

Women Supporting Women (WSW) in MIHP

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What do our MIHP clients think of WSW?

- Video

Sample text
place here



The History of WSW

- In 2002, the Calvin University Nursing Program formed partnerships with 3 urban, ethnically diverse, under resourced neighborhoods in Grand Rapids.
 - Neighborhood #1 – 70% Hispanic, Latino, Spanish origin
 - Neighborhood #2 – 52% Black / African American
 - Neighborhood #3 – 65% White / Caucasian
 - Across the 3 neighborhoods 25-43% of residents live below the poverty level (US Census Bureau, 2010)



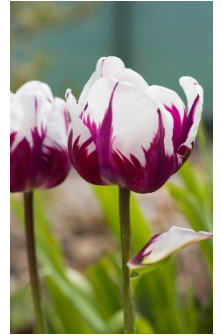
The History of WSW

- Each neighborhood partnership was established on community-based participatory research (CBPR)
- CBPR actively involves the community in research
- Residents of the community:
 - Define the research questions
 - Help with data collection
 - Explain research results in their cultural context
 - Identify and design solutions to health concerns
 - Participate in evaluation (Minkler and Wallerstein, 2011)



The History of WSW

- In 2009, residents identified mental health as one of their top health concerns.



During the past 30 days, how often did you feel:

	Neighborhood 1	Neighborhood 2	Neighborhood 3	NHIS 2008
“So sad nothing could cheer you up” some, most or all the time	30%	26%	17%	12%
“Nervous” some, most or all the time	26%	27%	35%	17%
“Hopeless” some, most or all the time	21%	14%	13%	8%

History of WSW

- In the fall of 2010, we conducted a qualitative study consisting of six focus groups (2 per neighborhood) to listen to women's perspective on the causes of depression and anxiety along with the solution.
- Focus group results revealed that women desired the following solution to address depression and anxiety in their neighborhood:
 - **Supportive / Educative groups**



The Evidence Base for WSW

- A five-year pilot intervention study was undertaken employing a quasi-experimental design within the ideological perspective of CBPR
- One-group pretest-posttest design (Polit & Beck 2022) was used



Hypotheses and Research Question

Women involved in a six-session WSW group will:



- Experience a reduction in symptoms of depression and anxiety that will be sustained for 6-8 months post intervention.
- Experience an increase in their self-care agency for anxiety and depression that will be sustained for 6-8 months post intervention.
- What is the women's level of satisfaction with the WSW groups?

Procedures

- 8-10 women in each group
- Groups were facilitated by a community health worker (CHW)/nurse team
- Six meetings of 90 minutes each
- Meetings held at familiar neighborhood sites
- Reminder calls, transportation, and childcare were provided for each meeting



Procedures



Each meeting includes elements of **connecting/reconnecting, education, and support**

The **educational modules** presented are based upon the focus group results and include:

1. Health, Mental Health Stigma, and Symptoms of Anxiety/Depression
2. Causes of anxiety/depression
3. Preventing or Coping with Anxiety/Depression – Part I
4. Preventing or Coping with Anxiety/Depression - Part II
5. Coping with Anxiety/Depression – When Professional Mental Health Care Might be Needed
6. Community Resources, Self-care Plans, and Celebrating You!

Between session cards

Sample - Convenience

- N= 72
- Age: range 17-88 years, mean 45.30 years
- Race/ethnicity
 - Black 20.9%
 - Hispanic/Latina 40.3%
 - White 27.8%
- Income
 - < \$10,000 35.7%
 - \$10,000 – 14,999 32.9%
 - \$15,000 – 24,999 15.7%
 - \$25,000 – above 15.7%
- Education
 - No high school 15.3%
 - Some high school 6.9%
 - High school graduate 30.6%
 - Some college 38.9%
 - College graduate 8.3%



Results



- Data analysis from the 5-year pilot study revealed **statistically significant results**
 - **Knowledge for self-care for anxiety and depression increased from pre-test to post-test and pre-test to six-month data collection points**
 - **Symptoms of anxiety decreased between pre-test and six months as well as between post-test and six-month data collection points**
 - **Symptoms of depression decreased between pre-test and six-month data collection points**
- Participants were highly satisfied with WSW

Overview of Integrating WSW into MIHP

- First exposure to program – fills a gap for our clients
- Concern related to staff obligations and time
- Staff investment and buy in
 - Recruiting volunteers from among MIHP nurses
 - Productivity credit



PHN Experiences with Offering WSW to MIHP client

- Group norms discussed at beginning of each session
- RNs led the topics, Mental Health Ambassadors led the discussion
- Curriculum for each session as well as main take away points – makes it easy to teach and understand
- Groups tend to be client led, don't always get through curriculum
- Handouts available each week
- Activities at the end of the group - Breathing, relaxation, visuals



Recruiting

- Talking about the group during visits was the most effective way to recruit
- Offer as a support group rather than pointing out it's related to anxiety and depression – may be stigma
 - Talk about stress
 - Get support from other women and getting connected
 - Empower clients by pointing out they have a lot to offer the other women in the group



Impact on staff

- Good change of pace from 1:1 home visits
 - Leave feeling refreshed & looking forward to the next group
- Space to share
 - Staff lead but also seen as part of the group
 - Powerful to be in a group setting where other women have similar experiences
 - Encouraging to see how resilient and strong the women are
- Confident that the group had an impact on the participants
 - “I wouldn’t change a thing; it was perfect just the way it was. I miss seeing those women every week.”
- Excited to continue expanding the program



In the future...

- New two year grant obtained
- Motivated to expand and gain sustainability
- In the future will move to one RN with a CHW, both trained on the curriculum
- Taking over the administrative pieces of WSW
- Would like to be able to integrate Social Workers



Hearing from our clients...

- Video



Acknowledgements

- Funding Source:
- Michigan Public Health Institute



QUESTIONS?



References

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