



Salud para su Corazón of North Texas, An Example of Enhanced Dissemination and Utilization Center

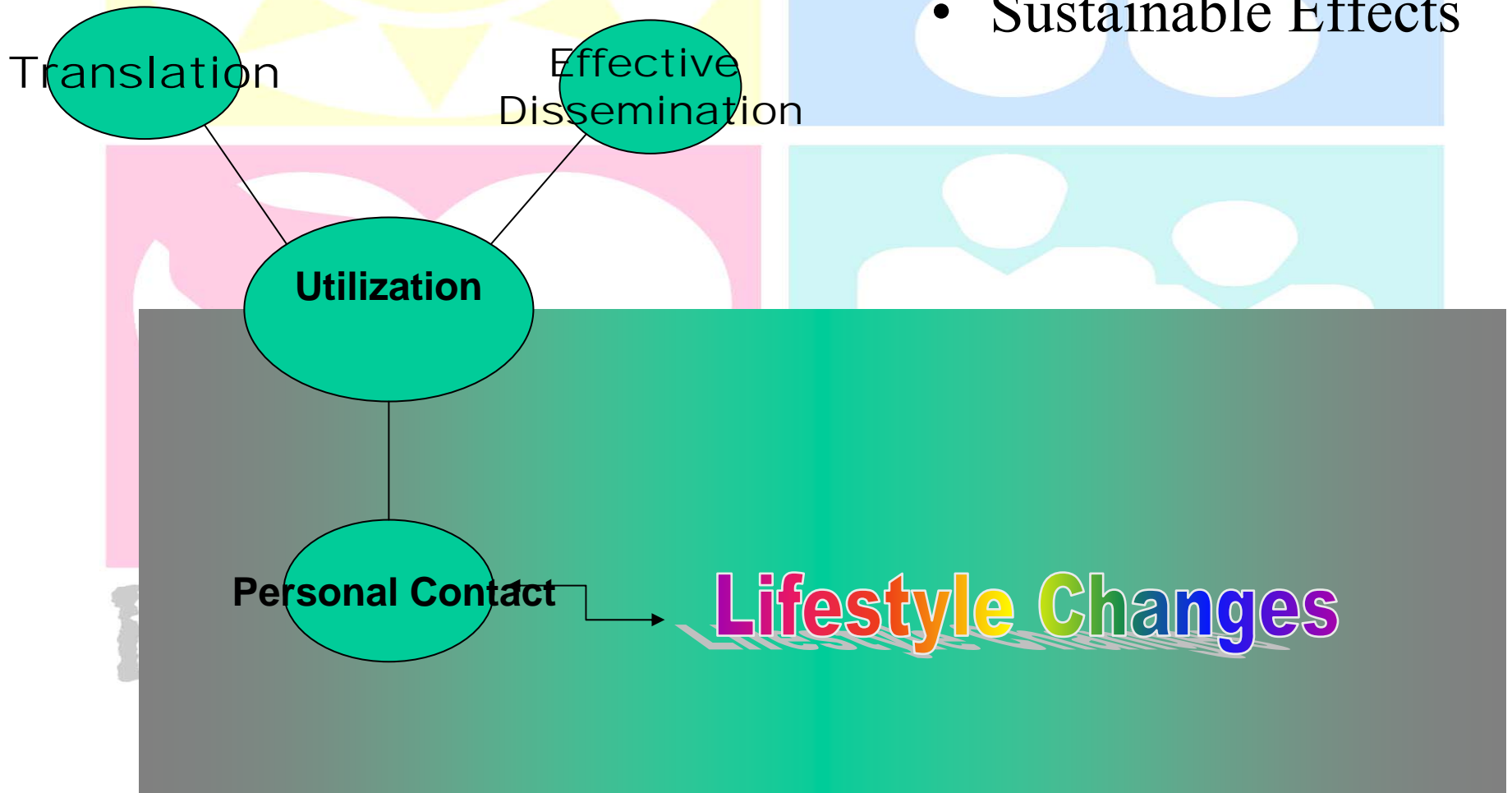
Presented by
Héctor Balcázar, PhD

**PROMOTORES
DE SALUD**

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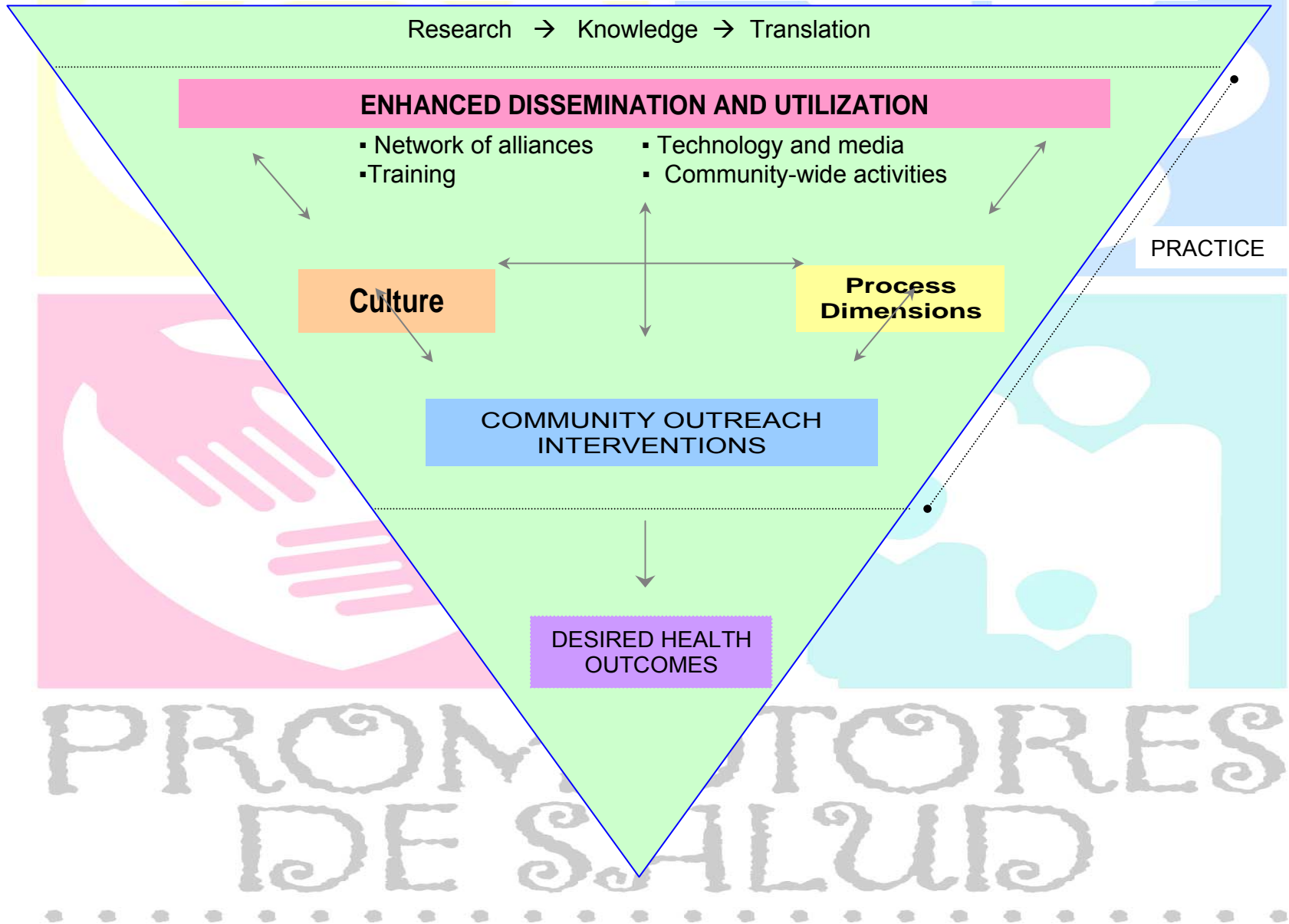
Enhanced Dissemination and Utilization

- Sustainable Effects



Salud para su Corazón

Theoretical Model of Translation using Enhanced Dissemination and Utilization





Translation Process: Salud

- **Develop Framework**

- **Develop of Salud Educational Materials**

- **Salud Campaign**



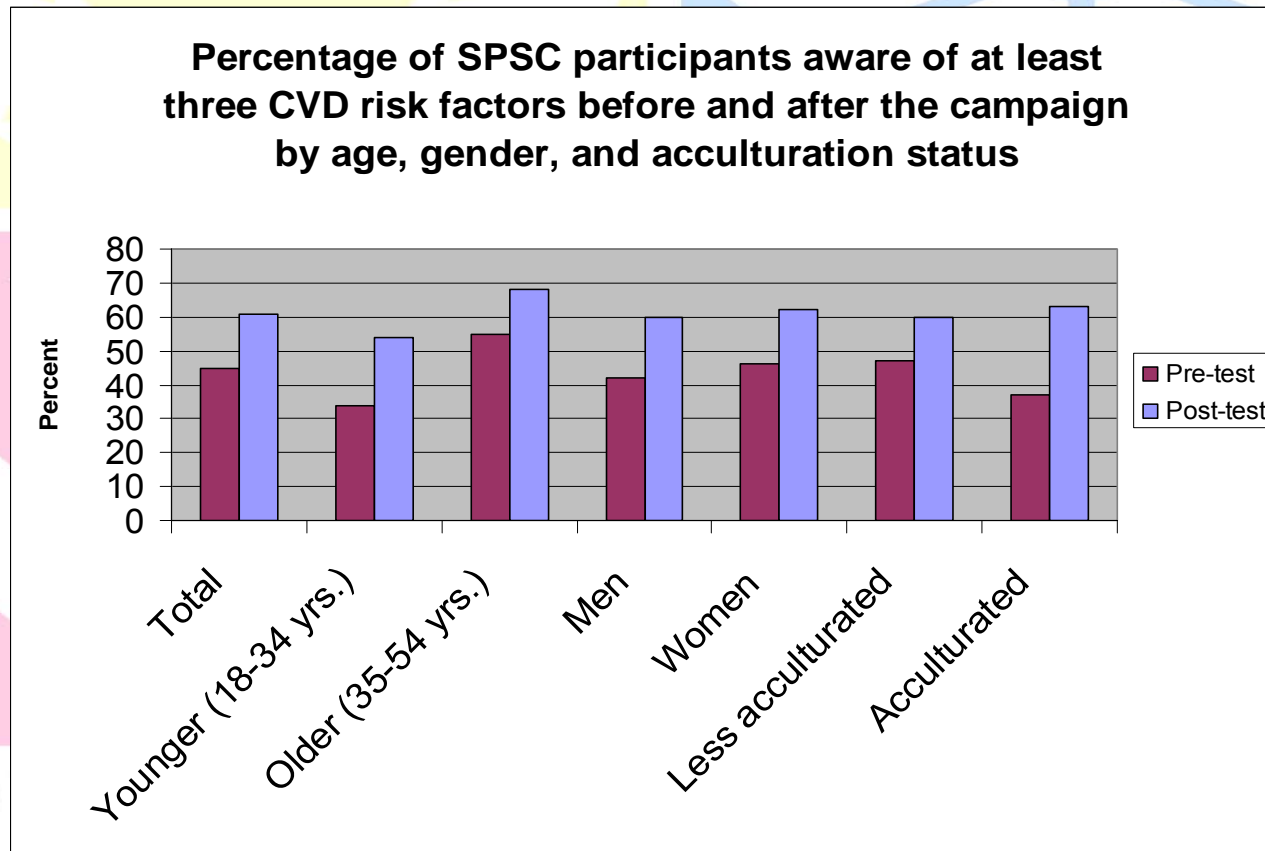
- **Develop Community Outreach Processes**



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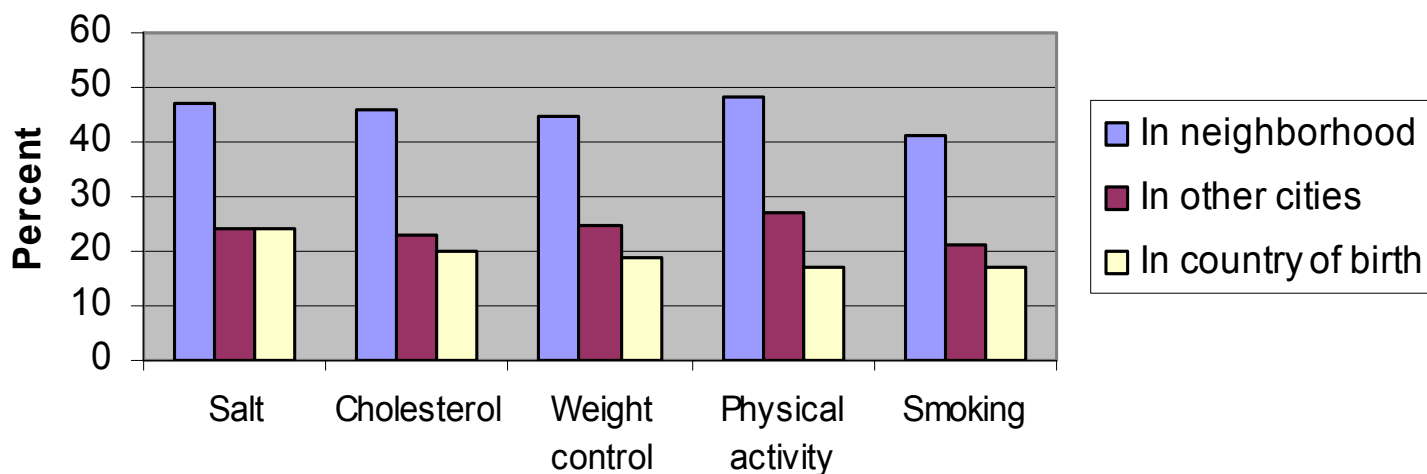
Salud Para Su Corazon in Washington, D.C.: An Impact Evaluation



From "Evaluation of a community-based Latino heart disease prevention program in metropolitan Washington D.C.," by R. Alcalay, M. Alvarado, H. Balcazar, E. Newman & G. Ortiz, 1999-2000, *International Quarterly of Community Health Education*, 19(3), 191-204.

Salud Para Su Corazon-NCLR: Program Evaluation

Proportion of SPSC-NCLR families sharing information with friends by topic of information



From "Eliminating cardiovascular disease health disparities among Hispanics: Evaluation of Salud Para Su Corazon-NCLR National Dissemination Promotora Outreach Projects," by H. Balcazar, M. Alvarado, M. Luna Hollen & Y. Gonzalez-Cruz, Unpublished manuscript.

Enhanced Dissemination and Utilization-SPSC-NT

- **Community-wide screenings and risk factor assessments for CVD**

- **Community-wide dissemination**

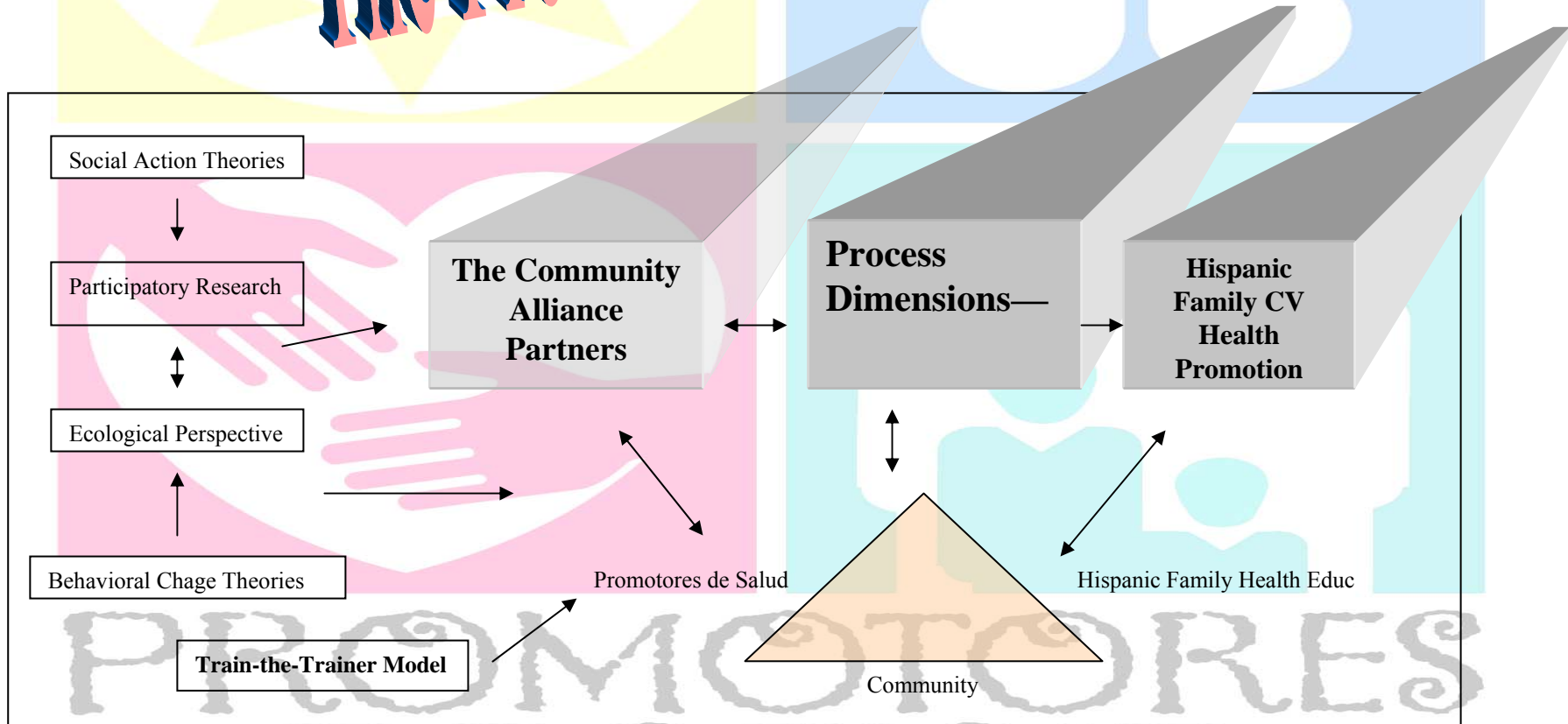
- **Individual-family dissemination of CV health information**

- **Enhanced utilization by individual behavior modification**

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The Promotora Outreach Model



SPSCNT 2003

Community Alliance Development



- **74% had a personal interest in preventing CVD in the community.**
- **55% reported increased involvement in addressing CVD in the community.**
- **61% reported increased activity in joint CVD ventures with other organizations.**

The Promotora Vision-- Created during Training Continues as the Promotora Network



Promotores de Salud Vision

Salud para su corazón
del Norte de Teks



We are the **light** of this world – let us use the passion of our hearts to educate families.
Our communities are like **flowers**. We are to take care of those flowers, to help them and to water them with droplets of information.

We are like a **helping hand** to the **hearts** of our communities and **families**.

We gather strength from each other and inspiration from the same **communities** we help.

la **luz** del mundo — usamos la pasión de nuestros corazones para educar a familias.

Nuestras comunidades son como **flores**. Nosotros cuidamos esas flores, las ayudamos y las regamos con gotitas de información.

Somos como una **mano sosteniendo** los **corazones** de nuestras comunidades y nuestras **familias**.

Reunimos fuerza e inspiración de las mismas **comunidades** a las cuales ayudamos.

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Salud para su Corazón

♥ Alliance of Partners

♥ Working with Families

Promotores

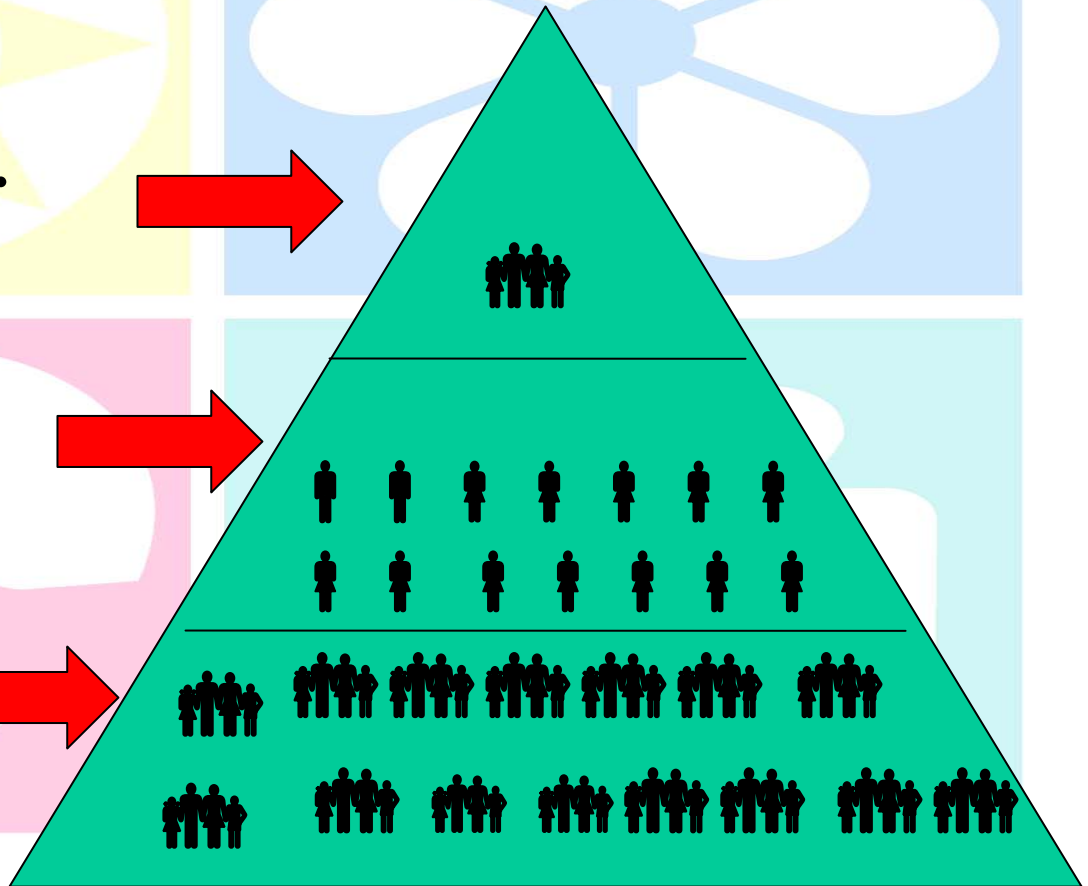
♥ Process Dimensions—
Culture & Community

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Train-the-Trainer Model—Design 1

1. **SPSCNT trains Promotores de Salud.**
2. **Promotores de Salud train contact family member.**
3. **Contact family member trains family.**



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The Promotora “Train-the Trainer” Model of SPSC-NT: An application of culturally-enriched process dimensions

Promotora Recruitment:

- Recruitment form
- Personal phone calls and invitations
- Network of Partners

Family Recruitment:

- Recruitment events with promotoras in attendance
- Promotoras recruited at neighborhood level

PROMOTORAS DE SALUD

The Promotora “Train-the Trainer” Model of SPSC-NT: An application of culturally-enriched process dimensions


Promotora Training:

- Used “Su Corazón, Su Vida” Manual, modeling activities with the “Ramirez Family”
- Used illustrative materials
- Conveyed concepts with poems, music, and dance
- Engaged in cooking demonstrations
- Used incentives and rewards, e.g., graduation ceremony and party, certificates signed by NHLBI & SPH officials

The Promotora “Train-the Trainer” Model of SPSC-NT: An application of culturally-enriched process dimensions

Intervention:

- Implemented “Su Corazón, Su Vida” and NHLBI educational materials
- Developed SPSC-NT materials and activities
- Designed creative teaching techniques
- Used family approach
- Encouraged individual participants to recruit family members, building their sense of ownership in the program



The Promotora “Train-the Trainer” Model of SPSC-NT: An application of culturally-enriched process dimensions

Monitoring intervention delivery:

- Cards and pictorials to help promotoras with delivery of the intervention, including Family Health Card and the Golden Rules Card
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The Promotora “Train-the Trainer” Model of SPSC-NT: An application of culturally-enriched process dimensions

Infrastructure:

(Network of Partners, NHLBI, academic institution, project team & MPH students)

- Assisted promotoras prepare class materials and set up classrooms
- Provided volunteer nurses for screening in family sessions
- Helped with design development of materials and purchase of incentives
- Provided ongoing personal and professional promotora development

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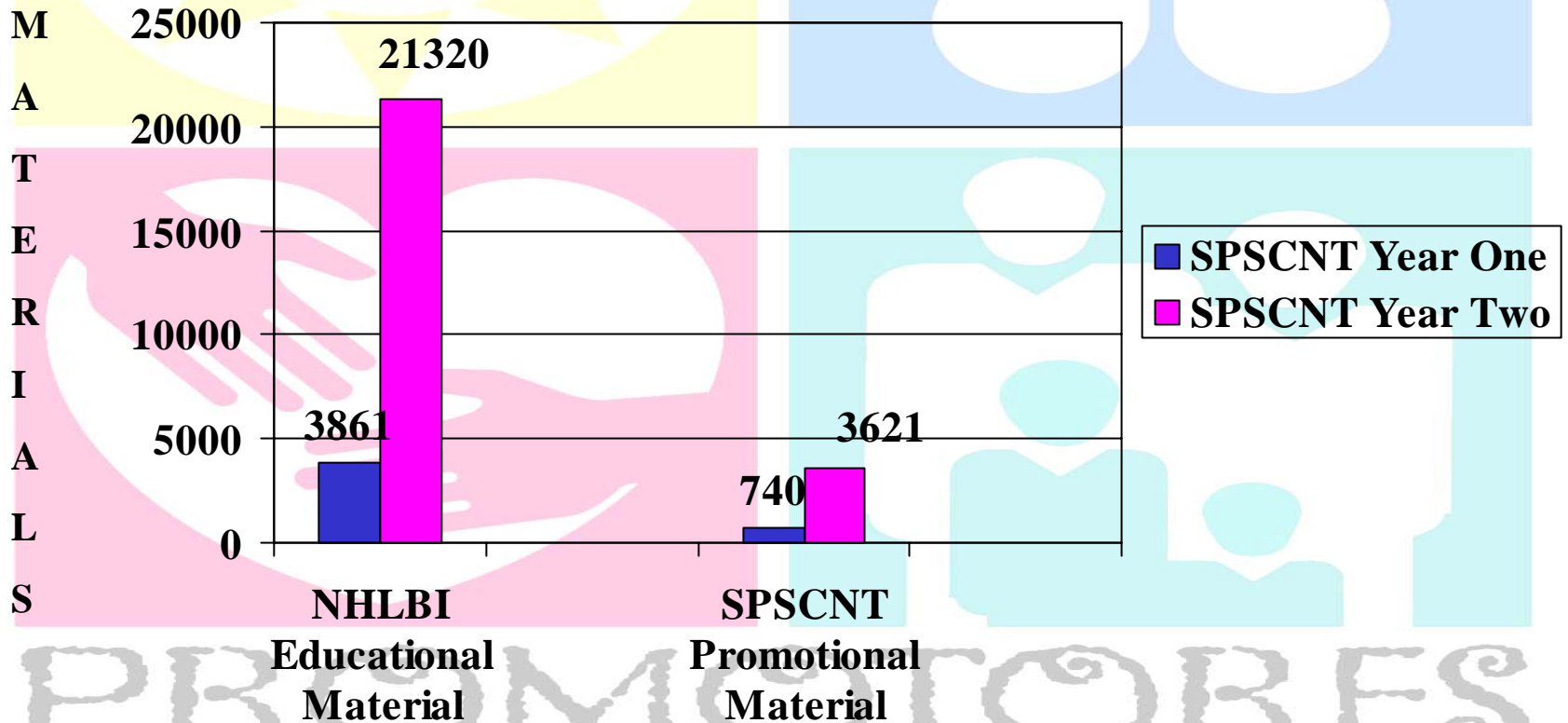
The Promotora “Train-the Trainer” Model of SPSC-NT: An application of culturally-enriched process dimensions

Evaluation:

- Used a culturally-appropriate evaluation tool, ¡Cuéntemelo! (Balcázar et al, 2004)
- Obtained testimonials, diaries, and pledges
- Assessed promotoras knowledge and skills

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SPSCNT EDUC Center Material Distribution

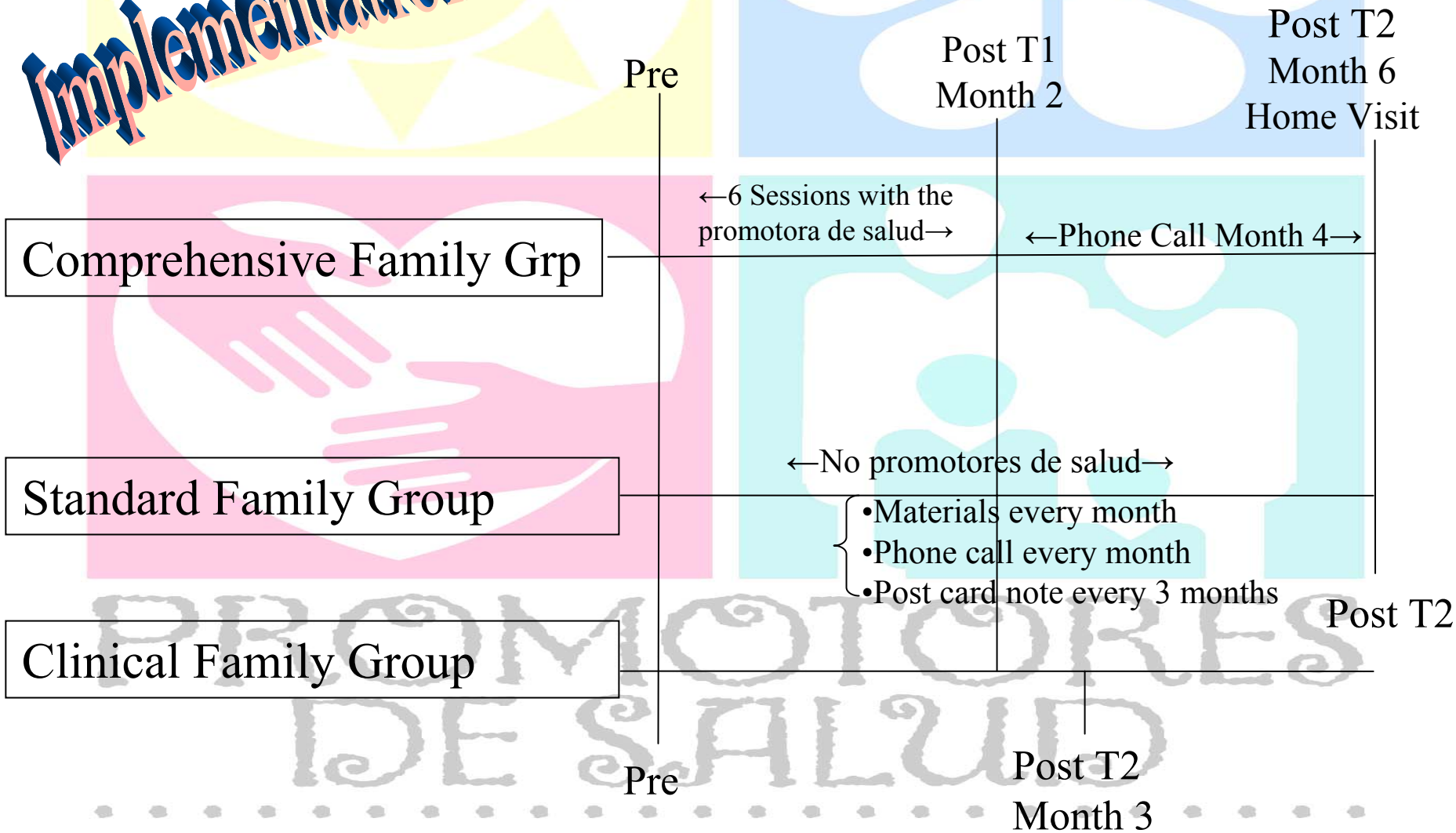


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Promotora Implementation Model

SPSCNT 2003



Comprehensive Family Grp

Standard Family Group

Clinical Family Group

Pre

←6 Sessions with the
promotora de salud→

Post T1
Month 2

Post T2
Month 6
Home Visit

←Phone Call Month 4→

←No promotores de salud→

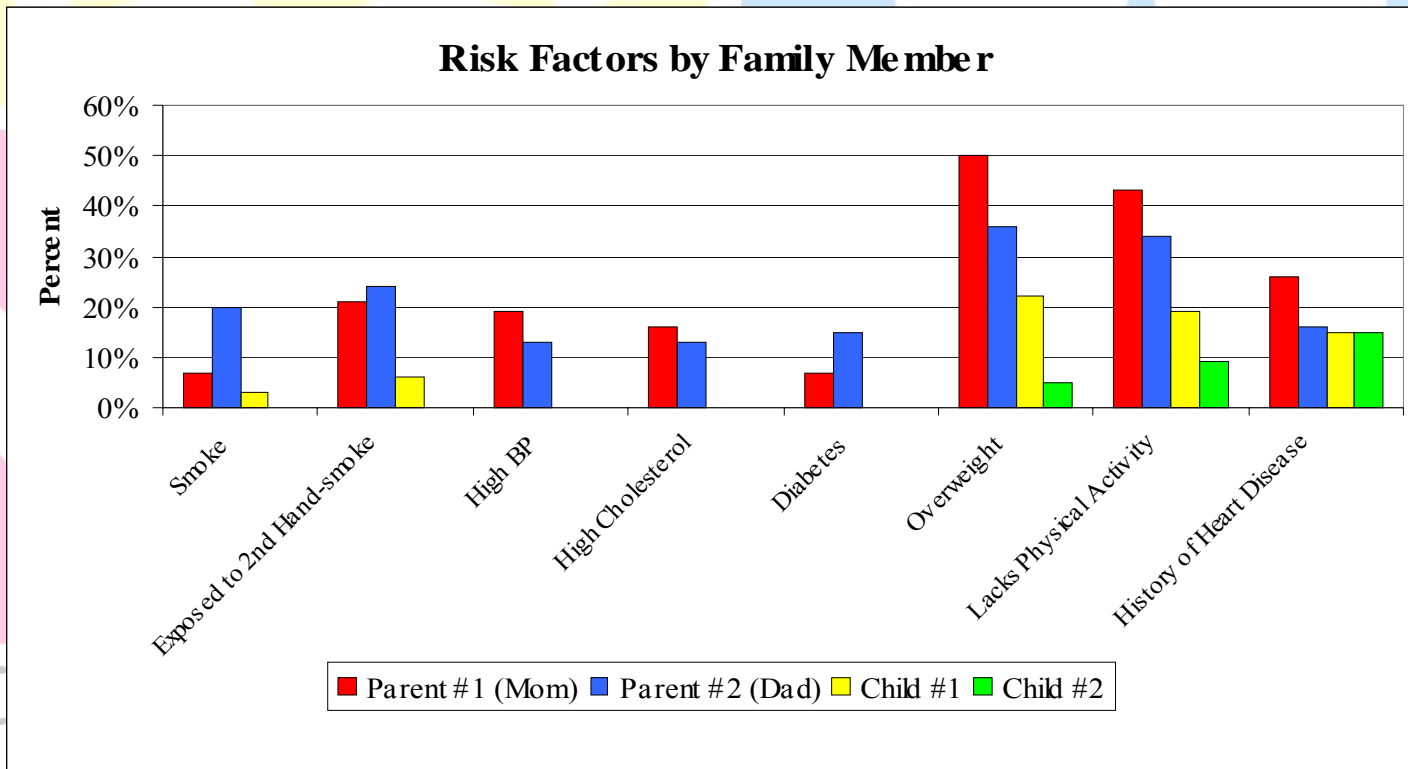
- Materials every month
- Phone call every month
- Post card note every 3 months

Post T2

Pre

Post T2
Month 3

All Family Risk Factors



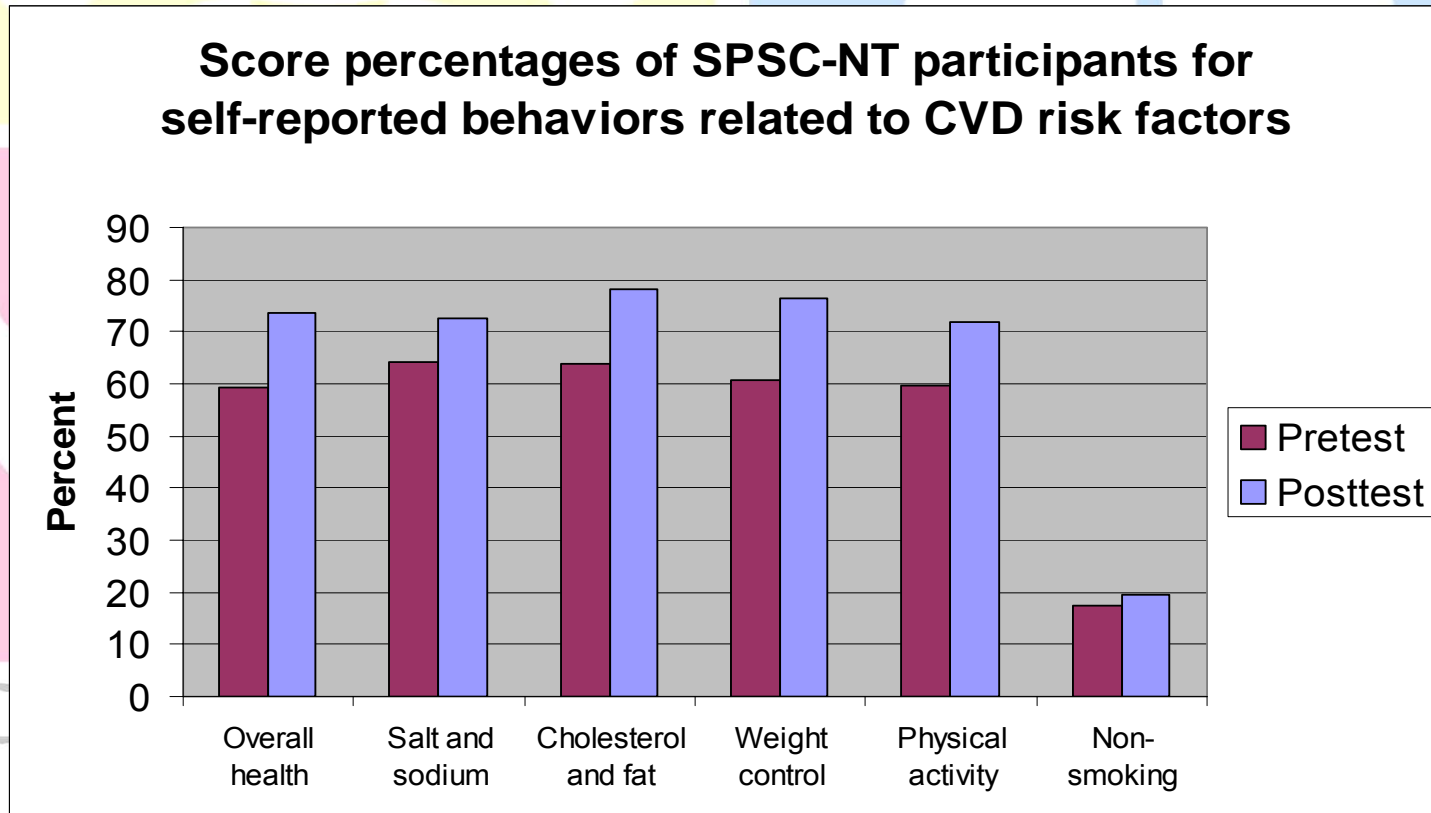
Healthy Lifestyle Behaviors Subscales Reliability Results

- **Pre- and Post-tests (N=77):**
 - **Salt & Sodium Behaviors (10 items, $\alpha = .73$)**
 - **Fat & Cholesterol Behaviors (10 items, $\alpha = .82$)**
 - **Weight Control Behaviors (4 items, $\alpha = .75$)**
 - **Physical Activity Behaviors for Mother (10 items, $\alpha = .83$)**
 - **Smoking Behaviors (3 items, $\alpha = .71$)**
- **Created composite mean scores for each subscale**

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Salud Para Su Corazon-NT: Program Evaluation



From "Does a community health worker program work among Latino communities?," by A.Y. Medina, 2003, Unpublished Master's Thesis.

Salud Para Su Corazon-NT: Program Evaluation

Mean scores for self-reported behaviors related to CVD risk factors
for classroom intervention group

	Pretest			Posttest			p-value
	n	mean	sd	n	mean	sd	
Classroom							
Overall health	67	2.43	0.42	67	2.88	0.52	<.01
Salt & sodium	67	2.63	0.42	67	3.15	0.43	<.01
Cholesterol & fat	67	2.50	0.61	67	3.08	0.54	<.01
Weight control	67	2.52	0.56	67	3.14	0.58	<.01
Physical activity	62	2.06	0.52	62	2.34	0.65	<.01

From an untitled, unpublished manuscript.

Salud Para Su Corazon-NT: Program Evaluation

Mean scores for self-reported behaviors related to CVD risk factors
for one-to-one intervention group

	Pretest			Posttest			
	n	mean	sd	n	mean	sd	p-value
One-to-one							
Overall health	46	2.27	0.45	46	3.34	0.44	<.01
Salt & sodium	46	2.56	0.45	46	3.35	0.44	<.01
Cholesterol & fat	46	2.41	0.69	46	3.33	0.55	<.01
Weight control	46	2.40	0.66	46	3.34	0.51	<.01
Physical activity	36	1.60	0.52	36	2.15	0.69	<.01

From an untitled, unpublished manuscript.






The Promotoria Workforce

42 Trained Promotores
22 Working Promotores

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Lessons Learned

- **New Conversation For Prevention: Enhanced dissemination and utilization**
 - **Enhanced Elements: “Components of Culture and Its Process Dimensions”**
 - **Role of Promotores de Salud in health education dissemination**
 - **Building infrastructure: is the first step in effective dissemination**
 - **Enhanced Utilization: “Direct Intervention With Individuals-Families”.**
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Limitations of the Program

- **Promotores de Salud were without neighborhood anchor.**
- **Recruitment of families is a challenge due to social & economic constraints.**
- **Simple programs are preferred.**
- **Family attrition rate is also challenging.**
- **5 years versus 3 years for a outreach initiative can bring stronger sustainability.**
- **Partner commitments are difficult to make & retain.**



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