Lessons Learned: Using CBPR to strengthen maternal mental health and family resilience in a southern, urban, low income community

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Research Partners: UAB Department of Health Behavior, SOPH; Friends of West End, Birmingham, AL

Introduction

Maternal Depression
- Depression is one of the most prevalent public health problems in the US, with lifetime prevalence rates estimated to be more than 20% in community samples.1
- Maternal depression has been associated with lack of perceived social support and greater parenting related stress.2 African American depressed mothers are more likely to suffer from other life adversities (poverty, divorce, unemployment and financial constraints) that further limit functioning.3,4
- While effective treatments are available, numerous barriers exist for accessing mental health services, especially for African American mothers.2,5

Compounding Effects of a Disordered Environment
- Social disorganization theory posits that long-term exposure to neighborhood disorder can impair physical and mental health status.5
- Neighborhood environment, maternal mental health and coping abilities shape parenting practices that can impede or hasten their child’s risk taking.
- Increasing quality of life and adaptive coping in mothers living in adverse environments may interrupt the intergenerational transmission of negative health outcomes.

My Sister’s Keeper (MSK)
- My Sister’s Keeper (MSK) is built on a partnership between members of the West End community and UAB researchers to engage in community-based participatory research (CBPR) to plan and implement maternal mental health promotion interventions.
- CBPR methods guided MSK in creating a bridge to enable two-way transfer of knowledge and behavioral skills between West End residents and academic scientists, a sustainable connection for continued efforts to eliminate health disparities.

A True Partnership
- **Friends of West End (FWE)** is a community-based nonprofit organization in Birmingham, Alabama that facilitates programs and activities to improve the quality of life in West End. Sheila Tyson is the Executive Director of Friends of West End (FWE) and has valuable expertise in community assessment methods and coalition building. She is one of West End’s most active community leaders.
- To advance its goals, FWE’s staff works with citizens in the community and meets with political, business, and civic leaders to identify, prioritize, and address the most significant challenges facing West End, including high unemployment, chronic poverty, limited access to clean, affordable housing, and high crime rates. MSK built upon FWE’s recently completed strategic plan and its needs and assets assessment.
- The FWE team contributed side by side with university partners for each stage of MSK development (grant-writing, program design, recruitment, data collection, and dissemination of findings).

Results

Specific Aim 1: Establish the Coalition for a Healthy West End to support project activities and prioritize long term sustainability as a primary goal.

ACCOMPLISHMENTS:
- Created a Partnership Memorandum of Understanding stating the partnership’s purpose, identifies short and long term goals of the coalition, and specifies the role of each partner.
- Formed and continue to grow the “Coalition for the Healthy West End,” to ensure that all project activities are truly community based and informed by West End residents that will be involved with – and benefit from – MSK activities and eventual products.
- “Branded” the program as “My Sister’s Keeper” because it conveyed the need to take care of each other, a meaning that would resonate with West End women.

FUTURE DIRECTIONS:
- Promote MSK within already ongoing activities in West End performed by the FWE, including two annual community events, Clean Our Community and Celebrate West End.
- Survey the West End business community as the foundation for future efforts (using CBPR methods) to generate broad level support for sustainable mental health products/services in West End and beyond.

Specific aim 2: Identify the most salient predictors of mental health among the intended audience using formative research methods.

ACCOMPLISHMENTS:
- Identified and trained community leaders and staff to help recruit participants into the study, conduct focus groups and interviews, interpret the data, and plan next steps.
- Designed data collection measures and methods.
- Expanded to include the West End health clinic, West End Library, and two local churches as partner agencies to promote MSK and host focus group and individual interview sessions.
- Identified priority resources and an easy-access location for the MSK Resource Corner: to be established at the West End Library, along with promotional tools to West End service providers to increase awareness and uptake of these and other available mental health resources.
- Designed and utilized a curriculum template for a public health service learning course for MPH and RN students.

FUTURE DIRECTIONS:
- Toolkits for present and future community partners (e.g., churches, clinics, schools, libraries, etc) to continue to address stigma and increase dissemination of MSK resources.
- A community based Par-Course (specially designed to integrate physical and mental health exercises at stations along a safe, aesthetically pleasing walking path) to be built with future funding.

Conclusion

Key aspects of successful collaboration identified by community partners:
- Direct and ongoing involvement of those affected by maternal mental health; 2) capitalizing on each partner’s expertise (academic partners increased community members’ data management and analysis skills, while community partners increased academicians’ understanding of the extent to which community issues can affect the validity and reliability of results); 3) novel implementation strategy that is both self-sustaining and community-owned; and 4) equal voice among partners throughout planning, implementation and evaluation.

Key mental health strategies identified by the coalition include: 1) shift the focus from mental illness to mental and emotional health; 2) create a public awareness campaign of women’s mental health needs; and 3) improve local policies to increase community access to existing mental health services.

References


Acknowledgement & Contact information

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