Multi-method approaches to developing community-based strategies to reduce obesity and diabetes in East and South Los Angeles

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The Keck Diabetes Prevention Initiative

Funded by the W.M. Keck Foundation

Collaborating Partners



USC Keck School of Medicine

USC Clinical Diabetes Program



International Leader in Pediatrics

Childrens Hospital Los Angeles

- -Division of Endocrinology
- -Community Health
 Outcomes and
 Intervention Research
 Program (CHOIR)



Los Angeles County Department of Health Services

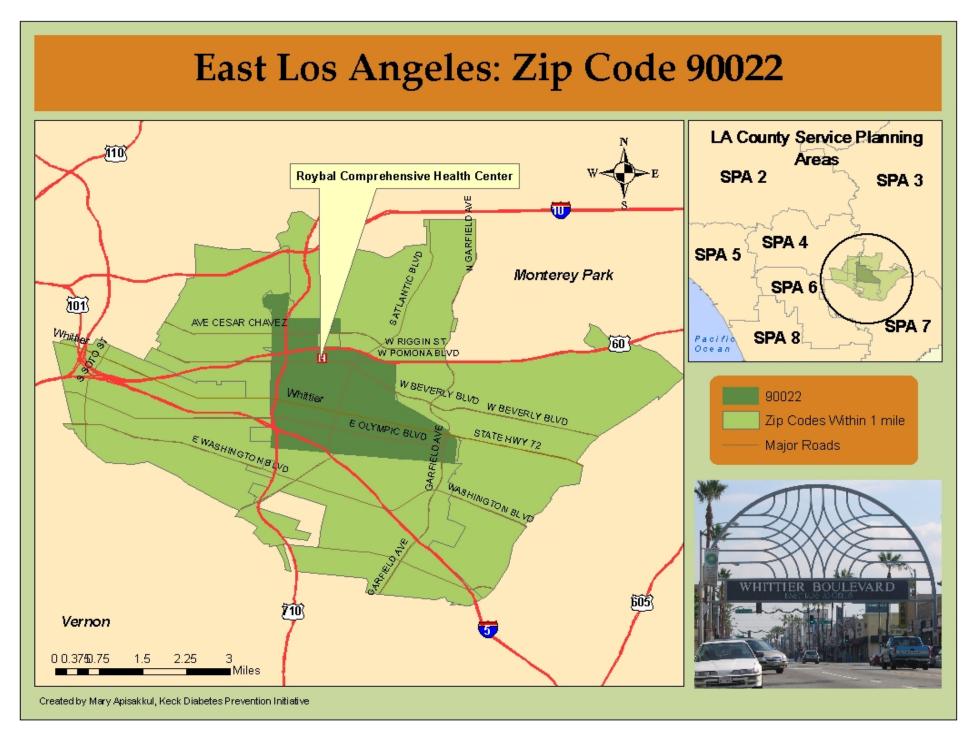
- Edward R. Roybal
 Comprehensive Health Center
 (East Los Angeles)
- Hubert H. Humphrey
 Comprehensive Health Center
 (South Los Angeles)

Overview of Project

Long Term Goals

- ➤ Develop strategies in collaboration with community providers, leaders, residents to reduce the prevalence of obesity and diabetes in two communities in Los Angeles Watts/Willow Brooke (90059) and East Los Angeles (90022)
- Work within the communities to enhance and/or implement new approaches to obesity and diabetes prevention and treatment

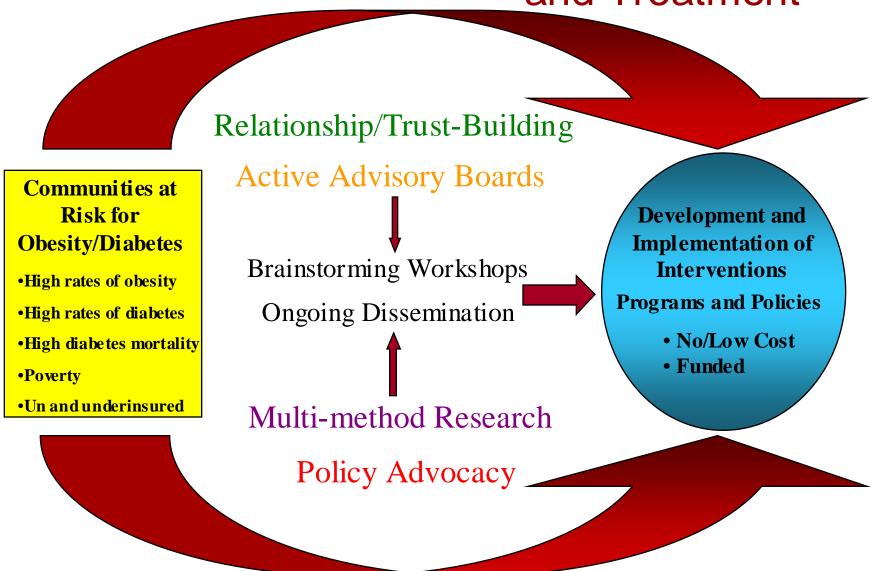
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Non-Linear Process of Trust-building, Dissemination and Intervention Development

- Various strategies for relationship and trust building
- Community participatory, multi-method research
- Ongoing policy advocacy with local, state and national leadership
- Accessible mechanisms for developing intervention ideas in partnership with community
- Tiered intervention development and implementation
 program and policy

Keck Diabetes Prevention Initiative Partnerships for Prevention and Treatment



Relationship and Trust Building

- Talked to people (participate in community meetings/events, informal and formal discussions with community providers, policy and lay leaders)
- Created community advisory boards
- Provided on-going ad hoc education on diabetes, nutrition, obesity, related policies
- Offered evidence-based community-based obesity prevention intervention
- Expanded clinical specialty care for diabetes patients in community clinics, including clinical trials not typically available in low-income communities

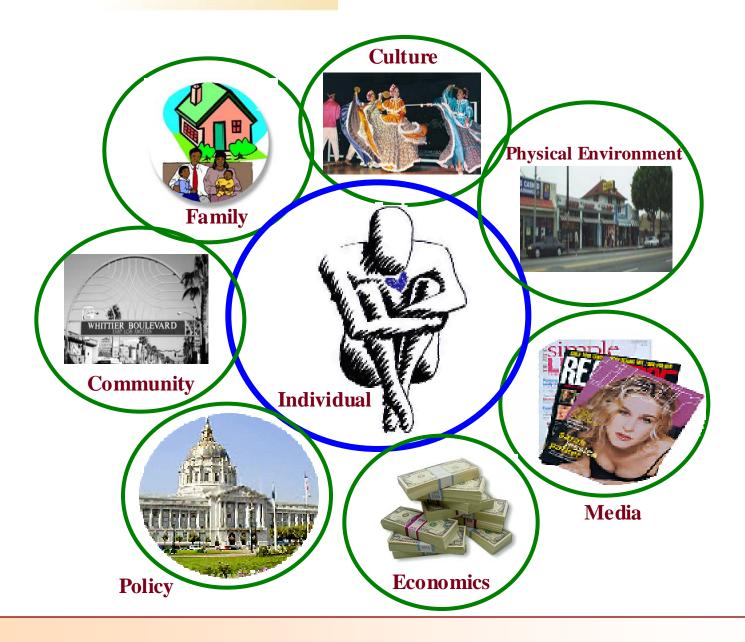
Community Based Participatory Research

- In-depth interviews with community leaders and residents (N=107) – on-going
- Ethnographic observations and inventory of food venues, by type and healthy food availability and quality
- Ethnographic observation of green spaces (size, amenities, utilization, safety, etc.)
- Geo-spatial analysis: fast food venues and schools; neighborhood predictors of childhood overweight and fitness
- RDD community telephone survey (N=502 households)

Mechanisms for Developing Intervention Ideas

- Dissemination of assessment research
- Community Advisory Boards
 - Feedback to CAB related to assessment findings, evidence based models and diabetes/obesity education
 - Workshops using Ecological Model to generate intervention ideas

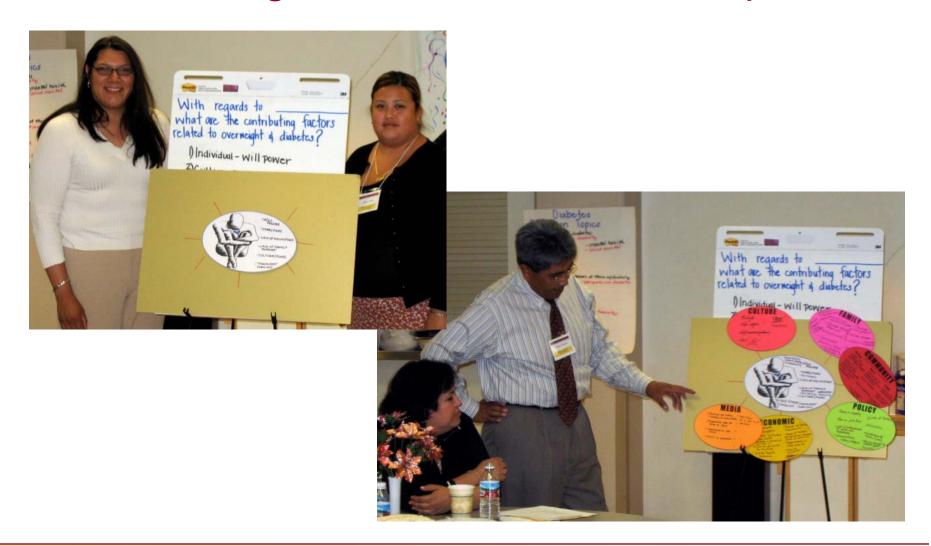
Socio-Ecological Model



South Los Angeles Intervention Development



East Los Angeles Intervention Development



Developing Intervention Ideas

- Community Advisory Boards
 - Identification of no and low-cost interventions for immediate implementation
 - Discussion of how to participate in local implementation of new and pending policies/legislation in their communities (e.g., school cafeteria improvement motion, soda/junk food ban, healthy vending in community settings)
- KDPI Team
 - Fund-raising/grant development

Intervention Development and Implementation Programs and Policies

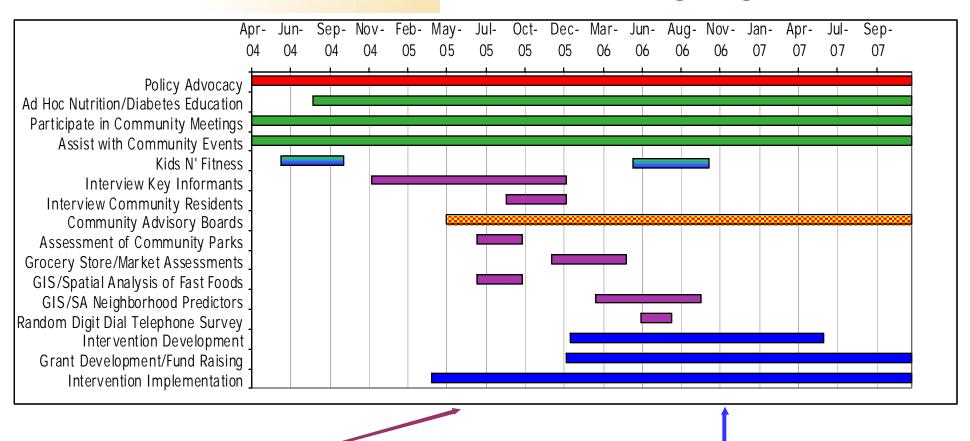
- Offering ad hoc and evidence-based interventions (e.g., Kids 'N Fitness)
- CABs prioritized no/low-cost intervention ideas
 - Grocery store tours for healthy, informed shopping
 - Meeting with school food service to ensure compliance with school nutrition policies
 - Health fair participation
 - Community walking assessment to identify structural barriers for walkability/physical activity
 - Began active advocacy for local farmers' markets
 - Linked existing campaigns/resources (e.g., 5-A-Day) to housing projects – cooking demonstrations, education

Intervention Development and Implementation Programs and Policies

- Grant development for larger, comprehensive interventions and research prioritized by partnership
 - healthy schools
 - fitness for all
 - community education
 - promotora model for diabetes disease management
 - mini-grants to community and faith-based organizations
 - healthy physical environments
 - diabetes/obesity prevention research,
 - Core infrastructure to coordinate and implement change efforts

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Timeline



Clinical Trials

National Institutes of Health: National multi-site study, "Look AHEAD". Does weight loss in adults with type 2 diabetes improve health outcomes.

Juvenile Diabetes
Research Foundation
(JDRF): Continuous
glucose monitoring
(CGM) with low
income, low literacy
populations.

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Rose Hills Foundation:
Conduct supermarket tours
and cooking demonstrations.
Support a farmer's market
the East Los Angeles
community to improve
access to low-cost fresh
fruits and vegetables.

Community Based Interventions

California Community Foundation:
Diabetes screening, selfmanagement, and support activities
utilizing community educators/
promatoras; Access to nutritious
and affordable foods by
establishing a community farmers
market; and policy advocacy.

California Nutrition
Network: "From the
Market to Your Plate"
– Learning How to
Shop, Cook, and
Design Easy,
Inexpensive and
Healthy Meals

How was it Possible?

- Time
- Planning funds without rigid restrictions about how to use funds
- Multi-disciplinary team
 - Clinical
 - Community experienced
 - Experience in policy advocacy
 - Experts in related fields
 - Multi-method community-based researchers
 - Community partners (residents, leaders, organizations, policy makers)
- Flexibility to allow planning to evolve organically initially with uncertain/undefined outcomes

Keck Diabetes Prevention Initiative

The Team

Team Leadership:

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Questions



