

Vida PURA:

A Cultural Adaptation of Screening and Brief Intervention to Reduce Unhealthy Drinking for Latino Day Laborers

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Background

- Latino immigrant men face many challenges in adapting to life in the US.
- Stress associated with language barriers, discrimination and social isolation can result in unhealthy coping behaviors such as alcohol use
- Latino men drink less often than men in other racial/ethnic groups, but when they drink they drink heavily. Rates of binge drinking range from 44 – 58%
- Latino immigrant men have limited access to culturally appropriate services to prevent and treat problems with alcohol use

Brief Intervention

- Evidenced based intervention to reduce unhealthy alcohol use in primary care settings
- Effective for Latino men in clinical settings
- Latinos that receive BI from a Latino provider have better outcomes than those not ethnically-matched

Cultural Adaptation Process (Barrera and Castro, 2006)

1. Gathering information to identify sources of mismatch between the original intervention and target population
 - Interviews with Latino day laborers (N = 18)
 - Interviews with social service providers working with Latino immigrant men (N = 13)
 - Cases summaries and coded quotations were reviewed for prevalent themes
2. Preliminary adaptation design
 - Vida PURA
3. Pilot test preliminary design
 - Results of pilot test will be presented
4. Refine intervention as needed
5. Conduct a trial to determine its efficacy

Patterns and Context of Alcohol Use

- Unhealthy drinking was common among Latino day laborers
- Drinking was related to and helped relieve immigration-related stressors
- Men had limited knowledge about what constitutes unhealthy drinking and were unsure of how to change their behavior

Te diré que por qué tomo... porque estoy lejos de mi familia, vivo en la calle, y todo eso; para darme valor

I will tell you why I drink... because I am far away from my family, I live on the streets, and all that; to give me courage

Intervention Delivery

- Men preferred to receive information from trusted providers in Spanish

Well, the important thing is that, that we do need that kind of group or program especially for us because sometimes we do not attend programs in America for the same reason, we do not feel comfortable with others or we may not understand, we cannot communicate.

Administrative and Community Factors

- Men faced barriers to health and social services
- Few programs provide culturally appropriate alcohol-related services
- Men were receptive to receiving BI in community settings

“We prefer to carry our pain, than to heal, because I can’t... I have no money to do it. If, well, there is a place with programs where they start to increase your awareness and help you with all of these types of problems... well, it would help a lot.”

“People are afraid that if they access any resources if they're undocumented they will be deported. That's the big thing here... If you access any public funding you're going to be on a list.”

Features of Culturally Adapted Brief Intervention

	Themes	Sources of (Mis)match	Cultural Adaption of BI
Group Characteristics	<ul style="list-style-type: none"> • Unhealthy drinking was common among Latino day laborers • Drinking was related to and helped relieve immigration-related stressors • Men had limited knowledge about what constitutes unhealthy drinking and how to change behavior 	BI which provides personalized feedback, increases awareness, and offers culturally relevant strategies for reducing drinking	Format and content of BI needs to incorporate the social and cultural context of men
Intervention delivery	<ul style="list-style-type: none"> • Men prefer to receive information from trusted providers in Spanish 	BI provided by health care providers that cannot speak language and lack awareness of culture may be less effective	BI delivered by <i>promotores</i> in Spanish
Administrative and Community Factors	<ul style="list-style-type: none"> • Men faced barriers to health and social services • Few programs provide culturally appropriate alcohol-related services • Men receptive to receiving BI In community settings 	<ul style="list-style-type: none"> • BI provided in health care settings unlikely to reach those that need it • BI needs to provide referral to truly accessible services 	<ul style="list-style-type: none"> • BI conducted at day labor worker center • BI refers men to low-cost services in Spanish

Vida PURA (Puede Usted Reducir su consumo de Alcohol)

Retained Core Elements of Brief Intervention

- Provide personalized feedback about drinking behavior and how it compares to NIAAA guidelines
- Use Motivational Interviewing to assess readiness to change, discuss pros and cons of drinking, elicit desired changes, support and encourage behavior change
- Negotiate a plan/goal, identify strategies and offer referral information.

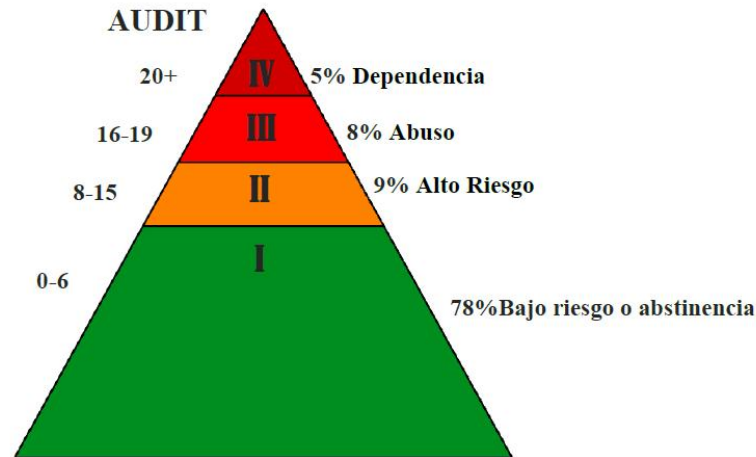
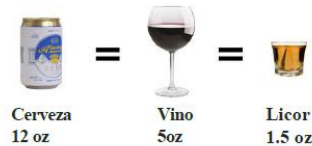
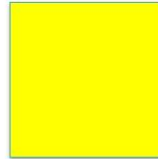
Adapted Aspects to meet needs of Target Population

- Intervention delivery and content (*promotores*)
- Setting (day labor worker center)
- Referral (low-cost Spanish speaking services)

(Ornelas, Allen, Vaughan, Williams, & Negi, 2014)

	Bebidas por Semana	Bebidas por Dia
Hombres	14	4
Usted		

Resultados



"Que tan listo se encuentra para el cambio?"



SCHOOL OF PUBLIC HEALTH
UNIVERSITY of WASHINGTON

Vida PURA

Necesita voluntarios para entrevistas sobre su salud



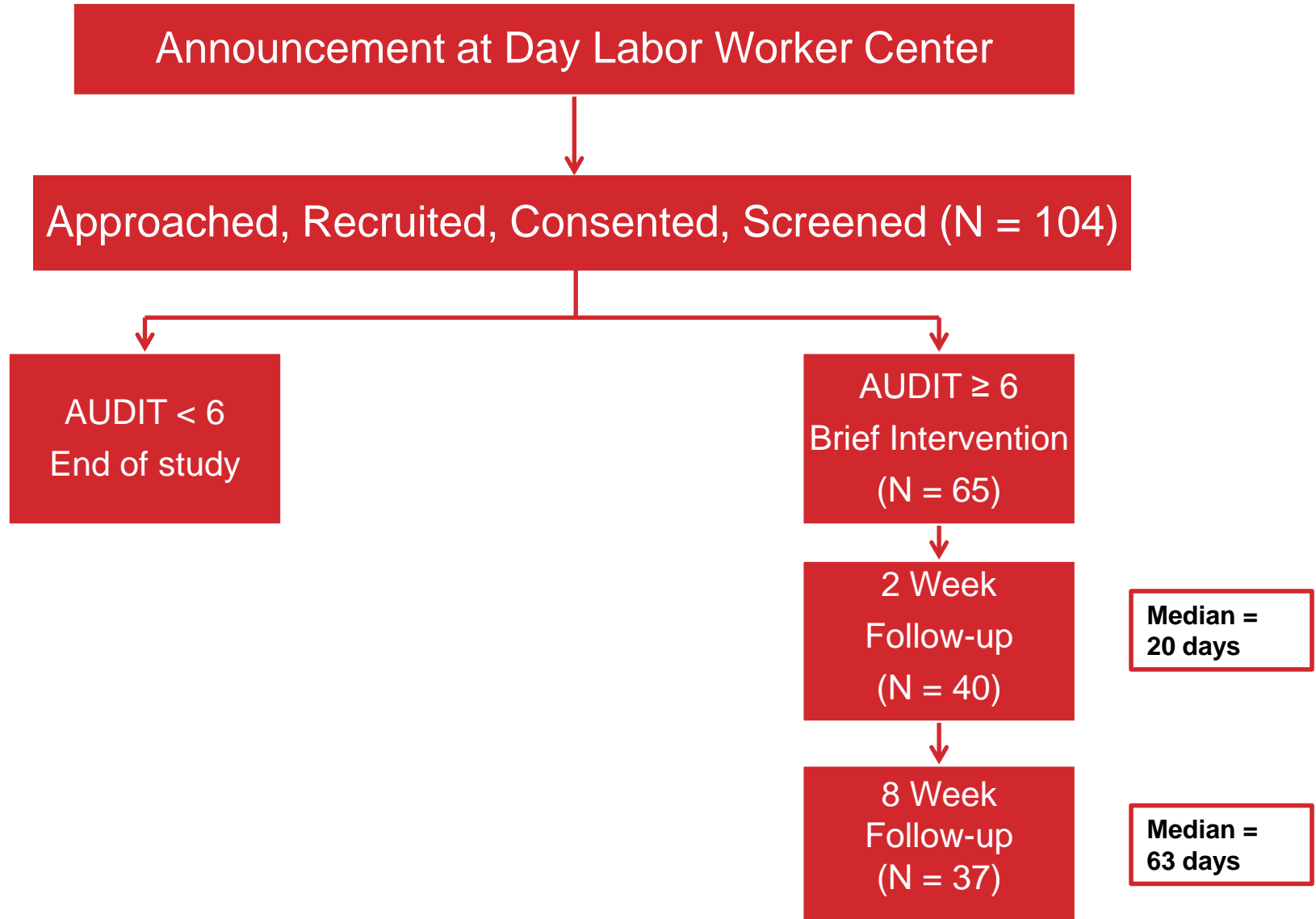
Edgar: Lunes



Victor: Miercoles y Jueves

Busca a Edgar o Victor a partir de las 7:00 am para hacer entrevistas y seguimientos

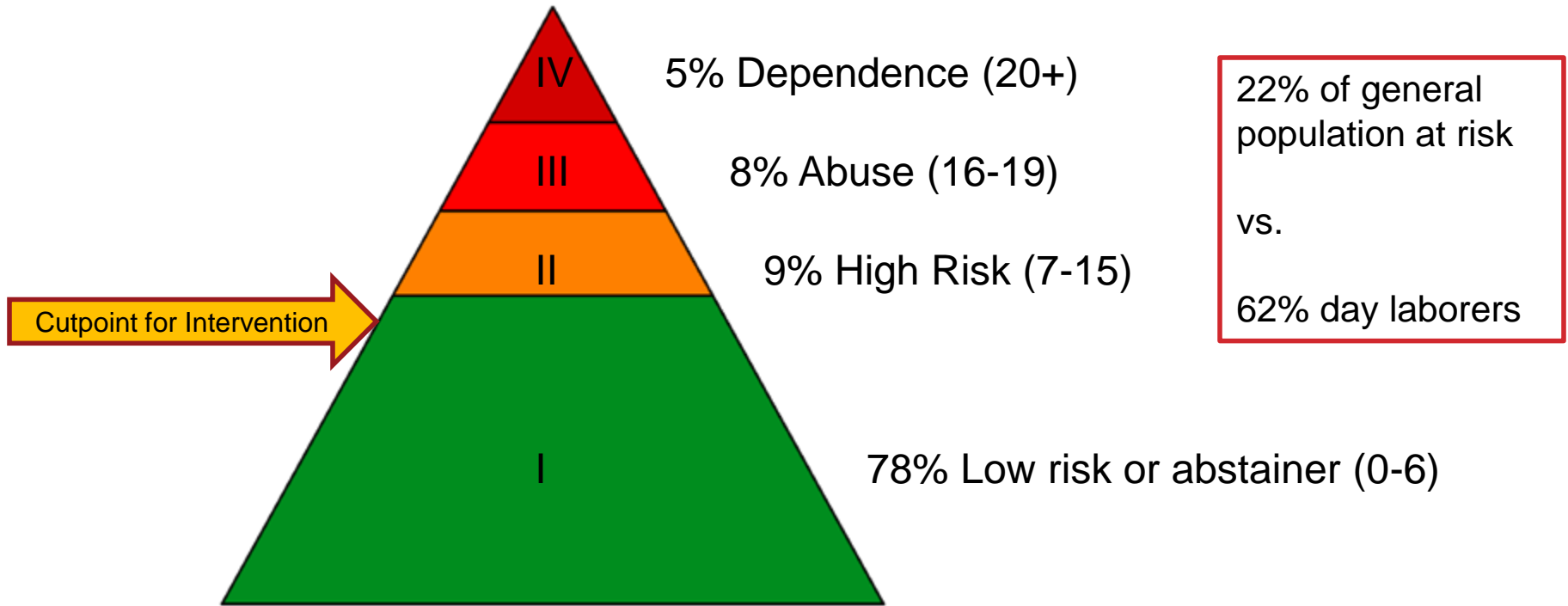
Pilot and Feasibility Test: Study Design



Demographic Characteristics of Men Receiving Brief Intervention (N = 65)

	N	%
Age mean (sd)	44.9	(10.7)
Years in US mean (sd)	15.5	(9.9)
Marital status		
Single	33	51
Married/Living with Partner	19	29
Divorced	13	20
Education		
Primary or None	24	37
Middle	15	23
High School graduate or GED	17	26
Some college or more	9	14
Employment		
Employed (seasonal or year-round)	59	91
Unemployed or Retired	6	9
Living situation		
House/Apartment	33	51
Homeless or Temporary Housing	32	49
Language		
Only Spanish	18	28
More Spanish than English	42	65
Both equally	5	8

Pre/Post Changes in AUDIT



Mean changes in AUDIT with 95% CI Based on Linear Mixed Model

Baseline	2 weeks	8 weeks
18.7 (15.6 – 20.4)	13.5 (11.3 – 15.6) $p < .001$	14.8 (12.4 – 17.3) $p < .01$

Pre/post Readiness to Change

	Baseline	2 weeks	8 weeks
How important is it you right now to change your drinking?	7.7	7.6	6.9*
How ready are you to change your drinking?	6.5	7.3	6.3
How confident are you that you would succeed?	7.9	8.3	7.5
* Significant change compared to baseline, $p > .10$			

Pre/post AUDIT Changes

	Baseline	2 weeks	8 weeks
AUDIT Total	18.7	13.6*	15.0*
AUDIT Hazardous Use	6.7	4.4*	4.7*
AUDIT Dependence	4.9	4.0	4.2
AUDIT Harmful Use	7.1	5.3*	5.9
Binge Drinking monthly	69%	38%*	43%*
* Significant change compared to baseline, $p > .05$			

Changes in Alcohol Related Problems

Alcohol-related problems (SIP)	Mean	SD	Change at 8 weeks
Physical problems	1.8	(1.1)	- 0.3
Interpersonal problems	1.8	(1.1)	- 0.6*
Intrapersonal problems	1.9	(1.2)	- 0.4*
Impulse control problems	1.5	(1.1)	- 0.2
Social responsibility problems	2.1	(1.2)	- 0.3
Total score	9.0	(4.6)	- 1.8*

* Significant change compared to baseline, $p > .10$

Limitations and Lessons Learned

- Pilot and feasibility testing is a work in progress. Being adaptable and flexible to target population and community partners helped us refine intervention and study procedures.
- Not everyone can do MI. *Promotores* need ongoing training.
- Follow-up was a challenge. Having *promotores* on site was the best strategy.
- Difficult to interpret changes in alcohol use and consequences without a control group.

Conclusions and Next Steps

- Brief intervention was adapted to address issues specific to Latino day laborers.
- Vida PURA was offered to a small sample of Latino day laborers who screened positive for unhealthy alcohol use and agreed to participate:
 - Participants were willing to participate, follow-up was moderate
 - Results suggest intervention may decrease drinking
- Currently conducting randomized trial (R34AA022696, NIAAA)

Community Partners

CASA Latina



Sea Mar Community Health Centers



Consejo Counseling & Referral Service

