CONDUCTING IM/MIGRANT HEALTH RESEARCH: RECOMMENDATIONS AND LESSONS FROM THE FIELD

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Outline

Community-engaged immigrant health research

Coalition building for community-engaged immigrant health research
Community-engaged Immigrant Health Research
Community-engaged Research Basics

- A collaborative approach to improve the health and quality of life of community members
- Based on partnership between investigators and community members
- All partners participate in defining, analyzing, offering solutions to problems
- Sharing power, decision making, ownership
- Based on trust and mutual respect
- Responds to local needs using a socio-ecological perspective

Israel, Eng, Shulz, & Parker, 2005
Finding Synergies for Community Engagement

- Evidence Gap
- Funding Opportunities
- Community Needs
Example 1: Cuidándome Project

- A community-engaged research project to implement and evaluate a peer-based intervention to promote cervical and cancer screening among Latina immigrants in Dane County, WI

- A collaboration between UW-Madison and Planned Parenthood of WI

Martinez-Donate et al. JHCPU 2013;1717; Lechuga et al. JIMH 2016;18
Example 2: Hombres Sanos Project

- A 3-year community-engaged research project to design and evaluate a social marketing campaign to promote HIV testing and reduce unprotected sex among heterosexually-identified Latino men who have sex with men

- A collaboration between San Diego State University and Vista Community Clinic

Martinez-Donate et al. AJPH;2010;100(12); Zellner et al. AJPH 2009;99(1)
A Process for Community-Engaged Research

KNOW THE LANDSCAPE, DO YOUR HOMEWORK

REACH OUT, KNOCK ON DOORS, MAKE YOURSELF VISIBLE

THINK SMALL FIRST, LOW-HANGING FRUIT

BUILD A SYMBIOTIC RELATIONSHIP, MAKE YOURSELF USEFUL
Know the Landscape

- Do you research regarding im/migrant focused organizations
  - Population/communities served
  - Services
  - History
  - Leadership
  - Previous relationships with academic institutions
Reach Out

- Without an agenda
- Learn about organization
- Identify their needs, priorities
- Sense interest, potential for collaboration
- Put yourself on their radar
- Leave door open, communication channels open for future opps
- Be patient. This is time well spent.
Think Small First

• Identify intramural, less competitive funding opportunities
• Pursue “low-hanging fruit”: Opportunities for collaboration even w/o funding
• Engage (other) students in small collaborative projects
• Projects that focus on organization needs (needs assessment, program evaluation, quality improvement)
• Prioritize service, find research edge
Build A Relationship

- Trust takes time and sustained commitment
- Be generous with your time
- Be present
- Do not rush things
- Allow time for trust building
- Understand different timelines & demands
- Engage in more ambitious projects as relationship solidifies
- Acknowledge the expertise of each partner
- Transparency and fairness
Additional Considerations

- Starting from scratch is hard
- Reach out to established community-engaged researchers
  - Shared research interests
  - Complementary expertise
  - Respected by community
- Tag along, build on and expand their reputation
- Don’t take relationship with community partners for granted
- Maintain dialogue and symbiotic approach
  - Ongoing check-in points, ongoing sharing
  - Avoid parachute research
- Expect challenges and tensions
A CER Case Study: CRISOL Contigo

- Effective strategies to reduce health disparities for Latino immigrants
- A community-engaged research program to promote Latino immigrant health in Philadelphia
- A collaboration between Drexel University, The Philadelphia AIDS Consortium, and Women Organized Against Rape
A COMMUNITY-ACADEMIC PARTNERSHIP, SINCE 2017

• Researchers, staff at CBOs, students, community members
• Health disparities affecting Latino immigrants
• Mixed-methods to assess health, healthcare needs, and community assets
• Development and testing of a pilot peer-driven intervention
• Intramural seed funds → R21 NIH award → NIH Supplement

Martinez-Donate et al. PLOS ONE, in press
CRISOL Contigo

- A multi-level intervention to reduce COVID-19 disparities affecting Latino immigrants in Philadelphia, USA
- A community-academic collaboration based on:
  - Community-based participatory research principles
  - Popular Opinion Model
  - Community resilience theory
  - Social-ecological framework
LATINOS IN PHILADELPHIA

- 15% of city’s population
  - 15% born in Puerto Rico
  - 20% born outside the U.S.
- Socio-economic disadvantaged
  - 40% living in poverty
  - Poorest neighborhoods
- Little political representation
  - 44% of residents are Black
  - 34% are non-Hispanic White


Lazo-Elizondo et al. 2021
A MULTI-LEVEL, COMMUNITYWIDE INTERVENTION TO REDUCE COVID-19 DISPARITIES FOR LATINOS

Community
A coalition of Latino-serving community-based organizations

Inter-personal
A Latino immigrant peer-driven program

Individual
An online directory of community resources
www.crisolcontigo.com
THE CRISOL CONTIGO PEER-DRIVEN PROGRAM

Trusted community members trained to:

- Educate peers, dispel myths
- Modeling healthy behaviors
- Connect peers to services
- Bring feedback to organizations

2 phases

- Training – 16-hour virtual training (Asynchronous-synchronous)
  - Homework
- Community Outreach – 9 months
  - Bi-monthly booster meetings

Rogers, 1962; Wiggins, 2012; Dearing & Cox, 2018
THE CRISOL CONTIGO COMMUNITY LEADERS
14 community leaders trained
16-hour virtual training
93% fidelity
100% attendance
9.6 satisfaction (0-10 scale)

11 leaders active over 9-month outreach period

>8,000 intentional interactions with community members
COMMUNITY OUTREACH

Topics Discussed with Community Members
- COVID: 38%
- Other Health: 40%
- Resilience: 4%
- Legal: 10%
- Other: 8%

Help Offered to Community Members
- Vaccination: 11%
- Education: 22%
- Referral: 26%
- Food Distribution: 17%
- Counseling: 5%
- Masks/Hand Sanitizer Distribution: 15%
- Navigation: 4%
- Referral Type: Health 36%, VACCINE 21%, Food 14%, Legal 13%, Other COVID 9%, Testing 9%
The Latino Health Collective

A Coalition to Promote Latino Immigrant Health in Philadelphia

Image source: Philadelphia Convention & Visitors Bureau
Formation of the Latino Health Collective

• Based on community relationships formed following CER process
• Meetings and interviews with stakeholders to:
  • Understand network of Latino-serving organizations
  • Hear Latino-serving providers’ perspectives on syndemic and services
• A roster of organizations and stakeholders
• The COVID-19 pandemic: Crisis --> Opportunity
  • Emerging as honest brokers, creating a platform for dialogue and joint advocacy
The Latino Health Collective

• A coalition of Latino-serving agencies, city officials, Consulate staff, and others, convened by academic partner

• Monthly town hall meetings since April 2020
  • Identifying pressing needs during pandemic
  • Sharing information and other resources
  • Facilitating dialogue and collaboration
  • Advising and advocating for resource allocation, service design

• Ongoing communication with partners:
  • Meeting minutes, slides, materials
  • Weekly newsletter
  • Listserv
LHC ACTIVITIES AND PRODUCTS (March 2020 - November 2021)

- 23 town hall meetings
- +60 organizations
- +150 individuals
- Protective equipment for staff
- Access to testing supplies and training
- Pop up testing sites
- Community-based vaccination sites
- Dissemination of information
- Reducing barriers to testing
- Reducing barriers to vaccination
- Recommendations for vaccine equity
A Survey of Latino-serving Organizations

- Awareness of the Latino Health Collective: Yes 64%, No 36%
- Included in LHC Listserv: Yes 75%, No 25%
- Organization participates in LHC: (% Completely/somewhat agree)

Bar chart:
- Stay informed about resources for Latinos: 87.5%
- Expand connections with other orgs.: 75%
- More referrals to our organization: 50%
- More referrals from our organization: 62.5%
- More administrative collaborations: 56.3%
- Collaborate in planning activities: 62.5%

Question: "The Latino Health Collective has helped my organization / resulted in..." 

% Completely/somewhat agree
HELPING TO CHANGE THE TRENDS

Source: Philadelphia Public Health Department, November, 2021

Rates per 10,000, Week of 10/24
Hispanic: 4.5
White: 6.6

Rates per 10,000
Hispanic: 334.9
White: 209.1

Source: Philadelphia Public Health Department, November, 2021
IMPACT ON COVID-19 VACCINATION RATES

% Population Vaccinated in Philadelphia*

- 18-44 yrs.
  - Latino Immigrants: 76%
  - All Latinos: 67%
  - NH Whites: 66%

- 45-55 yrs.
  - Latino Immigrants: 88%
  - All Latinos: 91%
  - NH Whites: 65%

* At least 1 dose of vaccine

Source: Philadelphia Public Health Department, November, 2021; Unpublished data from RDS survey by our team.
CER Sustainability

Pilot CRISOL → **CRISOL Contigo (COVID-19)**

**CRISOL program adopted by our community partner**

**CRISOL Mente (R01 MD018206)**
More community partners
Mental health focus
- Access to mental health
- Mental health awareness and stigma
- Capacity of Latino-serving network
- Growing the Latino Health Collective

**CRISOL immigrant leaders gained increased visibility and are engaged with many organizations**
Latino Health Collective Sustainability (Through June 2023)

- +75 organizations
- +150 individuals
- 43 town hall Meetings
- ~26 participants per town hall
- ~13 organizations per town hall
- Availability of services
- Access to services
- Quality of services
- Partnerships For Research & Advocacy
Additional Considerations on CER

**Community-engaged health research is ideally suited** to address evidence gaps and local community needs for migrants and other ethnic minorities.

Community-based, multi-level strategies can **increase community capacity and offer a sustainable approach to combat health inequities**, beyond specific research funding streams.

A flexible model, **easily adaptable** to address other health issues and other communities.

**Promoting dialogue and community partnerships** is critical to break silos and reduce disparities.

Academic institutions can **serve as honest brokers and coalition builders** to advocate for ethnic and immigrant health.
Questions?