



Operationalizing Equity through Community Based Participatory Research

CHEAC Workshop
Thursday, October 5, 2023



Agenda

- 1:15-1:20pm: Welcome & Introduction
- 1:20-1:25pm: Reflection Question
- 1:25-1:45pm: Introduction of Filipino Community Health Needs Assessment (CHNA)
- 1:45-2:15pm: Panel Discussion, Q&A

Meet Your Presenters

- **Harold Dela Cruz, he/his**

- Filipino, Native Hawaiian, and Pacific Islander Health Equity Coordinator
- Racial & Health Equity Team
- Grew-up in West Long Beach
- B.A. in Urban Studies and Planning, University of California, San Diego
- Community Organizer since 2016 in San Francisco, Los Angeles, and Long Beach
- Harold.DelaCruz@longbeach.gov

- **Shiraya Thompson, she/her**

- Racial and Health Equity Data Analyst
- Racial & Health Equity Team
- B.A. in Comparative Human Development, University of Chicago
- M.S. in Epidemiology, University of California, Los Angeles
- Shiraya.Thompson@longbeach.gov



Start with Reflection

- Questions to consider
 - What does Health Equity mean for our community?
 - How does our community feel?
 - What are the challenges that our community faces?
 - What are the major health concerns of our community?
 - How does our community think these issues should be addressed?



Community Based Participatory Research (CBPR)

Defined as an approach that incorporates values and strategies to promote collaborative inquiry based on community-identified issues, equitable partnerships, and structures for participation; it also seeks to apply research to practice and policy for social change and reduced disparities (5)



Objectives

1. To identify the values, strengths, and assets of the Filipino community in Long Beach for promoting health and well-being in the community
2. To identify key health priorities and assess the health needs of the Filipino American community in Long Beach
3. To develop a community-driven proposition of best approaches for leveraging the strengths of the Filipino community towards mitigating the impacts of COVID-19 and advancing overall health equity

Principles from Community Organizing

- The further you are from the problem, the more you can philosophize about it (PICO Organizing Principle)
- Paulo Freire in Pedagogy of the Oppressed – “Attempting to liberate the oppressed without their reflective participation in the act of liberation is to treat them as objects which must be saved from a burning building”
- Power – is organized people or money
 - Power is taken, not given.



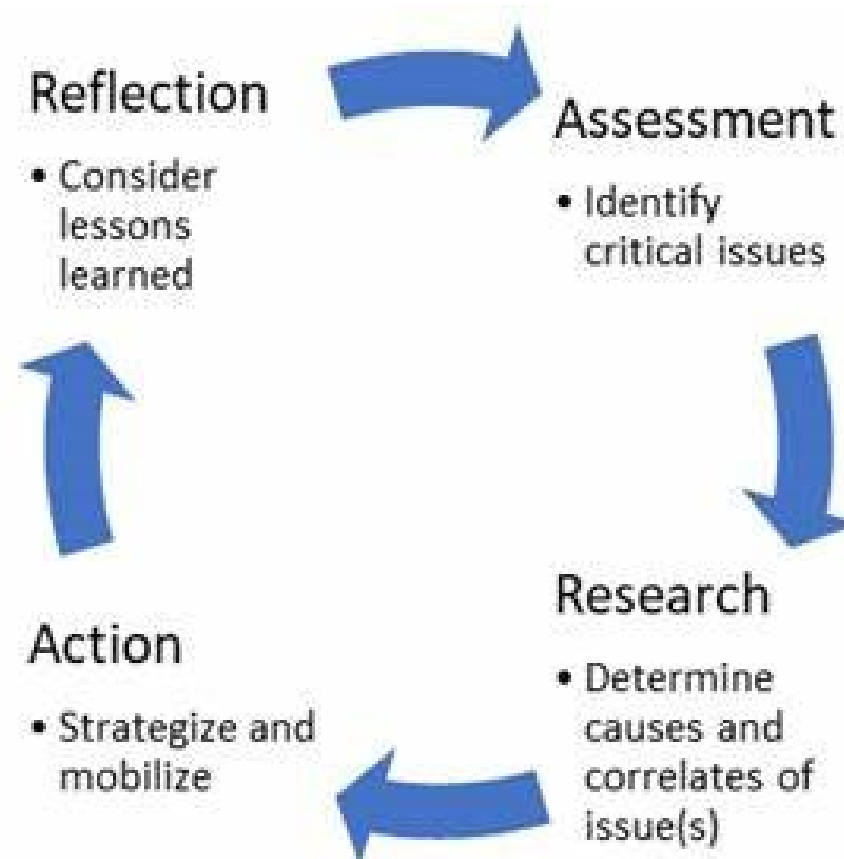
Beginning the Process

Elements of Organizing

- 1-1's
- Research
- Action
- Evaluation

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Justification, Benefits, Limitations

Justification	Benefits	Limitations
Currently lacking disaggregated health data on Filipino community in Long Beach causing inequities in CBO's accessing funding	Builds a strong and authentic connection to the Filipino community through the community advisory board (CAB)	Limited funding available through CDC grant – need narrow scope for research
Filipinos disproportionately affected by COVID due to overrepresentation in healthcare professions and prevalence of chronic diseases	Will identify the assets and barriers to health and well-being of Fil-Am community and will inform strategies for intercepting health needs	Full diversity in languages spoken in the Filipino community will not be captured or represented in this project



Filipino Community Advisory Board

Name	Organization
Romeo Hebron	Filipino Migrant Center (FMC)
Kimmy Maniquis	Search to Involve Pilipino Americans (SIPA)
Leonardo Pandac, Ph.D	National Federation of Filipino American Associations (NaFFAA)
Ralph Santos	Long Beach Filipino Festival
Dr. Veronica Acosta-Deprez	Cal State University Long Beach (CSULB)
Principal Marie Edwards	St. Lucy's School & Church
Johann Ortizo	Access to Prevention Advocacy Intervention & Treatment (APAIT)
Romeo Garcia	Kubo LB

Community Based Participatory Research (CBPR) Design

Phase 1

- CAB is formed with 3-5 inaugural organizations
- CAB advises on health topics to cover in focus groups

Phase 2

- Priorities and themes brought up by community members in focus groups will guide content of survey questionnaire

Phase 3

- Survey and focus group responses serves as primary data to inform needs assessment
- CAB collaborates with research team and community to analyze results and create an action plan



Research Procedure



Community Advisory Board

Between 5 and 9 community leaders will help guide the project scope, recruitment strategy, and dissemination of findings to the community



Listening Sessions/Focus Groups

- Six 90-minute listening sessions organized by age group and demographic
- 5-10 representative community members
- Facilitated by Harold and CAB members



Surveys

- Specific questions stemming from common focus group themes
- 224 surveys distributed at outreach events, Filipinx spaces, and online



Analysis

Hosted 2 listening sessions with community to support with data collection, analysis, and report drafting



Presentation and Roundtables

Formal needs assessment report will be shared with the public





Focus Group Composition

Seniors (55+)

Youth (15-17) &
Emerging Adults
(18-25)

Women

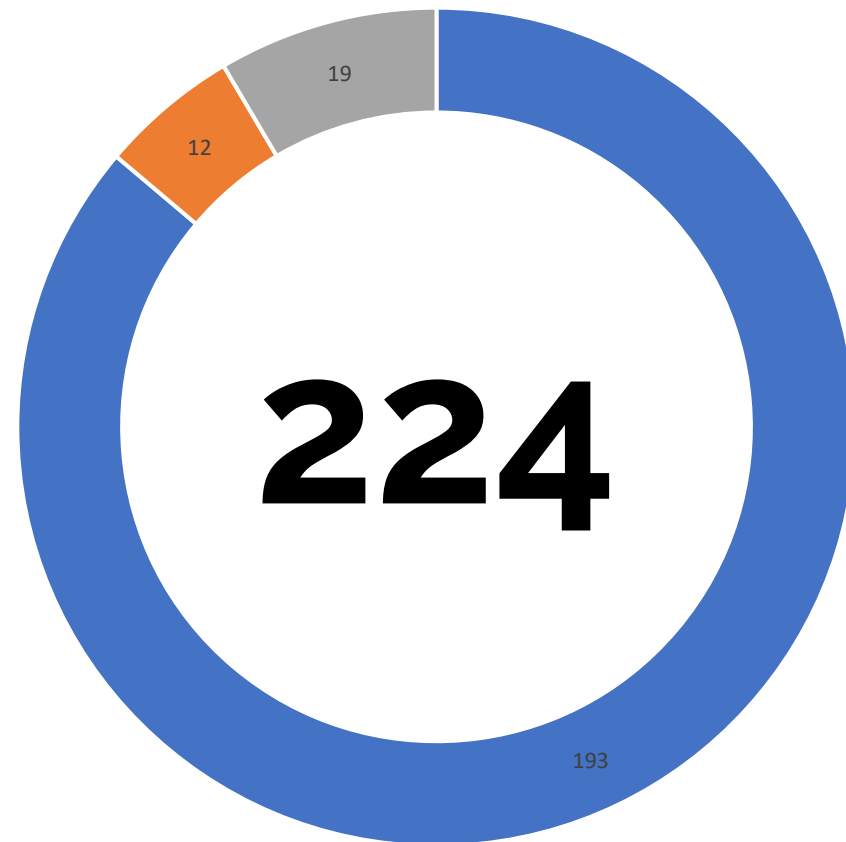
Adults (25-55)

Mixed, Older Adults
and Youth/Young
Adults

LGBTQIA2S+



Surveys Completed

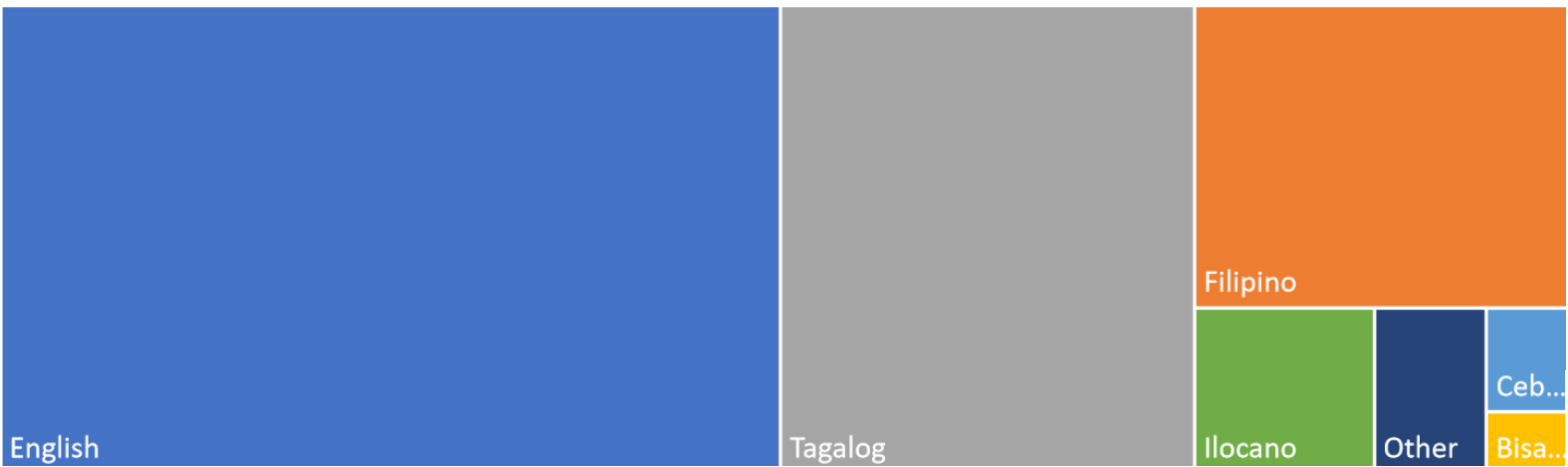


■ Online ■ Phone ■ In-Person

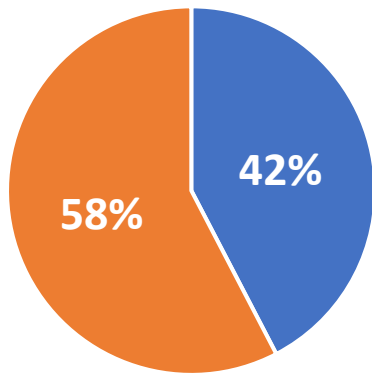
Demographics

Languages Spoken at Home

English Filipino Tagalog Bisaya Cebuano Ilocano Other

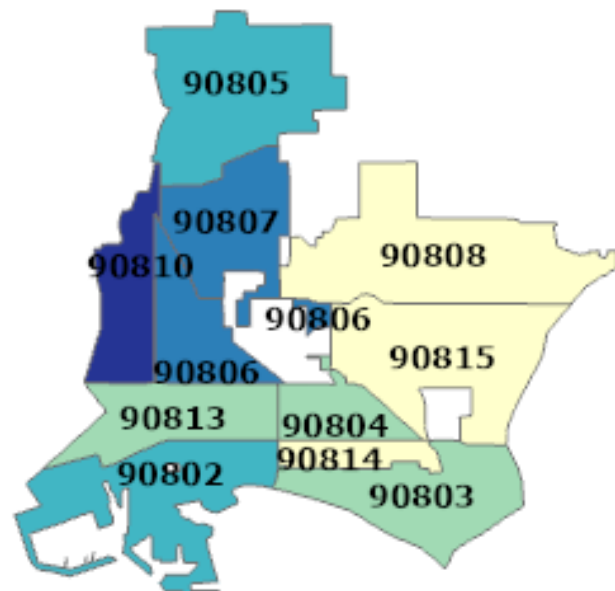
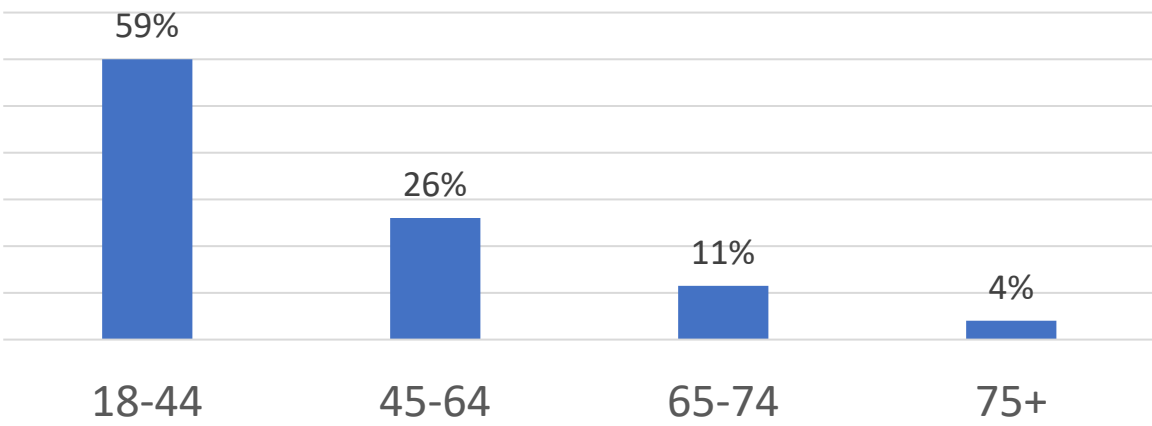


Birthplace



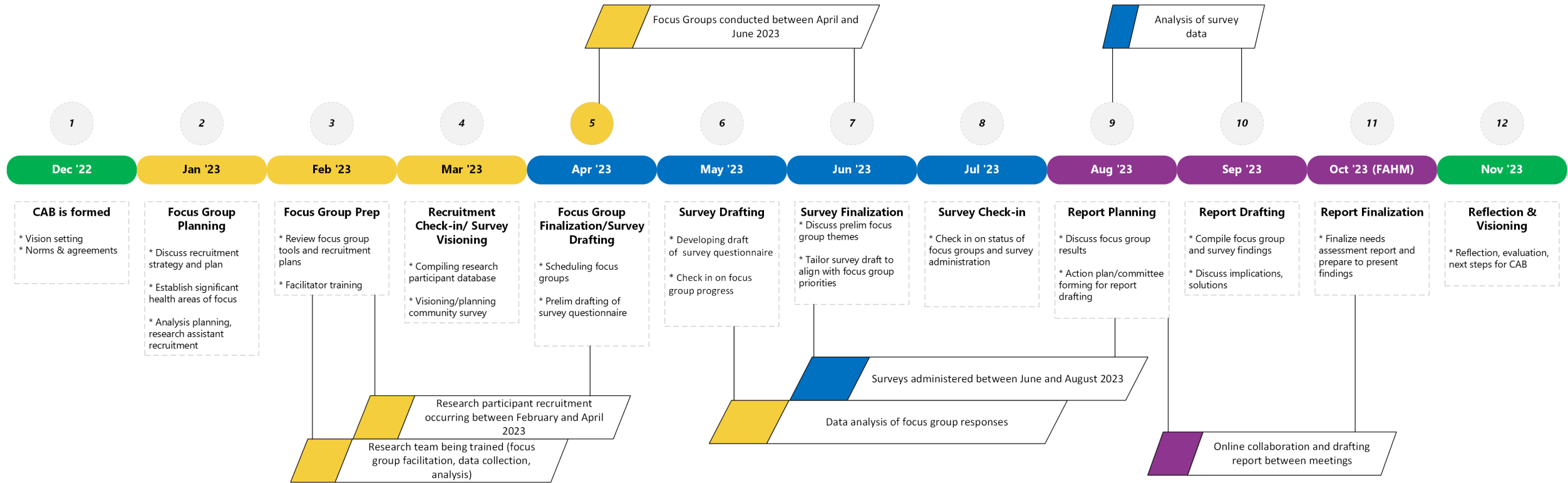
Born in the US Not born in the US

Age



Counts
 <5
 5-6
 7-14
 15-30
 31-90

Timeline for CHNA



**If you want to go fast, go alone.
If you want to go far, go together.
- African Proverb**





Panel Discussion

Name	Organization
Romeo Hebron	Executive Director, Filipino Migrant Center (FMC)
Johann Ortizo	Director of Programs, Access to Prevention Advocacy Intervention & Treatment
Shiraya Thompson	Racial and Health Equity Data Analyst, Long Beach Department of Health and Human Services