



MEND-Poverty “Pathways to Wellness” Program Evaluation

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BACKGROUND

- MEND- Meet Each Need with Dignity serves the San Fernando Valley (SFV) in California and their Emergency Food Bank is one of the largest in Los Angeles and the state of California and in 2018, it helped feed more than 38,000 individuals both onsite and through community outreach, and their “Buen Provecho” Farmer’s Market is instrumental in providing and introducing a wide variety of fruits and vegetables into the diets of people from the SFV, along with their “Pathways to Wellness” program.
- MEND’s Wellness Program has been successful in identifying and addressing food insecurity for their clients and has made a conscious effort to provide a food insecurity- conscious program that is aware of the challenges that come with eating a healthy diet while being food insecure and/or experiencing home insecurities, too.
- Over the years MEND’s wellness program has undergone several modifications since its initiation and program evaluations from participants have been crucial in tailoring these services to the needs of the San Fernando Valley community.
- Currently, assessment of the program is limited as MEND’s only evaluation tool is a 33-question health questionnaire that asks about health status, diet, exercise, and food insecurity.
- This survey has not yet been standardized to include questions adapted from other national and state questionnaires that ask similar questions and can benefit from further standardization to obtain a better understanding of the needs of the community.
- MEND’s goals for future cohorts includes personalized nutrition coaching for all clients enrolled in their Wellness Program

OBJECTIVES

- To analyze data from 2019 cohort to evaluate the Wellness program and identify strengths and weaknesses of the program and its evaluation tool.

METHODS

- The program questionnaire consisted of 33 questions centered around chronic illnesses, diet and exercise, healthcare access, food insecurity, and social supports.
- It was administered in English and Spanish and each questionnaire was completed individually by each participant at the initiation of the wellness program.
- Data from questionnaires was analyzed to identify areas of focus and improvement to properly tailor the personalized coaching sessions to the needs of the community.
- A SWOT analysis of the wellness program and the survey was also completed in order to assess the program and the effectiveness of the health questionnaire.

RESULTS

The participants’ age ranged from 36-80 years of age; 10% were 30-40 years old, 30% were 41-50 years old, 30% were 51-60 years old, 20% were 61-70 years old, and 10% were 71-80 years old.

SWOT ANALYSIS TABLES

SWOT Analysis: Wellness Program

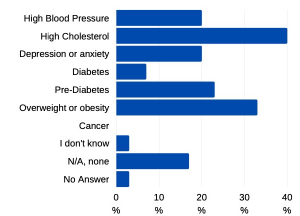
Strengths	Weaknesses	Opportunities	Threats
<ul style="list-style-type: none">MEND has been operating foodbank successfully for yearsScreening for food insecurity is incorporated in their initial client intakeSuccessful free farmer’s marketCase manager on site that helps with coordination of resourcesTrusted in the communityData collected from prior Wellness Program cohorts	<ul style="list-style-type: none">Low show-rates for Wellness Program in the pastLimited parking for clientsNo childcare availableRequires more time commitment from patientsHours may not be the best for the community membersCurriculum changes based on volunteer skills/interestsNot directly addressing healthy behaviors	<ul style="list-style-type: none">Collaboration with nearby clinicsCollaboration with BSPH studentsCollaboration with UCLA DGSOM studentsCan provide incentives for community membersMotivated community membersCan include a child component to accommodate families who bring their children to sessions.	<ul style="list-style-type: none">Dependent on volunteersRecent clinic closure may limit the workMEND can do around nutrition and disease preventionClinic closure may also limit what biometrics MEND can collect to assess program success (i.e., HgbA1c)

SWOT Analysis: Wellness Program Health Questionnaire

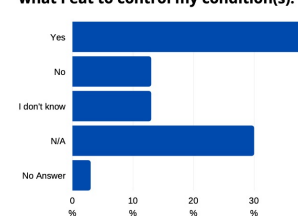
Strengths	Weaknesses	Opportunities	Threats
<ul style="list-style-type: none">Survey is available in both English and SpanishAsks questions about chronic illnesses, diet, and physical activityPaired with biometric measuresAssesses patient’s understanding of own health status	<ul style="list-style-type: none">Not standardized with other national surveysVariations of language translationsSome question options are confusingSome questions that allow for short text responses can be standardized for better data analysis	<ul style="list-style-type: none">There are several surveys used throughout the U.S that are used to assess chronic illness prevalence, risk behaviors, diet and nutrition, and physical activity that have been validated and are used in national organizations.	<ul style="list-style-type: none">Translation to other languages must be also address cultural barriers of languageLiteracy levels may vary per person, how can these be addressed to ensure everyone gets to participate and understand the survey at their comfort levelSurvey length may be too long depending on how many questions are selected

Participant’s Self Health Assessment

I have... (select all that apply)



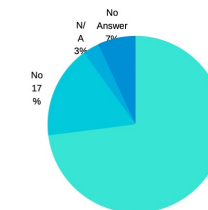
My medicine is more important than what I eat to control my condition(s).



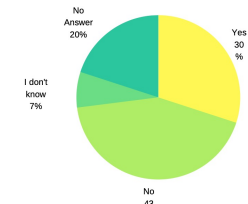
RESULTS (cont.)

Participant’s Health Access

Do you have a primary care provider?

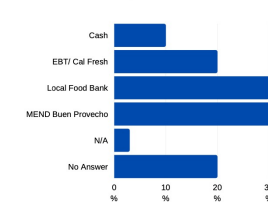


Do you usually have questions for your primary care provider?

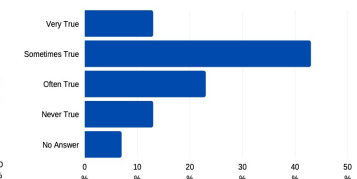


Participant’s Food Access

How is food acquired?



Within the past 12 months, we worried whether our food ran out before we got money to buy more.



CONCLUSION/RECOMMENDATIONS

Based on the internal assessment of the Wellness program it is clear that MEND’s wellness program provides a very valuable service to the communities of the San Fernando Valley, by not only addressing food insecurity, but doing so in a way that is mindful of health outcomes. From MEND’s program evaluation it was gathered that the majority of the cohort’s participants had at least one chronic illness that they were managing with overweight or obesity and high cholesterol being the main ones among this cohort. In order to continue addressing the health disparities that come with food insecurity MEND should continue to provide workshops around basic management of these chronic illness by adapting health education material from reliable sources such as the American Heart Association. Once this is accomplished, MEND can work on establishing more personalized health coaching sessions to set specific goals with the participants. There is also a need for a standardized health behaviors questionnaire in both English and Spanish that can be administered before and after the completion of the program to track changes in health behaviors as the one currently in place is limiting in the questions it asks and the language used may be confusing, thus hindering full completion of the survey by participants. Health Behavior Questionnaires have been used by national and state organizations to assess the health of its communities and each questionnaire is helpful in gathering data around health status and behaviors. Given the importance of these surveys and their usefulness in acquiring health status and behavior data for the U.S population, it would be ideal for MEND to use and adapt questions from these questionnaires, which are readily accessible online, in order to create a questionnaire with validated questions that have been standardized and properly translated into other languages by professionals in the health and allied fields.