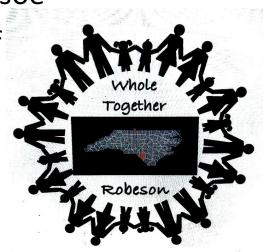
Community Voices and Whole Robeson Together: Community Based. Participatory Research to Promote Rural Maternal Emotional Health and Wellbeing.

Sarah E. (Betsy) Bledsoe

Presenting on behalf of the MI-PHOTOS,
Community Voices,
& Whole Together
Robeson Teams





Fetter, A., Gordon, B. Little, E., Oxendine, A. Lemasters, K. H., Brooks, J., Bullard, T., Chavis, S., Daniel, L., Englert, A., Escobar, A., Godown, E., Hugging, N., Jordan, K., Lightfoot, A., Locklear, T., Marshall, S., Martin, C., Maynor, C., Oxendine, J., Pevia, K., Sampson M., Schindler, A., Vasques, D., & Waake, A.



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Most of all we would like to acknowledge the partnership of mothers and providers living and working in Robeson County. Without their generosity and trust, their constant and tireless work to improve the lives of families in their community and their unrelenting dedication to giving their child and other children living in rural Robeson County and other rural communities the best chance at maximizing their potential, we would have no partnership. Our hope in all of this is to honor their wishes for themselves, their families and their community.

Conceptualizing the Problem

Increasingly large numbers of children are affected by childhood traumatic stress

By the time children in the U.S. turn 18:

- 62-68% of U.S. children are exposed to a potentially traumatic event (PTE)
 - Over 50% are exposed to two or more PTEs
 - 41% experience clinically relevant impairment
 - 12% meet criteria for Acute Stress Disorder
 - 16% meet criteria for Post Traumatic Stress Disorder

Maternal health and wellbeing impact risk and resilience for child health and wellbeing

Beginning in the perinatal maternal health and wellbeing impacts immediate and lifelong risk for negative health outcomes

Many mothers and children experience negative outcomes associated with the fundamental causes of racial discrimination and poverty

Maternal mental health impacts how children experience and process potentially traumatic events

Residing in a rural area increases the risk for experiencing inequities in health and wellbeing for mothers and children

Community based participatory research (CBPR)

GOALS

- Active partnerships
- Sustainability
- Generates rich knowledge
- Equitable progress

CHALLENGES

- Power and privilege
- Community consent
- The role of research in social change
- Community's ownership of the project

Brief Experiential Exercise

Things You Like Best About Yourself	Things You Like Least About Yourself
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.

Robeson County, NC

- Rural
- Median Income: \$32,407
- Majority-minority community
- Health inequities:
 - 15% of mothers experience postpartum depression
 - Infant mortality rate = 14 per 1,000 live births
 - Highest reported death rate for infants 28 days to 1 year in NC
 - 83% of mothers receive Medicaid
 - 64% receive WIC
 - 68% are unmarried
 - 18% report smoking during pregnancy
 - American Indian Mother fare worse than other racial/ethnic groups









Our Beginnings: Mothers Improving Pregnancy and Postpartum Health Outcomes Through stOry Sharing (MI-PHOTOS)

The Community Advisory Board



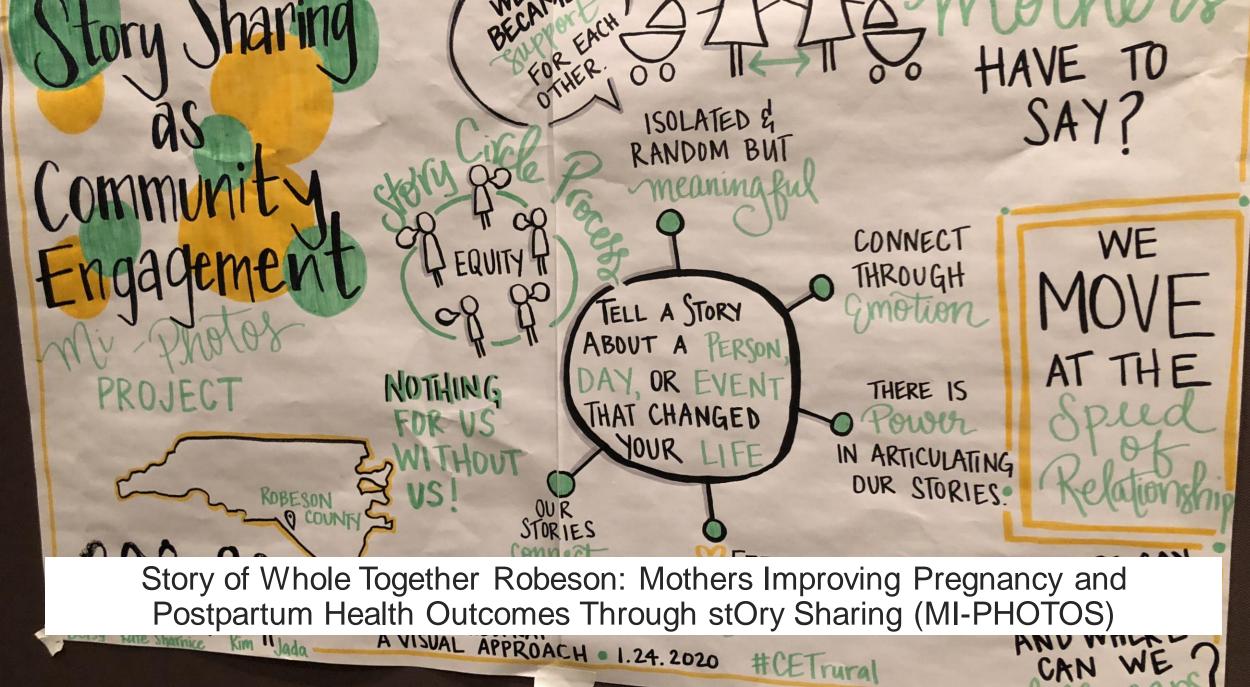






Objective

 MI-PHOTOS' aim was to listen to mothers' stories and develop an understanding of their challenges and strengths related to having and raising infants and toddlers in their community. MI-PHOTOS focused on building foundational knowledge to advance sustainable social change and health equity for rural mothers and children



CAN WE

PhotoVoice

A participatory approach in which academic researchers and community members work together to build a deep and genuine understanding of the community's experience through photography.

PHOTOVOICE

- 1. Uses photography to engage community members as co-investigators
- 2. Juxtapose realities to construct new knowledge about how the community issue is part of a system of power and authority
- 3. Reach influential advocates with this new knowledge to generate action steps to effect change

Photovoice Session Prompts

- 1. What are the daily challenges of being pregnant and a mother in this community?
- 2. Where do mothers get stress and support in this community?
- 3. What do mothers in this community need?
- What is the most important issue for you since you learned you were going to have a child?
- 5. What can we do to help mothers in this community?

KNOWLEDGE KNOWLEDGE

5 - What do you see here?

H - What is really happening here?

O - How does this relate to our lives?

W - Why does this concern, situation or strength exist?

DISSEMI NATION

E - How can we become <u>empowered</u> through our new understanding?

D - What can we do?

Themes

"A mom community": MI-PHOTOS as a Social Support Group

"We can't hardly make it": Community & Family Dynamics

"They Do Everything": Professional Support Programs

"A mom community": MI-PHOTOS as a Social Support Group



"I mean something like...where we can get together and express [how] we feel so somebody else can hear us, so somebody here knows how we feel...maybe somebody needs to take a stance so we can actually put something into action here."

"A mom community": MI-PHOTOS as a Social Support Group

"These girls are working, they're going to school, while we some of us have been dealt a bad hand... I want people to be aware that...our area is all types of people here, as well as we were a diverse group of moms...at the end of the day, we're all raisin' our children...with the best means that we possibly have... I think that's important for people to recognize and then see - 'but these were the challenges they were faced with, we still came out on top."

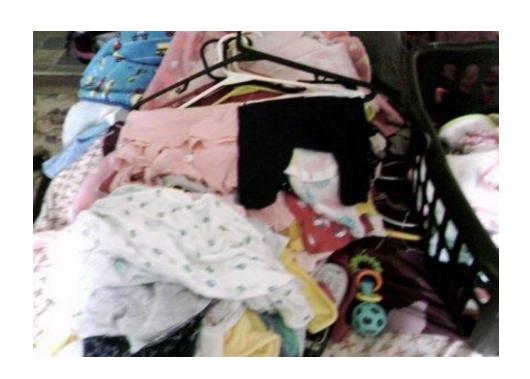
"We can't hardly make it": Community and Family Dynamics



"They don't have nothing around here for our kids to do"

"Kids who are going through problems, like a recreation center...like it would be nice to have kids who are going through trouble...something to stabilize them."

"We can't hardly make it": Community and Family Dynamics



"We all know how it is to be a struggling mom, you know, the dryer breaks down, you have to use coat hangers, constantly have to clean up."

"We can't hardly make it": Community and Family Dynamics

"My step-father and my mother [are] a big huge support in my life... My mother...took me back in her wing because she know, she been through it before, my step-father, he has been such a huge support, helping me take care of [my daughter]."

"[My daughter's father] was the only person that I really depended on and now I have to do everything by myself."

"They Do Everything": Professional Support Programs

"Yes, this is...my support. I mean, I've still got my partner, but these people basically are my support...I can talk to them about my husband, but you can't talk to your husband about your husband...my [nurse] has...helped me through so much, with school, with being a first-time mom...it's difficult...trying to find support here."





"They Do Everything": Professional Support Programs

"After that support's gone, then what? What are you supposed to do?"

"Why isn't there one place to go where [people can] share all this information? Like why do we have to dig, dig, dig, dig?"

"They Do Everything": Professional Support Programs

"I like my nurse and I talk to her about stuff, but I know...where I can stop, like...if I feel depressed, because they ask you, like, are you depressed?...I know you can't talk to them about it...I'm not 'bout to tell you this and then you go from here and then have to go through all this other mess because they're gone say, 'well you might not be good for your child if you're depressed."

Takeaways

Multi-faceted social support

Mental health stigmatization

Bridging peer, professional, and confidential support







Lessons Learned Initiating Community Based Participatory Research in Partnership with a Diverse, Rural Community

Exploratory, Qualitative Case Study

Autoethnography: Initiating CBPR

- Benefits
- Challenges
- Paradoxes

Triangulation

- Data
- Researchers

Member checking

Self-reflection

- Writing
- Discussion

Content analysis of notes and minutes

- Project meetings
- Community stakeholder meetings
- Gatekeeper meetings
- Community Advisory Board Meetings
- Community cultural events

Themes

- Rejecting the Disparities Lens focuses on the harm of approaching and defining communities based on disparities
- "One Step Forward, Two Steps Back" related to the challenges of pacing and engaging the community
- "Nothing about us without us" focused on hearing messages coming from the community
- "From vs. Of vs. In the community" focused on the challenges of identifying the community, stakeholders, and the identified population;
- "Identity Matters" focused on cultural humility, navigating racial/ethnic differences, and working from an "outsider" versus "insider" perspective;
- "Building Trust on the Edges" related to the process of building the basic knowledge and presence in the community required to move forward with CBPR.

"Building Trust on the Edges": The Harm of Approaching Communities with a Disparities Lens

Understanding Perinatal Health
Experiences Among Native American
Indian Mothers in rural NC

Understanding Perinatal Health
Experiences Among **Mothers** in rural
NC

Community – University History

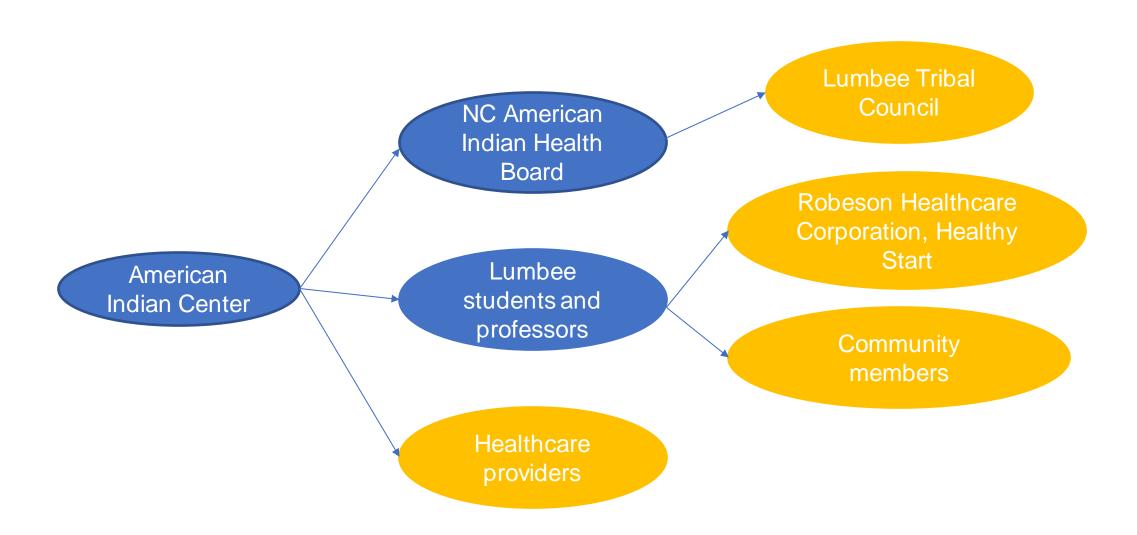
"One step forward, two steps back"

Pacing mismatch

Doctoral/Graduate Students

Deadlines, funding, and momentum

"From" Versus "Of" Versus "In" the Community

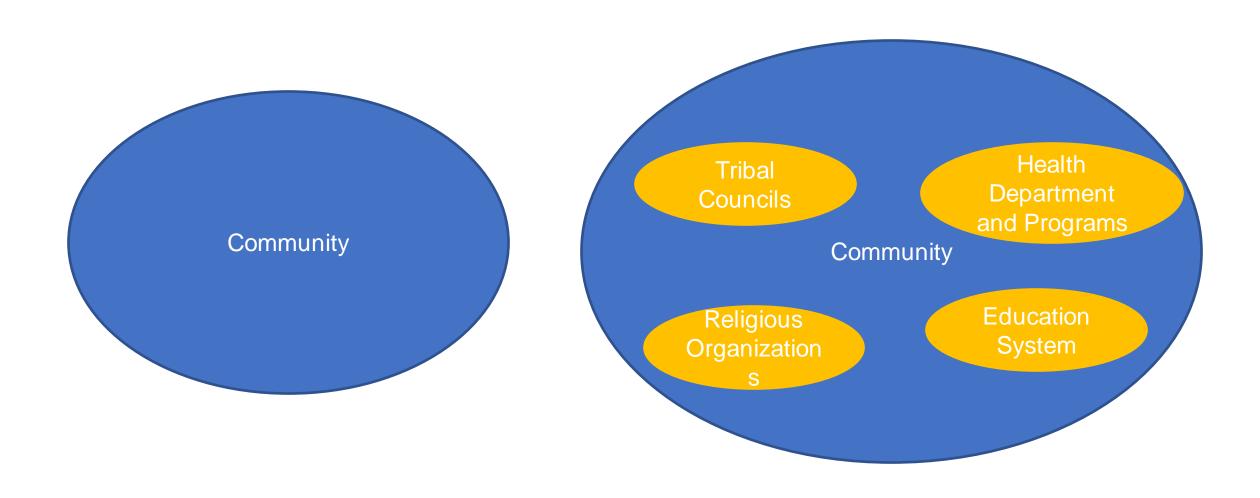


Nothing About Us Without Us is For Us

Incorporation of the community

Benefits to the community

Identity Matters – Power Dynamics



Facilitating Community Engagement

- Examine existing relationship with the community
- Identify who to work with
 - Key Informants
 - Cultural Insiders
- Develop a strategy
- Be flexible
- Be patient

Discussion and Recommendations

Early partnership and engagement with community members

Awareness and transparency of researchers' positionalities

Co-creating research topics and questions

Integrating a CBPR approach into research methods

Current Projects



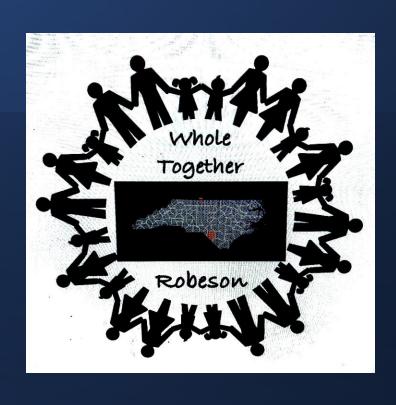


Community Voices

- Mixed Methods Study of Mothers and Service Providers
- Individual surveys, qualitative interviews, and focus groups with mothers who are pregnant or mothering infants and toddlers and the providers who serve them
- Inform the co-creation (with the community) of an intervention to meet unfilled needs for rural pregnant mothers and mothers of young children grounded in the strengths and needs of the community



Team Leaders: Whole Robeson Together







Brittany D. Gordon, MA

Director of Perinatal Services
Healthy Start Robeson at Robeson Health
Care Corporation
2023 Whole Community Connections
Champion

Erica Little,

Director, Healthy Start Robeson at UNC Pembroke 2023 Whole Community Connections Champion





April Oxendine,

Health Educator, Robeson County Department of Public Health 2023 Whole Community Connections Champion

Sarah E. (Betsy) Bledsoe PhD, MPhil, MSW

Associate Professor, School of Social Work
Co-Director, National Initiative for Trauma
Education and Workforce Development
Director, Health Equity for Rural Mothers and
Families (HER) Lab
Thorp Faculty Engaged Scholar
2023 Whole Community Connections Champion
University of North Carolina at Chapel Hill





Anna K. Fetter, PhD, Med

Post-Doctoral Fellow,
Department of Psychology and
Neuroscience
2023 Whole Community Connections
Champion
University of North Carolina at Chapel
Hill

Current Team - Community Advisory Board Members, University Based Partners

- Jada Brooks
- Kelly Flores
- Brittany Gordon
- Erica Little
- Alexandria Locklear
- April Oxendine
- Janice Oxendine
- Tony Locklear

- Betsy Bledsoe
- Adam Englert
- Andres Escobar
- Anna Fetter
- Caroline Martin
- Amber Waake



Whole Together Robeson



Whole Robeson Together

Goal 1: Develop study methods and a support group intervention to increase maternal health and emotional wellbeing in pregnant mothers and mothers of infants and toddlers in Robeson County that is culturally acceptable and feasible.

Goal 2: Test the feasibility of the support group methods including delivering the intervention to pregnant mothers and mothers of young children, recruiting and retaining mothers, and measuring changes in maternal health and wellbeing, to ensure the support group is acceptable and addresses the needs of mothers in the community.

Goal 3: Develop an implementation and sustainability plan for the intervention.

Whole RobesonTogether: Community Path Visual





Community Voices/Robeson Whole Together Milestones



- Recruited 34 mothers and 15 providers (survey, individual interviews, focus groups)
- 25 mothers 14 providers have completed surveys
- Interviews have been completed with 20 mothers and 8 providers
- Transcription, Coding and Analysis of Interview (underway)
- Conducted a systematic review of evidence-based support group models
- Identified 8 unique models
- Models were presented to Community Advisory Board (CAB) for feedback
- CAB selected 7 of the eight models for consideration
- Survey developed and collected from CAB for adaptation and incorporation of models for mothers in draft support group protocol
- Funding from UNC Rural received to continue work.



We keep going – immediate next steps



Future tasks and opportunities

- Conduct Community Voices focus groups
- Complete analysis of Community Voices Data
- Present Community Voices Data to the Community
- Develop the Support Group Manual
- Test the Feasibility of the Peer Support Group
 - Recruit and gain feedback from peer support group participants
- Present findings from Whole Robeson Together to the Community
- Continue to Grow and Develop Partnerships within the Community to Ensure Sustainability of the Peer Support Group
- Apply for external funding presenting RFAs to CAB at Spring meeting

Thank You



THE UNIVERSITY of NORTH CAROLINA at CHAPEL HILL



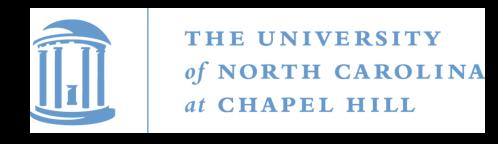
Robeson Whole Together Team

https://wcc.unc.edu/community-partnerships/whole-together-robeson/

bledsoe@email.unc.edu



Presenter Contact Information



Betsy (Sarah E.) Bledsoe, PhD, MPhil, MSW

bledsoe@email.unc.edu

Associate Professor, School of Social Work
Director, National Initiative for Trauma Education and Workforce
Development

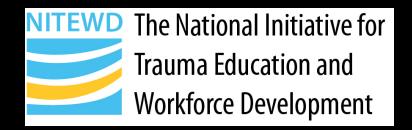
Principal Investigator, HER Lab
Thorp Faculty Engaged Scholar, Whole Community Connection

Champion,

University of North Carolina at Chapel Hill

325 Pittsboro Street, CB 3550

Chapel Hill, NC 27599-3550







References

- 1. Bolin, J. N., Bellamy, G. R., Ferdinand, A. O., Vuong, A. M., Kash, B. A., Schulze, A. & Helduser, J.W. (2015). Healthy rural people 2020: New decade, same challenges. *The Journal of Rural Health*, 31, 326-333.
- 2. Grote, N. K., Bridge, J. A., Gavin, A. R., et al. (2010). A meta-analysis of depression during pregnancy and the risk of preterm birth, low birth weight, and intrauterine growth restriction. *Archives of General Psychiatry*, 67(10), p. 1012-24.
- 3. Johnson, P. L., Flake, E. M. (2007). Maternal depression and child outcomes. *Psychiatric Annals*, *37*, p. 404-10.
- 4. LeMasters, K. H., **Bledsoe, S. E.**, Brooks, J., Chavis, S., Little, E., Pevia, K., Daniel, L., Jordan, K., Schindler, A., & Lightfoot, A. for the MI-PHOTOS Project. (2022). The MI-PHOTOS Project: Understanding the health and wellbeing of rural historically marginalized mothers through Photovoice. *Health Education & Behavior*, 49, 828-837.
- 5. Liebenberg, L. (2018). Thinking Critically About Photovoice: Achieving Empowerment and Social Change. International Journal of Qualitative Methods.
- 6. Matsuda, Y., Brooks, J. L., & Beeber, L. S. (2016). Guidelines for research recruitment of underserved populations (EERC). *Applied nursing research:* ANR, 32, 164–170. doi:10.1016/j.apnr.2016.07.009
- 7. North Carolina State Center for Health Statistics. 2019 County Health Data Book. Published 2019. Accessed February 1, 2020.
- 8. Propper, C., Rigg, J., and Burgess, S. (2007). Child health: Evidence on the roles of family income and maternal mental health from a UK birth cohort. *Health Economics*, 16, 1245-1269.
- 9. US Census Bureau. Quick Facts: Robeson County, North Carolina. https://www.census.gov/quickfacts/fact/chart/robesoncountynorthcarolina. Published 2010. Accessed January 31, 2020.
- 10. Wallerstein NB, Duran B. Using Community-Based Participatory Research to Address Health Disparities. *Health Promot Pract*. 2006;7(3):312-323.doi:10.1177/1524839906289376.
- 11. Wang CC, Redwood-Jones YA. Photovoice ethics: Perspectives from flint photovoice. Heal Educ Behav. 2001;28(5):560-572. doi:10.1177/109019810102800504.