Family Health Needs Study: Bi-National Community Participatory Research

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What was the context of the study?

- Invitation in 1999 from Friends of Calnali to provide health care
  - Medical and dental schools made an initial trip in 1999, nursing joined in 2001 and public health joined in 2006
- Calnali International Service Learning Program
- Evolving partnerships with Calnali Town Council, Universidad Autonoma del Estados de Hidalgo
- Funding from community foundations, health agencies, and individual student and faculty efforts
Why was the study needed?

- Continuous quality improvement approach
- US-based health professionals and students at urban campus
- Increased understanding of health care needs from residents’ perspective
- Providing services to rural, mountainous communities in one of the most underserved areas of Mexico
What benefits did we foresee?

- Community residents would have a voice in shaping the services provided
- Students would experience an effort at tailoring our services to expressed needs
- Continue to build trust in our collaborative partnership
Why did we choose a community participatory research design?

- Participatory action research
  - Avoids paternalistic attitude
- Rapid rural appraisal strategy used globally
  - no assumptions about what needs are, no guiding toward services or in a particular direction
- Survey questions for the Family Health Needs Study
  - What is the most common health problem for your family?
  - What do you think causes it?
  - What do you think could be done about it?
What did we learn during implementation?

- Continuously include discussions about the research in planning sessions
- Separate station in clinic with assigned research assistants who had passed the Human Subjects Certification Test
- Take time to develop relationships
- Be prepared for Indian dialects
- Assess process frequently during initial implementation
- Review responses each day as so to compare different villages
- Secure data
What did we learn during data analysis?

- Language translation
- Time, commitment, and funds
- Relationship development
  - Individuals and partnership
- Establishing process for analysis between UAEH and IUPUI
  - Onsite visit for initial development of data categories and themes
- Identify conceptual framework
- Electronic sharing of data facilitates analysis
How are we using the findings?

- Participants benefit directly, information used to add a health education component to clinics during 2006 trip
- Build partnership capacity to provide services
- Scholarship
  - Agreement on joint authorship
  - Video conference in February with UAEH and IUPUI, Spanish and English
  - American Public Health Association conference
  - Publication