Curriculum Analysis:
Prime Time Sister Circle to Millennials Sister Circle

DORNSIFE SCHOOL OF PUBLIC HEALTH
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Philadelphia Black Women’s Health Alliance [PBWHA]

- Founded in 1983 by 100 women from Philadelphia
- Recognized the silenced and unheard voices of Black women in Health Community

**Mission:** Improve health care outcomes and reduce health disparities for African Americans and minority women through advocacy, education, research, and support services

**Values**

- Diverse & Inclusive
- Empowering & Self-sustaining approaches
- Ethically & Morally Guided
- Excellence beyond Expectations
- Responsive to present and emerging needs
- Relentless resolve to eliminate and/or reduce health disparities
PBWHA Programs & Services

Gambling away the Golden Years
Support our Sisters Family Leadership Program
Safe Dates: Teen Dating Violence Prevention Program
Girls Circle
Kids Don’t Gamble: WANNA BET?
Peers Making Peace

Prime Time Sister Circle Program
Background:

Health Disparities

Some sociodemographic factors can worsen the size of disparities but generally **exist across the board** for black women (Belgrave & Abrams, 2016)

African American women are **60% more likely** to have high blood pressure compared to Non-Hispanic White Women (OMH, 2020)

In 2017-2018, Non-Hispanic Black women had **the highest prevalence of obesity** at 56.9% (Hales et al., 2020)

African American women are **1.8 times more likely** to have diabetes than white women (NCHS, 2014)

African American women are **more likely to die from** breast and cervical cancer, although not more likely to be diagnosed with it (NCHS, 2014)

Based on six-year trends ending in 2016, if rates of HIV infections continue, **1 in 48 Black Women** will be diagnosed with HIV in their lifetime (CDC, 2019)
Prime-Time Sister Circle [PTSC]

developed by Drs. Marilyn Gaston & Gayle Porter

Evidence-based, socially innovative, and culturally competent support group intervention designed to improve the lifestyle of African American women between 40-75 years old

- Stress management
- Nutrition
- Fitness
- Prioritizing own health

GOALS:

1. Increase knowledge and improve attitudes/behaviors in designated areas
2. Empower African American women to take charge of their health outcomes & reduce emotional and physical disparities
Launched at the African American Museum of Philadelphia on August 10, 2011

Facilitated by PBWHA

102 women in the first graduating class from the Philadelphia cohort

PTSC in Philadelphia
Philadelphia Preliminary Evaluation Findings

- 20% of participants had reduced stress levels
- 40% indicated that their health became a priority
- 30% increase in participants who reported exercising 3 times or more a week
- 68% of participants lost weight
- 17% decrease in hypertension
Goal: impact prevalence of chronic disease when they reach the age of eligibility for the PTSC program

i. Successful program utility was identified with PTSC
ii. Full circle moment
iii. Prevention
iv. Intermediary generation
Millennials
Who & Why?

• Defined as...
  Age 18-35
  Women of color

• Reproductive age group

• Intermediary generation
  Reach up and down
  Caregiving

• Prime age for prevention
CURRICULM ANALYSIS & ADAPTATION

Stage 1
- Develop questions
- Recruitment
- Survey
- Focus group

Stage 2
- Synthesize focus group & survey data
- Assess gaps in existing curriculum
- Curriculum Report

Stage 3
- Meet with...
  - Kassandra, Ms. Brenda, Dr. Gaston, Dr. Porter
- ILE Presentation
Millennial Sister Circle [MSC]

1. Demographic Survey
2. Focus Group: June 29, 2019 & November 2, 2019

- Example questions:
  - How do finances impact your wellness?
  - What must be included for your regular attendance to a wellness program for African American women?
  - In what ways do you have or not have control over your health? over your sexual health?
  - What do you do routinely to manage stress and avoid triggers? (healthy and unhealthy)
  - What makes you feel you want to get high or drink?
  - What are the challenges to maintaining a good relationship?
  - What are your sources of support for being healthy?
Survey Demographics

**AGE**
- 18-20: 14%
- 21-24: 54%
- 25-28: 11%
- 29-31: 21%
- 32-35: 0%

**EDUCATION**
- High School/ GED: 21%
- Less than High School: 11%
- Some College or Higher: 4%
- Graduate School: 64%

**INCOME**
- 0-19,000: 4%
- 20,000-34,999: 39%
- 35,000-69,999: 25%
- Greater than 70,000: 32%

**MARITAL STATUS**
- Married: 7%
- Living with Partner: 14%
- Widowed/Seperated/Divorced: 4%
- Not married: 75%

**HAVE CHILDREN OR EXPECTING**
- Have children: 7%
- No children: 36%
- 3rd Qtr: 3%
Expressed Needs

**Major Topics:**
- Emotional and mental health
- Physical activity and nutrition
- Relationships and sexual health
- Substance Abuse

**Additional topics:**
- Finances
- Personal health efforts
- Cultural health needs
- Methods of communication
Approach

Intergenerational

- Nutrition
- Physical Fitness
- Sexual Health

Intermediary Generation

Defining millennials as such provides broader scope of impact
Taking care of children and their parents
Adaptation: Session Features

- Reduce participant fallout
- Developing effective and sustainable individual plans
- Incorporate activities
- Bring in Experts
  - Nutritionist
  - Physical Activity
  - Therapist/Psychologist
  - Breast/Colon Cancer
  - Yoga & Meditation
  - Financial expert
  - Reproductive Health

Communication modes for alerts
Curriculum access online
Utilizing technology and social media
Tie to Incentives

Community as the Classroom
Adaptation: Cultural Needs

Reality and impact of violence and trauma in communities

Residual effects of slavery → Intergenerational trauma

Spirituality → Culture

Finances
Adaptation:
Physical Health

Sexual Health
- Safe Sex, STD/HIV tests, birth control
- Dating safety, sexual empowerment, communicating needs and boundaries

Physical Activity
- Free workout apps
- Highlight free locations

Nutrition
- Inclusive of all levels of SES
- Increase self efficacy
Adaptation: Mental & Emotional Health

Causal Factors
- Weathering effect
- Superwoman Schema

Coping strategies
- Encourage healthy strategies
- Warn against unhealthy strategies

Reduce stigma of mental health
- Bring in psychologists and show benefits of therapy

Incorporate yoga & meditation
- Holistic approach

Role of Social Media
- Perfectionism
- Excessive screen time
Future Directions

Curriculum re-writing
Social Media presence
Recruitment of pilot program participants
Implementation
Evaluation
Concentration Specific

1. Create a community health program implementation and evaluation plan that is ethical, socially just, and culturally responsive

2. Partner with communities to contextually assess health problems and propose solutions to public health issues and inequities that recognize the role of power

3. Conduct Community-engaged public health research and practice that recognizes intersectional perspectives from theory in response to multidimensional processes

Competencies

DSPH- Foundational

1. Discuss the means by which structural bias, social inequities, and racism undermine health and create challenges to achieving health equity at organizational, community, and societal levels

2. Assess population needs, assets, and capacities that affect communities’ health

3. Apply awareness of cultural values and practices to the design or implementation of public health policies and programs

4. Design a population-based program, policy, project or intervention

5. Describe the importance of cultural competence in communicating public health content
References


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Thank you all for coming & Special congratulations to the class of 2020!