



NYS HEALTH
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**Long Beach Medical Center's
Healthy Sundays**

Grant Results Report – July, 2008

BACKGROUND INFORMATION

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ABOUT THE GRANTEE

Long Beach Medical Center—the primary health care provider for Long Beach Island, N.Y.—is a comprehensive health care organization that operates a 203-bed acute care hospital, a 200-bed skilled nursing facility specializing in rehabilitation medicine, a certified home health care agency, and numerous outpatient programs.

Healthy Sundays

THE PROBLEM ADDRESSED

The Hispanic and Latino populations living in the Nassau County communities of Long Beach and Oceanside on the southern shore of Long Island have increasing health disparities, due to numerous barriers—the residents' low income, limited education, long working hours, language differences, and distrust of government institutions because of their immigration status. These obstacles limit access to the most basic health resources and make preventive medicine almost nonexistent. Health screenings, which are routinely conducted as a part of a physical checkup, can identify health problems early and allow interventions to prevent a small problem from becoming a larger one. Yet many wait until routine health issues escalate, then resort to hospital emergency rooms for care.

PURPOSE OF THE PROJECT

The goal of the project was to improve the overall health status of Hispanic/Latino residents of Long Beach Island, Island Park, and Oceanside through increased awareness of disease prevention, health education, and early intervention for conditions such as asthma, cancer, diabetes, heart disease, hypertension, stroke, mental and emotional problems, and addiction. The project sought to reduce health disparities by connecting constituents with low-cost or free health insurance programs and health providers.

Each month project staff offered a different health screening and brief lecture to people attending the weekly Spanish Mass at St. Mary of the Isle Roman Catholic Church (Long

Beach) and St. Anthony's Church (Oceanside). Each week parishioners were presented information on disease prevention, risk factors, wellness, and diagnosis and treatment options for common health problems. The emphasis was on education, self-care, prevention, and care within the context of family, culture, and community. Clergy are trusted by Latinos, and providing information, health education, and referral services through the church was an opportunity to improve health and reduce disparities in care.

UNDER THE GRANT

Project staff presented health information and conducted screenings related to physical activity, heart health, diabetes, stroke and hypertension, prostate cancer, skin cancer, parent and child health, addiction, asthma, breast cancer, nutrition, and mental health. Health messages were read from the pulpit and reinforced in church bulletins and other materials.

Individuals with positive screening results were referred to Long Beach Medical Center's Family Care Center, which provides family medicine and 14 specialty clinics. Fees are based on a sliding scale. Following a stroke screening, a physician at the Family Care Center recognized the importance of quick follow-up care and added extra clinic hours so that people referred to the clinic could be seen within a week.

Rev. Tom Donohoe of St. Mary's and Rev. Hernán Paredes of St. Anthony's were key to the program's success, according to Sharon Player, Long Beach Medical Center's Director of Public Affairs. "The feeling of the parishioners is that 'if father says it, it is law,'" she says.

"Both priests were deeply committed to the program and encouraged individuals to participate at every opportunity," says Player. "The Sunday after his mother passed away from cancer, Father Hernán spoke to the congregation with a request. 'If you want to honor me and honor my mother's memory, come to the screening.'"

Long Beach Medical Center had for some time been trying to reach the Latino community with health screenings. Player and Geraldine Moore, R.N., Ed.D., project director, neither of whom is Latino, turned to Neirida (Nelly) Rosado, R.N., a St. Mary's parishioner, to serve as project coordinator. "Nelly has a warm and 'loving mother' personality. People opened up to her, and she helped build trust in the program," says Moore.

Parish volunteers—including a retired physician, a nurse, and a nurse practitioner—contributed substantial time and expertise to the effort.

The most highly attended Sunday session covered nutrition and the importance of physical activity. As they did each month, project staff prepared a lunch converting traditional Latino recipes, such as *arroz con pollo* or chili, into healthier ones. "Many Latinos eat fried foods extensively," says Moore. "One woman told me she cooks everything on the stove top and has never turned on her oven."

Another Sunday, project staff served healthy sundaes — literally — using plain nonfat yogurt, nuts, and fruit toppings. "One person told me 'Latinos don't eat yogurt,' then later asked for more," says Moore.

During the breast cancer screening, which included an onsite mammogram using the facilities of a "mammovan," 18 women were screened and six referred for biopsies, five of which were positive.

One woman attributed her lump to a clove of garlic she had swallowed. Typifying the misunderstandings that can arise when dealing with non-English speakers around health issues, one woman said she'd just had a mammogram the previous month. "She wanted to repeat the mammogram to fix what was wrong," says Moore. "She did not understand that she was supposed to follow-up with a second, different test and not just get another mammogram."

“These misunderstandings are common,” says Nellie Rosado, who encouraged church members to participate in the screening. “Part of it is due to language barriers, but many hold on to cultural beliefs rather than accept the science of today’s medicine.” So concerned was Rosado that the five women would follow up on their screening results, she drove two of them to their biopsy appointments on her day off.

BARRIERS TO ACHIEVEMENT AND CHANGES TO ORIGINAL WORK PLAN

A serious barrier that project staff faced was parishioners’ lack of trust in non-Latinos. “We anticipated having better control over monitoring each person from beginning to end,” says Moore. “But people were reluctant to share personal information with us. They would use different last names at different screenings. Their fears increased after a family in the church community was deported because the authorities discovered they were undocumented.”

“Overcoming the trust issue was difficult,” agrees Player. “But once they saw that we were there for the right reasons, they took pride in being part of the program and were thrilled with it.”

But by far the greatest barrier to health education and screening for this group was illiteracy. While program staff had materials translated into Spanish, they did not anticipate that so many individuals would be unable to read or write in any language.

“We ended up having our staff routinely read questions to people being screened,” says Player, “so they would not have to admit they cannot read.”

PROGRAM RESULTS

In December, at the end of the grant year, the project staff conducted a mini-health fair, repeating cholesterol, glucose, blood pressure, and BMI screenings, so that participants

could assess their progress since the beginning of the year (see chart). The results from the overall population show some areas of improvement: cholesterol referrals decreased 38% (in the first screening 52% of participants needed to be referred versus 32% at the later screening); glucose referrals down 44% (9 versus 5%); and blood pressure referrals down 17% (18 versus 15%). Body Mass Index (BMI) screening showed a slight increase in referrals, from 31 to 34%.

“The people who improved were pleased with themselves,” says Moore. “Before, they generally had no baseline for these measurements. Many were quite surprised even to learn how much they weighed.”

“In a lot of programs, people get screened just to recheck their numbers. But some of the people we encountered had not seen a doctor in the 20 years since they left their home country,” says Player.

DISSEMINATION OF FINDINGS

The project director wrote an article about the project published in *ADVANCE for Nurses* (March 31, 2008), a national trade magazine. Project staff also presented to the Long Beach Interfaith Council, a council of spiritual leaders of varying denominations, many of whom expressed an interest in replicating the program for their congregations.

THE FUTURE

At this time, the project staff plans to host an annual screening and Nellie Rosado, R.N., continues to answer health-related questions after Mass each week. But the monthly health screenings and weekly messages, which helped reinforce lifestyle changes to improve health, have ended for now. When asked whether she would conduct the program again, Player volunteers, “In a heartbeat. The program had such a good feeling to it, building trust with the priest and parishioners as well as connecting people who had real health needs, but were afraid to ask for help—yet who ultimately were so appreciative.”