"Una Historia Comica de Una Enfermedad Seria-DiabetesTipo 2"

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Introduction

 Goal: Exploratory pilot to provide immigrant Spanish-speaking diabetic (DM) patients attending a health clinic with DM tx/management education

Overview

- Learning Objectives
- Background
- Literature review
- Methods
- Resources
- Evaluation
- Lessons learned

Learning Objectives

- Describe benefits of video to meet needs of an underserved population
- Construct steps from population assessment to low-cost production of video
- List potential community collaboration sources
- Identify the project evaluation process

Background

- CDC findings: lack of English fluency & unfamiliarity with healthcare system may increase risk for immigrants
- Healthy People 2010 goal
- Hispanics have a 41% higher mortality rate due to DM
- Prevalence of DM in TX: Hispanics
 (7.1%) vs Non-Hispanic whites (5.7%)

Video Benefits (Literature Review)

Gagliano (1988) reviewed 25 methodologically sound studies regarding video efficacy/limitations

- Video use promoted role-modeling
- Increased short-term, but not long-term knowledge

National Work Group on Literacy and Health (1998)

 40-44 million persons in US had rudimentary literacy skills and were unable to understand written materials

- 2007: health literacy assessment has been called "The Newest Vital Sign".
- http://www.clearhealthcommunication.or g/public-policy-researchers/stats-at-aglance.html

RCTs of culturally & linguistically appropriate health education videos:

- Yancey et al. (1995) 15-minute educational videos
 - Tests were conducted in two clinics
 - Each clinic served as own control during weeks when video was not shown
 - patients who viewed the video were more likely to get Pap smears in following 6 months

Zuñiga de Nuncio et al. (2003) 15 minute videos related to immunizations in addition to:

- one-on-one educational session, Q & A, & calendar
- same providers saw both groups; contamination?
- 3 mo. post-partum great immunization improvement in both groups

Methods From Assessment to Production

- Target population
- Volunteer Healthcare Clinic (VHC)
- No other access to care

Methods

From Assessment to Production

- Based on interviews
- Limited resources & patient illiteracy
- Video was the chosen teaching method

Methods From Assessment to Production

- Project Plan: create humorous & culturally-appropriate Spanishlanguage video
- Focus on secondary & tertiary DM prevention

Methods From Assessment to Production

- Low cost "home production" video Interspersed puppet antics with nurse commentary to reinforce objectives
- Total estimated cost: <\$50.00
- Total estimated volunteer hours: 110

Community Collaboration Sources

- Community Clinics
- University departments and students
- Online video editing programs

Project Evaluation

Goal: effectiveness in disseminating: signs and symptoms of diabetes, when to seek treatment, exercise activities, nutritional choices

Evaluation

Method

- Face to face interviews
- 10 open-ended questions
- Short term knowledge
- Spanish
- Setting

Project Evaluation

What are the signs and symptoms of diabetes?

-How can one tell if someone has diabetes?

• Over eating

Other:

- □ Frequent urination
- Increased thirst
- Unexplained weight loss
- □ Frequent hunger
- □ Infection
- □ Vision disturbances

What can one do if diagnosed with diabetes?

- -What can one do if they become diabetic?
- □ Take medications Other:
- Diet changes
- **Exercise**
- □ Monitor blood sugar

Project Evaluation

What are complications of uncontrolled diabetes?

- -If someone has diabetes and they don't take care of it, what can happen?
- □ Amputations Other:
- Vision loss
- Dry skin
- □ Kidney dysfunction
- Neuropathies/tingling/loss of sensation
- **G** Feet issues

What physical activities can a person do to help manage diabetes?

-What types of exercises can a person do to help with their diabetes?

- □ Walking Other:
- □ Swimming
- □ Soccer
- **Gardening**

Findings

In general: "Nopales" prickly pear cactus

	S & S	Diagnosis	Complications	Exercises
Video	1.3	1.0	0.3	1.7
n=3				
Video	1.8	1.3	1.2	1.5
(with trial)				
n=12				
No video	1.3	1.1	0.9	1.2
n= 15				

Lessons Learned

- Clinic dynamics
- Video quality vs. production cost
- Reticence to critique
- Video design and content

Conclusion

PICTURE

Thank You slide

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