LEVERAGING A COMMUNITY-ACADEMIC PARTNERSHIP TO INCREASE LUPUS AWARENESS IN VULNERABLE COMMUNITIES

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Background The Popular Opinion Leader (POL) model was developed by the Centers of Disease Control to train community leaders to increase awareness in their social networks about health-related issues that disproportionately affect vulnerable populations. We established an academic-community partnership in Chicago and Boston and used a POL model to increase knowledge about lupus and to promote early care-seeking behaviors among African American individuals. With the knowledge that where a person lives directly influences his/her health, one of our goals was to understand the socio-demographic characteristics of the Chicago communities where the POLs disseminated lupus-related information.

Methods Ten POLs were identified and participated in four two-hour session educational training program. All POLs were female, the mean age was 59% and 100% were African American. Over the course of 6 months, the POLs tracked their encounters throughout their social networks by recording addresses of venues where educational information was disseminated and the number of individuals contacted. Data were entered into the Geographic Information System to evaluate the reach of their networks. We utilized the Healthy Chicago Database to describe the sociodemographic factors and some of the health resources of the Chicago neighborhoods identified by the POLs social networks.

Results The 10 POLs social networks were concentrated in four selected communities (Washington Heights, Morgan Park, Englewood and Roseland). These neighborhoods are located on the Southside of Chicago where health, educational, and financial resources are limited. All four communities were predominantly African-American, range 54.6%–96.1%. Individuals living in these neighborhoods with no health insurance ranged from 8.4%–17.2%, in Morgan Park and Englewood, respectively. Individual poverty was highest in Englewood (30.8%) and Roseland (27.2%) compared with approximately 18% in the other two neighborhoods. The percentage of individuals who did not complete high school was highest in Englewood (13.5%) compared with approximately 10% in the other two areas.

Conclusions Engagement of local community members through POL conversations tapped into neighborhoods that demonstrated concerning sociodemographic features such as individual poverty, lack of health insurance, and lack of education through high school. Since the POLs had strong social networks prior to recruitment, they selected these communities to facilitate dissemination of lupus awareness education where resources may be limited. This illustrates the importance of POL engagement with community stakeholders who can use this information to work towards reducing health disparities in lupus in communities with limited resources.

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