do not support developing patient-provider relationships, equity and trust
- Lack of healthcare coverage is a barrier to regular asthma care and interaction with a provider
- Parents face challenges supporting their children in school to receive asthma-related care and medications

Recommendations

- Work with insurance companies to share more information regarding asthma assessment, treatment and coverage with their Spanish-speaking constituents.
- Work with community access centers to provide educational opportunities around asthma risk and treatment risk.
- **Raise provider awareness** regarding the willingness of Hispanic patients to discuss asthma. Because this population uses healthcare fairly regularly, suggest to providers that each visit is an opportunity to discuss asthma self-care.
- With these partners, identify opportunities to **deliver culturally sensitive educational programs or campaigns** for Spanish-speaking Hispanics to be delivered by a Spanish-speaking individual in order to reduce disparities in the burden of asthma.
 - adherence to medication
 - concerns about side effects
 - importance of using long-term control medications even when symptoms are not present
 - **Strengthen school-based support and policies** for Hispanic children with asthma.
- Support anti-discrimination and equity-focused practices in healthcare settings.



The mission of *Nuestra Salud* is to reduce health disparities affecting Hispanic communities in New Mexico and the nation through research, training, and outreach.



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