

March 3, 2016

## **Graduate Research Symposium - Proposal Submission**

**Title** – An assessment of community health knowledge needs of a Hispanic community in Southern California.

**Program of Study** – Health Education and Health Promotion

**Presentation Type** – Choose one of the following: PowerPoint

**Mentor(s) and Mentor Email** - Dr. Pamela Mukaire ([pemukaire@liberty.edu](mailto:pemukaire@liberty.edu))

**Student name(s) and email(s)** –

Anyikwa, Patience Ifeyinwa ([pianyikwa@liberty.edu](mailto:pianyikwa@liberty.edu))

Zewude, Linda Tesfaye ([ltzewude@liberty.edu](mailto:ltzewude@liberty.edu))

**Category** – Choose one of the following: Experimental (Applied)

### **Abstract**

**Background:** A community health assessment is a critical first step for securing credible data and information on a broad spectrum of health issues affecting a given population. This data not only provided us with an aggregate profile of the health status and quality of life among residents of a community, it also enables us to identify the major risk factors and causes of ill health, and the possible actions necessary to address identified health needs.<sup>1</sup> The purpose of this assessment was to identify, rate and describe the community's health knowledge of several health topics in a predominately Hispanic local community in San Bernardino County, Southern California.

**Methods:** using a short survey, data was collected from predominantly adult Latinos in downtown San Bernardino. Demographic information collected included age, gender, education, employment and income were also collected on participants. Participants were also asked to rate their perception of their community's knowledge in several health topics.

**Results:** A total of 112 adult Latina completed a brief questionnaire. Majority of respondents were female (55.4%), age group 25 to 44 (59.9%), of low educational status (95.5% had less than a college education) and low income (85.7% earned less than \$35,000 annually). Rating options allowed participants to determine the community's knowledge of each health topic to be rated as either excellent, fair, and poor. Of the 15 health topics assessed, results for "fair" knowledge were as follows: adult obesity (44.6%), HIV (42.1%), nutrition (38.4%), exercise (37.5%), childhood obesity (34.9%), stress (31.3%), hypertension (30.4%), accidents (29.5%), diabetes, alcohol dental and mental health (28.6%), domestic violence (26.8%), heart attacks and smoking (25.9%).

**Conclusions:** The community needs assessment resulted in the rating perceived community health knowledge of the following top three health topics, adult obesity, HIV and nutrition. California state epidemiological data indicates that diabetes is prevalent in Hispanic/Latino and

other immigrant communities due to a combination of cultural diet, lower physical activity, and stress from assimilation.<sup>2</sup> Therefore increasing the health knowledge of this community is a critical investment towards addressing the interlinked health issues of obesity, diabetes, nutrition, mental health and HIV.

#### Reference

1. Kevin Barnett. Best Practices for Community Health Needs Assessment and Implementation Strategy Development: A Review of Scientific Methods, Current Practices, and Future Potential. Report of Proceedings from a Public Forum and Interviews of Experts. Public Health Institute. CDC. 2012.
2. California Department of Public Health. 2009. County Health Status Profiles (2005-2007). <http://www.cdph.ca.gov/pubsforms/Pubs/OHIRProfiles2009.pdf>

### **Christian Worldview**

In line with the United States national health goals, we are learning how to use the Healthy People 2020 MAP-IT (Mobilize, Assess, Plan, Implement, Track) approach for assessing planning and evaluating health interventions that effectively responsive to the health needs of community.

We have studied one of the Bible stories that best illustrates the MAP-IT approach - the story of Nehemiah. The study of this Bible leader informs our Christian worldview – showing how God transformed Nehemiah’s career by giving him a strategic restorative plan to bring health and healing to a community. In his assignment to rebuild the collapsed wall of Jerusalem, a key part of this plan was assessing how badly damaged the wall was and then plan the rebuilding accordingly. Much like Nehemiah’s time, we too live in a world where whole community and individual health walls have been damaged. Second to prayer, the next logical step is to assess the community to learn the nature, and extent of the health problem, and to also learn who is most affected.

Like Nehemiah, we too strive not to take our work as health professionals lightly. In growing in our skills to assess community needs, interpret and report findings to key stakeholders, we lean on God’s wisdom to understand, and device health programs that provide answers to the needs of the local and global communities God is calling us to serve.

Community needs assessment is a first critical steps that not only involves an inventory of priority health issues, but the spiritual condition of those we seek to serve. A community needs assessment provides us with great information to better understanding the total health status of the community we seek to serve, with the goal of effecting thee necessary changes to fully benefit the community.