**Gallup, Community Health Workers**

**January 15, 2015**

**Moderator: Laurel McCloskey, Executive Director Chronic Disease Prevention Council**

**Participants: 17 present**

**Introduction**

* The purpose of the focus group is to gain input on chronic diseases in the Gallup area.
* The group was provided an overview of the *New Mexico Shared Strategic Plan for Prevention and Control of Chronic Disease*.

**Ice Breaker- What do you think about chronic disease awareness?**

* Diabetes is the number one problem with the Navajo. (10 responses)
* Obesity
* Hypertension (8 responses)
* Cancer (5 responses)
* Cardiovascular disease (3 responses)
* Arthritis (2 responses)
* Asthma from the mines
* Alcohol use (4 responses)
* Suicide
* Domestic violence
* In Shiprock the concerns are alcohol, diabetes, cancer, and suicide.
* Reports have come in for diabetes, hypertension, domestic violence, alcohol, lack of personal responsibility, diabetes, cancer, and the aging elderly.
* Diabetes and many need dialysis.

**What are the biggest concerns that come from chronic disease in your community?**

* Multiple health problems, poly medications make it hard to care for self.
* Mining areas have uranium exposure.
* Alcohol programs in border towns.
* Some do not have proper refrigeration for healthy foods.
* Services are dependent on the council delegates. There are political barriers. In the home environment there is a lack of family support. Many live alone which makes it harder to live with diseases.
* Water access is a concern. There are various issues including a lack of running water and water contamination from uranium is a problem.
* Lack of housing is a problem.
* Many are not eligible for free transportation. This is a challenge for those that need care and even to refill medications. There is some non-emergency transportation, but some to not qualify for help. People fall between the crack and some things are not covered like eye appointments. Only a few are income eligible.
* There is a need for more services for veterans. Clinics are available, but mainly care is only in Albuquerque.
* There is a lack of access to specialty doctors. Nurses can only be scheduled by hard to get appointments and CHW are some of the only access that people have access to in the community.
* There is a lack of food stamps for all of those that need them.

**What are the strengths or resources in your community?**

* Community Health Workers are the main source of support in the community.
* There is a farmers market in Gallup. More are needed. In Gallup there is also a food pantry and the ECHO Food Bank, but you need to eligible for these services.
* There are senior centers available with healthy food access.
* Just a few people have family support, but those with support have strong ties due to tradition.

**What is needed to help?**

* It would help to have access to clinics, even with telemedicine, in remote areas. Flu clinic access would be helpful. The only available clinic is the Tohatchi Clinic.
* Chronic disease prevention needs to start with youth. Schools do not have physical education and this creates and vicious cycle. There is a need to start early and involve the whole family to hold all accountable and create long-term changes.
* CHWs have a hard job with multiple responsibilities. The job requires other duties such as chopping wood. It is hard to balance all of the responsibilities along with caring for chronic diseases.
* More transportation is needed for health care appointments with a free shuttle services. Better roads are needed for access, as most roads now are dirt and unpaved.
* More medical supplies are needed and access to physicians needs to be increased.
* Increased access to internet would help with health communication. Charting can only be done currently at the main clinics. CHW need a basic computer skills training course to help with work and online reporting.
* Refrigeration would help with access to eating healthy foods.
* Materials would help provide information about chronic disease, including flyers and brochures.
* More of the population needs to take personal responsibility and increase motivation. A lack of self-responsibility comes from the boarding school system.
* Prevention needs to start early to delay the onset of chronic illnesses.
* Nurses are needed to supervise CHW and better training is needed overall. Training is offered at nursing homes, but this provides different skills then those needed on the reservations. Skills training are needed for all chronic diseases including asthma and oral health.
* There is a need to work with New Mexico community colleges to provide a recertification for CHW to help open doors. Currently, there are 120 CHW employees with 50% that are New Mexico based.

**What would the ideal healthy community in look like?**

* The electronic health records system for CHW would be compatible with the hospitals EHR system.
* There was a tai chi training that benefited the community, and more trainings like this that can work for other communities would be provided.
* CHWs need a mechanism to help with work to lessen stress and to grieve. They need a caring for the caregiver class, including for diabetes and cancer and this would be a part of the healthy community. This would prevent burnout and could be a part of employee assistance programs.
* Other employee assistance programs could be a part of self-preservation in the profession. There would be an advocate for Indian Women available.
* CHW would be able to transport people as part of the policies. There would be paved roads and access to free public transportation.
* There would be sufficient refrigeration, so healthy food could be prepared and saved.
* A healthy community would have adequate supplies from the hospital. Also, there would be great access to the internet to be able to transmit information to doctors and develop community resources.

**How can the Chronic Disease Prevention Council be useful to the community?**

* Could prevent by closing down McDonalds!
* People do not want to change and they need motivation. Much of it has to do with history. Community Health Workers need help with how to help patients make healthy changes and create new behaviors to overcome this, although this will take 50 years.
* There used to be a walking club for three years with a mileage celebration, but it was phased out over time and funding could be provided for these types of programs. Exercise equipment could help people in the winter. Most problems all go back to a lack of funding.
* More materials for education are needed, including nutrition pamphlets. Project COPE has available flip charts, but additional information would be useful to the community to help answer health education questions in the home.
* The Chronic Disease Prevention Council would assist with staff development, skills training, computer education, and EHR system development.