

# A HEALTH LITERACY INITIATIVE: DEVELOPMENT AND ASSESSMENT OF A PEER-COACHED SUPPORT GROUP FOR AN INNER-CITY POPULATION.

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## BACKGROUND

### SETTING

Outpatient primary care clinic at Rainbow Babies and Children's Hospital.

### POPULATION

Predominantly inner-city African-American single parents of low socio-economic status. Many of these parents:

- function at or below basic literacy level.
- exhibit behaviors associated with low health literacy skills.
- have poor adherence to care.
- lack confidence or skills to overcome barriers to self-sufficiency / health literacy.

### RATIONALE

Role modeling and coaching from successful peers has been shown to positively impact self-efficacy in key life skills for individuals who have had limited mentoring or support.

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## GOAL

A program was developed to help parents gain self-efficacy and health literacy through a peer coaching support group.

## METHODS

### Phase 1: Funding

- A **Health Literacy grant** was obtained from a non-profit organization.

### Phase 2: Needs assessment

- **Focus Groups** (health professionals and parents) determined session content and logistics.

### Phase 3: Implementation

- **Leadership and Facilitation Training** for a peer coach and social worker.
- **Group Sessions:** Series of eight-week sessions (held weekly for 90 minutes) and monthly alumni groups.

### Phase 4: Assessment

- **Tool:** a 15-item questionnaire modified from validated measures to assess self-efficacy in targeted skills related to health literacy.
- **Data collection:** at the first session (pre-test), and at the final session (retrospective pre- and post- survey). Data was included in analysis only if both surveys were completed (n=57).

- **This study was IRB-approved.**

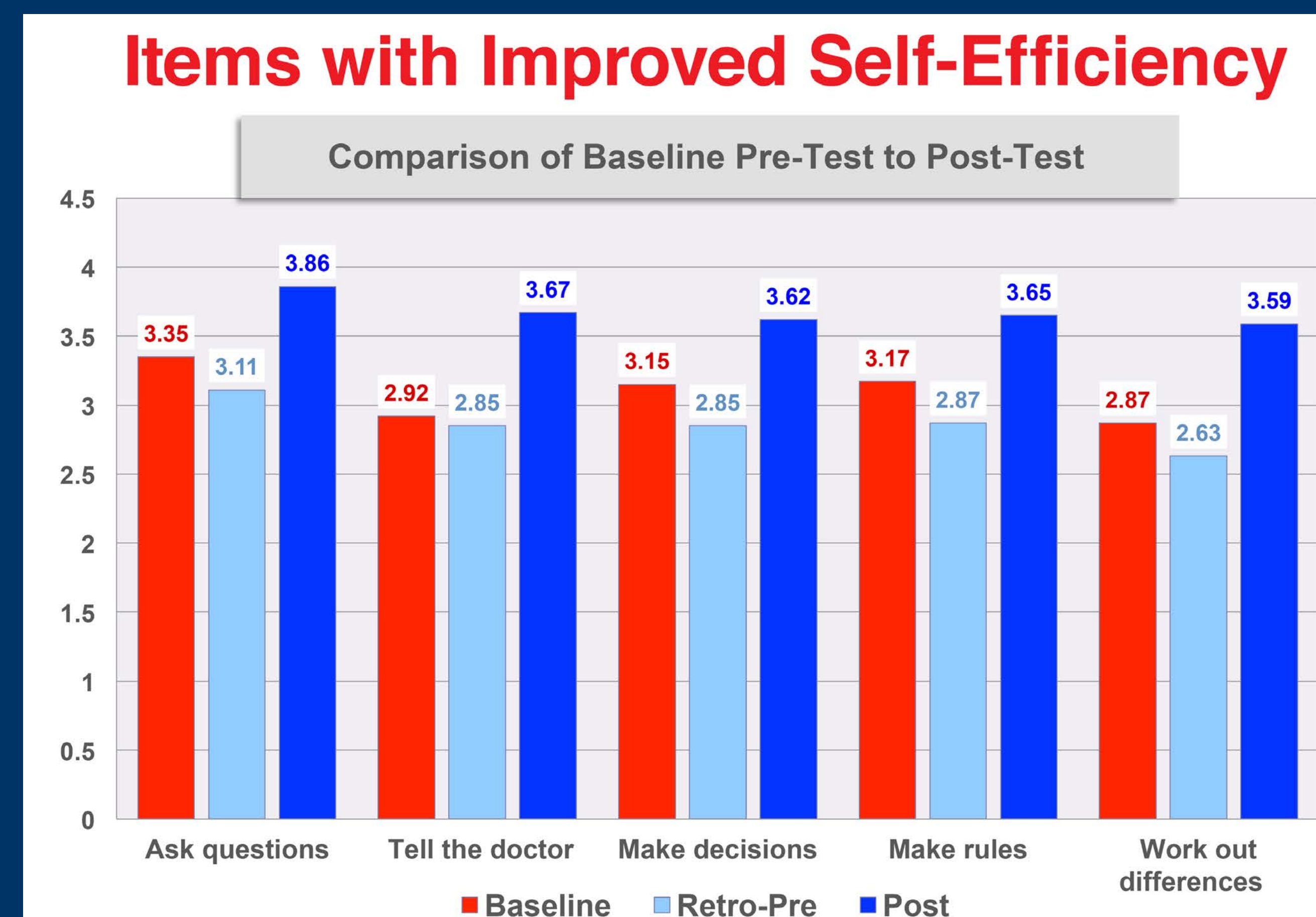
## RESULTS

### Six groups completed over 30 months

- 110 participants attended at least one session;
- 65 completed five or more sessions;
- Five of the fifteen items showed statistically significant improvement ( $p < .05$ ) from pre-test to post-test in their ability to do the following:

- "Ask questions when I don't understand what the doctor tells me"
- "Tell the doctor when I get different advice from someone I trust"
- "Make decisions when I get different health information from different sources"
- "Make rules for my children and enforce them"
- "Work out differences with family/friends who disagree with me on the best way to raise children."

Significant improvement ( $p < .05$ ) seen in all 15 items when examining the retrospective pre- and post-test scores.



## DISCUSSION

### Challenges

- Participant recruitment and retention.
- Finding the optimal time, incentives (childcare, transportation, meals,...).

### Key Factors

- Focus groups were instrumental in determining format and topic relevance.
- Offering of an alumni group has allowed us to sustain participants' involvement.

### Limitations

- There has not been a long-term outcome study for sustainability.

## CONCLUSIONS

**This peer-coached support group model is an effective way to engage the study population and to improve targeted self-efficacy skills.**

## FUTURE APPLICATIONS

**This model could be adapted to engage and serve families coping with chronic illness or other challenging problems.**

## REFERENCES

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