

Title of Intervention: Journey to Health: Racial and Ethnic Approaches to Community Health (REACH) in Detroit

Website: <http://www.cdc.gov/reach/>

Intervention Strategies: Group Education

Purpose of the Intervention: To improve dietary and diabetes self care-related knowledge and behaviors; to improve metabolic measures among African Americans and Latinos with Type 2 diabetes

Population: African Americans and Latinos with Type 2 diabetes

Setting: Low-resource neighborhoods of east and southwest Detroit; community-based

Partners: REACH 2010 Detroit, Centers for Disease Control and Prevention, community members, hospitals, community-based health centers

Intervention Description:

- Group Education: The Journey to Health curricula was designed to reduce risk factors associated with diabetes complications by increasing participants' diabetes self-management understanding, self-efficacy and motivation. The intervention helped participants gain knowledge and skills using selected cultural symbols and themes, cultural patterns and concepts, values, norms and relationships to promote healthy eating, exercise and stress reduction. Sessions were delivered in both English and Spanish. Trained community residents conducted the education sessions.

Theory: Social Cognitive Theory

Resources Required:

- Staff/Volunteers: Community residents, physicians
- Training: Community residents completed a 10-week Family Health Advocate training program
- Technology: Not mentioned
- Space: Meeting space
- Budget: Not mentioned
- Intervention: Access to hospital records, phones, mail service, culturally-relevant curricula, educational materials
- Evaluation: Questionnaires, materials to conduct clinical and biological assessments

Evaluation:

- Design: Quasi-experimental
- Methods and Measures:
 - Research staff observed one intervention meeting for each Family Health Advocate to document adherence to the curriculum, questions asked by participants and general satisfaction.
 - Surveys were administered to evaluate knowledge and behaviors related to diet, physical activity, self-care and diabetes-specific quality of life.
 - Clinical assessments measured HbA₁C, cholesterol, blood pressure and weight.

Outcomes:

- Short Term Impact: Participants experienced a significant improvement in knowledge.
- Long Term Impact: Dietary behaviors significantly improved after the intervention. Consumption of whole grain bread significantly increased while consumption of regular soda significantly decreased. No significant changes were seen in the consumption of fried and sweet foods. No significant changes were seen in level of physical activity or diabetes-specific quality of life. While cholesterol, blood pressure, and weight did not change significantly, HbA₁C values significantly improved.

Maintenance: Not mentioned

Lessons Learned: A culturally-tailored, community-based, healthy lifestyle intervention delivered by community residents can significantly improve glycemic control and reduce risk factors associated with diabetes complications.

Citation(s):

Two Feathers J, Kieffer EC, Palmisano G, et al. Racial and Ethnic Approaches to Community Health (REACH) Detroit partnership: improving diabetes-related outcomes among African American and Latino adults. *Am J Public Health.* Sep 2005;95(9):1552-1560.