Utilizing goal setting and telephonic counseling among Latinos in a community-based health education program in Denver

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Objectives

1. Describe CHARLAR’s implementation of goal setting to promote behavior change related to reducing cardiovascular disease risk in an underserved population.

2. Discuss how the CHARLAR program utilizes telephonic counseling in addition to health education sessions to promote behavior change in both the group and individual setting.

3. Discuss successes achieved by CHARLAR related to reducing cardiovascular disease risk among Denver-area Latinos.

4. Discuss obstacles encountered in the implementation of goal setting and telephonic counseling.
CHARLAR: Community Heart Health Actions for Latinos at Risk

- 12-week Community Health Worker-led cardiovascular disease and diabetes prevention & management program for adult Latinos residing in Denver.

- ~1,800 participants since 2009

- CHARLAR is currently funded by The Colorado Health Foundation, The Colorado Department of Public Health & Environment Office of Health Equity, and the Anschutz Family Foundation
Service Population: Latino(a)* adults ≥ 40 years, residents of West/Northwest Denver

Mean age: 54

73% Female

70% Foreign-born

77% Prefer Spanish

59% < 12 years of education

55% Family income <$15,000/year

54% Uninsured at program start

42% had either hypertension or diabetes at the start of the program
Outcomes

Improvements in Clinical Outcomes: At Risk Cohort (n= 660)

<table>
<thead>
<tr>
<th>Metric</th>
<th>Pre/Post Program</th>
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<tbody>
<tr>
<td>Systolic Blood Pressure (mmHg)</td>
<td>-11</td>
</tr>
<tr>
<td>LDL Cholesterol (mg/dL)</td>
<td>-14</td>
</tr>
<tr>
<td>Fasting Blood Glucose (mg/dL)</td>
<td>-8</td>
</tr>
<tr>
<td>Triglycerides (mg/dL)</td>
<td>-57</td>
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<tr>
<td>10-year Framingham Risk</td>
<td>-2.3</td>
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</tbody>
</table>
Improvements in Exercise and Dietary Outcomes: Total Sample (n = 768)

- Vigorous exercise per week (minutes): 33
- Sugared sodas per week: -1
- Fruits and vegetables per week: 5.6
Recruitment and Baseline Assessment

12-week Curriculum

Follow Up Assessment

Health Maintenance

Recruitment and Participant Intake

Baseline Health Assessment* and Risk Counseling

Referrals to Medical Clinics and Enrollment Assistance

12-week Curriculum
- Health education
- Skill Building
- Healthy Eating Strategies
- Physical Activity Strategies
- Grocery Store Tour
- Skill building
- Self-management Goal Setting
- Social Support
- Zumba-Inspired Dance
- Walking Group

3-month Health Assessment to evaluate changes in health outcomes and behaviors

Referrals to Additional Community-Based Healthy Living Programs
- Graduation

Learning Series
- Colorado Heart Healthy Solutions
- Diabetes Prevention Program

Calls to follow-up on referrals and reinforce self-management goals

Health assessments measure clinical risk factors including triglycerides, cholesterol, blood pressure, glucose, weight and height. The assessments include an evaluation of health status, fruit and vegetable intake, eating behaviors, physical activity levels and tobacco use, access to care, medication utilization, knowledge of heart disease and diabetes risk, and access to social support.
Program Start

Introduce Goal Setting (Week 2)

Follow-up Call #1 (~30 days)

Evidence-Based Curriculum

Follow-up Call #2 (~60 days)

Health Assessment

Program Finish

Health Assessment
Goal Setting

- Introduced in 2014 to complement/enhance current curriculum.

- Learn how to set SMART goals early on in the program.

- Create both long-term and short-term goals.

- Receive tailored feedback and guidance on creating, executing, and modifying their health goals.
Telephonic Counseling

- Two waves of telephonic counseling/navigation calls, in addition to weekly reminder calls.

- Follow-up regarding elevated risk factors, connection to care, resources for enrollment, goal-setting support.

- Allows for one-on-one CHW-Participant interaction

- ~500 “successful” calls (83%)
Goal-Setting Challenges

- Accommodating different levels of education
- Providing tailored feedback when program is *primarily* group-level
Telephonic Counseling Challenges

- CHW workload
- Timing of call
- Goal-setting
Adjustments

- Provide telephonic counseling to only those at heightened risk or in need of Navigation services, remove goal setting content

- Incorporate individual goal-setting feedback in class session

- Spread goal-setting content throughout the classes

- Create visual and dynamic Action Plan booklet to encourage/track goal-setting
Thank you!

- Questions?

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