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Assessing Barriers and Facilitators to Healthy Living in a Low-Income Community: Perceptions of the Health Resource Environment in South Los Angeles

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Presenter Disclosure

Denise D. Payán

The following personal financial relationships with commercial interests relevant to this presentation that existed during the past 12 months:

No relationships to disclose.

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Session Objectives

1. Describe a framework for using qualitative data collection (i.e., focus groups) to elicit community-based perspectives about health in an underserved community.
2. Compare barriers and facilitators to healthy living across 3 neighborhood-level environments in South LA.
3. Discuss the integration of health promotion resources and policy strategies to eliminate health disparities in low-income urban communities.

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Study Aims

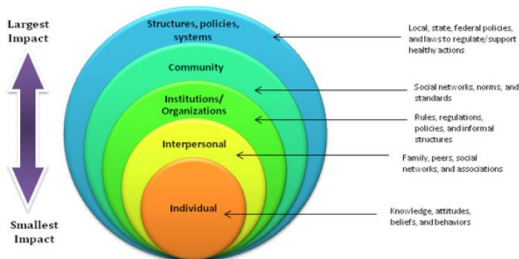
- Purpose: To improve our understanding of neighborhood-level barriers and facilitators to access to healthy food and active living environments among adolescents and adults in South Los Angeles
- Intervention Sites: Three high schools located in South Los Angeles with a School-Based Health Center (SBHC)
 - All of the schools offered after school programs for students, but not for adults (i.e., not "shared use")
 - 2 of the 3 schools had a school-based community garden

Understanding student and community resident perceptions of barriers and facilitators to healthy eating and active living is important for designing and implementing successful school-based and policy interventions.

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Social Ecological Framework



Largest Impact (top) and **Smallest Impact** (bottom) are indicated by a vertical double-headed arrow.

External factors for each level:

- Structures, policies, systems: Local, state, federal policies, and laws to regulate/support health actions
- Community: Social networks, norms, and standards
- Institutions/Organizations: Rules, regulations, policies, and informal structures
- Interpersonal: Family, peers, social networks, and associations
- Individual: Knowledge, attitudes, beliefs, and behaviors

Sources:
CDC Division of Nutrition, Physical Activity, and Obesity, Health Equity Resource Toolkit for State Practitioners Addressing Obesity Disparities.
McKenry, K., Riboni, D., Stockler, A., & Glanz, K. (1988). An ecological perspective on health promotion programs. *Health Education Quarterly*, 15, 351-377.

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Qualitative Research Design

- Focus groups have been used extensively in public health and health promotion for understanding the experiences of vulnerable or at-risk groups.
- Data Collection Tools
 - Focus Group Script (Adults and Students)



Topic Area	Selected Questions
Availability of Healthy Foods School Nutrition Resource Environment	<ul style="list-style-type: none"> • What kinds of healthy meals are available in your community? • What do you like about your school's cafeteria? Not like? • What are ways to make your school's cafeteria better? • (If applicable) What are ways to encourage or to get more students to use the community garden?
Off-Campus Nutrition Resource Environment	<ul style="list-style-type: none"> • How many corner stores or fast food restaurants do you pass on the way to and from school?
School Physical Activity Resource Environment	<ul style="list-style-type: none"> • Do you participate in any physical activity activities or programs at your school? Why or why not?
Off-Campus Physical Activity Resource Environment	<ul style="list-style-type: none"> • Do you feel safe exercising during the day at parks and other places in your neighborhood? Why or why not?

- Pre-Focus Group Questionnaire (Adults and Students)

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Procedures

- 60-90 minute focus groups led by a moderator (English or Spanish)
 - Setting: High school classroom or parent center room
 - Incentive: \$20 gift card and refreshments
 - Participants provided assent and parental consent (students)
- Purposeful sampling strategy to identify those who would represent a "typical case" of people who would participate in the REACH project
 - Recruitment Challenge: Groups are often smaller than expected
- Data Analysis
 - Descriptive statistics were calculated from the questionnaires
 - Organized themes by constructs identified a priori
 - Grounded theory approach guided the analysis
 - Data analysis software NVivo 10 used to organize and review transcripts

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Focus Group Participants

Four groups (n=28 HS students) and seven groups (n=47 adults) from three school sites between July and October 2014

	STUDENTS (N=28) Mean (SD) or %	ADULTS (N=47) Mean (SD) or %
Age	15.9 (1.2)	47.2 (11.4)
Gender		
Female	53.6%	87.2%
Male	46.4%	10.6%
Race/Ethnicity		
African-American or Black	32.1%	38.3%
Hispanic	57.1%	57.4%
White	0%	2.1%
Asian, Native Hawaiian, or Pacific-Islander	3.6%	0%
Multi-Ethnic	7.2%	0%
Language Spoken at Home		
English (Only or Mostly)	42.8%	40.4%
Both English & Spanish	53.6%	29.8%
Spanish (Only or Mostly)	3.6%	25.5%



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On-Campus Nutrition Resource Environment (Students)

- Cafeteria
 - 53.6% reported regularly eating in the school cafeteria
 - 14.2% reported regularly skipping lunch
- Barriers to Healthy Eating
 - Disliked waiting in long lines and frozen foods
- Facilitators to Healthy Eating
 - After-School Nutrition Education/Cooking Programs
 - Lack of available (or standalone) programs
 - School-Based Gardens (at 2 schools)
 - High levels of awareness and interest
 - Perceived as an **asset**
 - Institutional barriers to utilization

"They break out the sports and they teach you everything you need to know to be healthy. It's more physical activity but they incorporate food."

"We planted rosemary, greens, broccoli, and lots of vegetables...I was in the Sierra Club, and not only did we learn about the liquor stores, and the problems, but also to garden and what else you can do."









USC Price School of Public Policy **Recommendations to Improve the On-Campus Nutrition Resource Environment**

"Fresh foods."
"Actually cook the food, not microwave food."
"Better food selection."

"If they had more lines, sometimes they close lines."
"Yeah, it's slow, a lot of kids in line...so many kids don't know their numbers to the thing..."

TO IMPROVE ON-CAMPUS RESOURCE ENVIRONMENT

-  Increase the Availability of Fresh Food
Increase the Variety of Food Available
-  Provide a Lunch Meal Calendar
-  Increase Entry Points and Expand Capacity for School Lunch Queues
-  Provide Fresh Drinking Water
-  Improve Access to School Gardens

"They go and get the food and then throw it away because we don't like it...They should make a calendar so we know."

"Let everyone go. Not every gets to go. Have a sign up so it isn't chaotic. Then everyone has a chance to go."













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- o Preference for Fast Food and Junk Food (Students)
 - o A majority of students consumed off-campus food
 - o Popular junk food included chips, soda, energy drinks, and blended caffeinated drinks
 -  o 39% of student participants reporting drinking ≥2 sodas in the past 24 hours
- o Availability of Fast Food (Students and Adults)
 - o Participants agreed "a lot" of fast food restaurants were located close to their schools and homes

"We all eat fast food. That is all we eat. Especially around the school because there's junk food restaurants across the street."

USC Price School of Public Policy **Off-Campus Nutrition Resource Environment**


- o Food Resources
 - o Mostly shopped at supermarket chains and ethnic grocery stores
 - o **Price** as key factor
 - o Liquor/corner stores used for emergency purchases (i.e., eggs or milk)
 - o Non-traditional or alternative food resources

	Site 1	Site 2	Site 3
Grocery Store Chains	   	   	 
Alternative Food Sources			

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Physical Activity Resource Environment

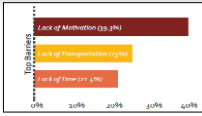
- Student PA Behaviors
 - 42.9% said they received enough PA on a regular basis, yet only 25% reported engaging in the recommended 60 minutes per day
 - 78.6% exceeded the AAP's' screen time guidelines of ≤1-2 hours per day
- Access to PA Resources
 - High level of awareness of local parks, senior centers, pools, gyms, and programs, but low rates of utilization among adults and students
 - Most popular PA programs among students were **school sports programs or teams**
 - 78.5% reported having access to places in their communities to exercise (21.5% did not know)



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Barriers to Active Living

- Primary Barrier for Students: Intrapersonal
 - *"If you have the time for it, like it's hard if you are a lazy person."*
- Primary Barriers for Adults
 - Cost, Distance from Home, and Safety
- Safety Barriers
 - 42.86% of students reported feeling it was **somewhat unsafe** to use local PA resources
 - Park as a site for unsafe activities ("there's no safe park") including gang activity
 - *"It's unfortunate that these kids is scared. They would rather be in the house playing video games than going to the park because they don't feel safe."*
 - Students mentioned feeling uncomfortable walking to and from school
 - Fears of unwanted attention
 - Witnessed friends or peers get hit by a car or a bike
 - Popular coping strategy (adults and students): Walking Groups





Barrier	Percentage
Lack of Motivation	29.3%
Lack of Transportation	22%
Lack of Time	21.4%

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Shared Used Perspectives (Adults)

- Participants thought it was generally a good idea to keep the schools open for the community to use for exercise or nutrition activities
 - Interest in using the schools' exercise equipment and track
 - Local gyms or private programs are expensive or too far
- Shared safety and security concerns
 - Many believed someone would vandalize the schools or commit theft

"Are we going to have security if the vandals do come? Unfortunately they are coming."

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Key Takeaways

- Healthy living resources may be underutilized in low-income urban communities for numerous reasons (institutional, environmental, and individual barriers)
- Findings may be useful to public health and medical professionals committed to addressing obesity disparities among at-risk minorities in low-income communities
- **Recommendations**
 - Healthy eating behaviors may be promoted through policy or institutional changes (i.e., increased lunch time, reduced queues, Farm-to-School, increased garden access) and nutrition education programs for students/parents
 - More difficult to address competing unhealthy food outside of school
 - Active living may be promoted through programs that leverage interpersonal facilitators (e.g., walking clubs) or policy changes to encourage shared use if safety/security issues are addressed (i.e., programming, safety personnel)
 - Offering non-competitive PA programs (kick-boxing or dance) or making programs more appealing could help to address the lack of motivation issue

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Thank You

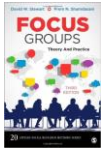



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Focus Group Resources

Books

Journal Articles

Basch CE. Focus Group Interview: An Underutilized Research Technique for Improving Theory and Practice in Health Education. *Health Educ Q.* 1987;14(4):411-448.

Draper AK. Developing qualitative research method skills: analysing and applying your results. *Proceedings of the Nutrition Society.* 2004;63(4):641-646.

Smith MW. Ethics in Focus Groups: A Few Concerns. *Qual Health Res.* 1995;5(4):478-486.

Morgan DL. Why Things (Sometimes) Go Wrong in Focus Groups. *Qual Health Res.* 1995;5(4):516-522.
