



COMMUNITY-ENGAGED LIFESTYLE EDUCATION PROGRAM FOR WOMEN

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Introduction

- ▶ This COPC activity highlights the importance of women's health, the diseases and health challenges common to this population, the opportunities available to improve health literacy, and strategies to implement preventive measures for chronic health conditions before they become problematic and expensive.

Introduction


- ▶ Recent data from the Department of Health (DOH) and the Philippine Statistics Authority (PSA) released in February 2018 showed that the top causes of death among Filipino women are cancer and ischemic heart disease. Cancer topped the chart with 30,954 or 12.5 percent followed by ischemic heart diseases with 29,662 or 12.0 percent in 2016.

introduction

- ▶ Moreover, breast cancer accounts for about 30 percent of cancer cases among women and 16 percent of all cancer diagnosis. Experts estimate that three out of 100 Filipina will develop breast cancer in their lifetime. In fact, in 2017, the Philippine Obstetrical and Gynecological Society revealed that the Philippines had the highest breast cancer prevalence among 197 countries.

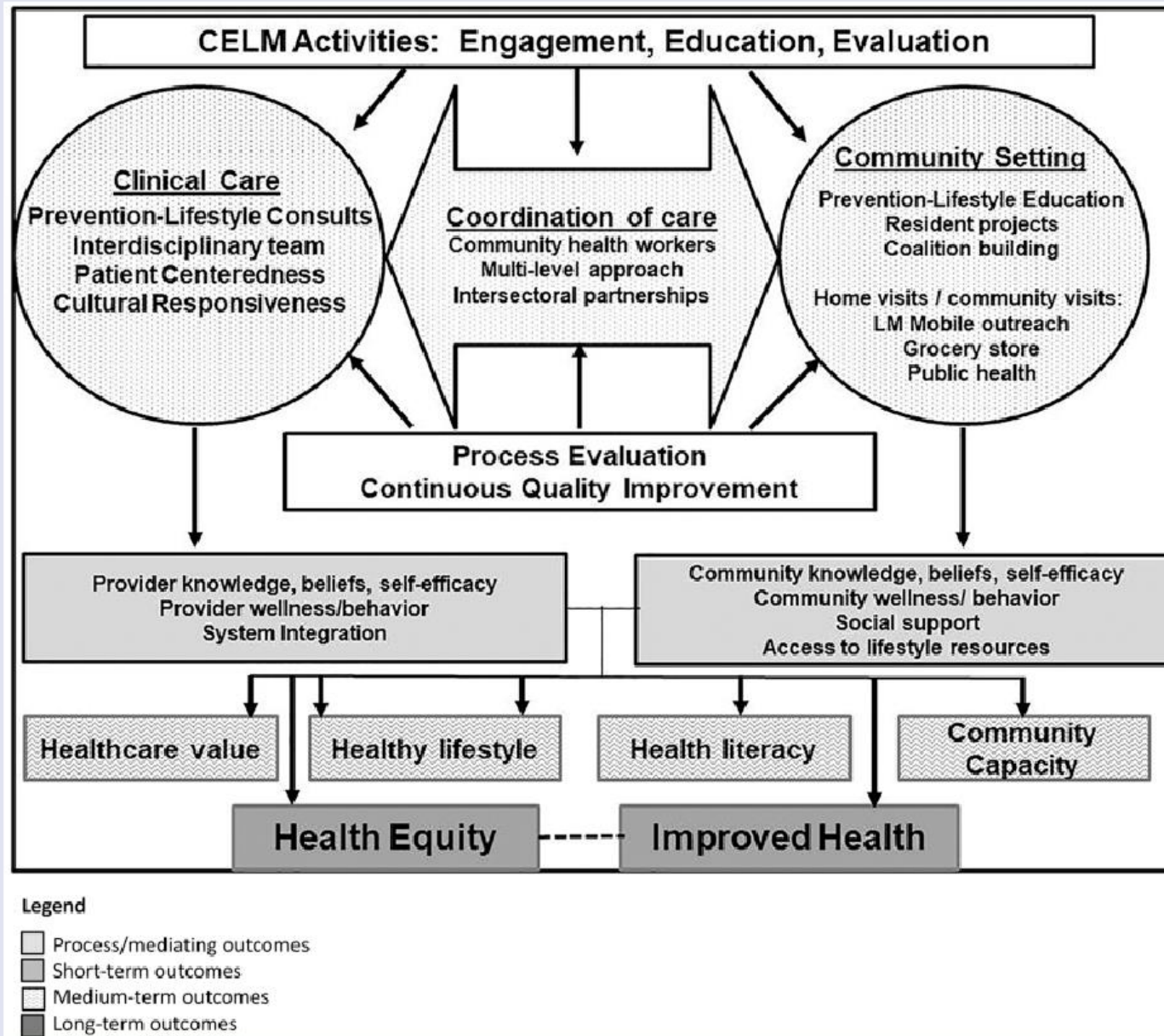


A PUSONG PINAY EVENT
presents



The
HEART
Truth
about
WOMEN





Abbreviations: CELM, community-engaged lifestyle medicine; LM, lifestyle medicine.

^aKrishnaswami et al.²¹

Community Profile

- ▶ The “Red Ladies” is one of the People’s organization established in the City of Iloilo. There are over 10,000 members, composing of marginalized women sector distributed in the different districts of Iloilo City.
- ▶ There were one hundred (120) selected members of the Red Ladies who participated in the 12 weeks community-engaged lifestyle medicine program facilitated at Remnant Institute, Lapaz, Iloilo City, but only eighty two (82) finished the program. The spouses and children of participants were also invited, however only few were able to join.

Table 1: Demographic data

		Total number	Percentage
Age	20-30	18	21.95%
	31-40	26	31.70%
	41-50	21	25.6%
	≥51	17	20.73%
Marital status	Single	8	9.75%
	Married	51	62.19%
	Widow	6	7.31%
	Separated	17	20.73%
Children	1-3	32	39.02%
	4-6	21	25.60%
	≥6	18	21.95%
	None	11	13.41%
Educational status	None	8	9.75%
	Grade school	19	23.17%
	Highschool	34	41.46%
	College	21	25.60%
Employment	Self-employed	56	68.29%
	Employed	22	26.82%
	None	4	4.87%

Community Assessment

- ▶ The Red ladies of Iloilo city have a varied age of membership, level of education and employment status.
- ▶ Lifestyle practices were evaluated (Table 2)

Table 2: Lifestyle Practices

		Total number	Percentage
Dietary intake	Vegetarian	0	0%
	Omnivore	82	100%
	Mostly plant-based	31	37.80%
	Mostly animal-based	51	62.19%
Physical activity	Highly active (>300 min/week physical activity)	19	23.17%
	Active (150-299 min/week physical activity)	22	26.82%
	Low active (60-149 min/week physical activity)	35	42.68%
	Inactive (1-59 min/week physical activity)	6	7.31%
Risky substance use	Smoking	22	26.82%
	Alcohol	18	21.95%
Perceived Stress	Low perceived stress (1-13 PSS score)	22	26.82%
	Moderate perceived stress (14-26 PSS score)	43	52.43%
	High perceived stress (27-40 PSS score)	17	1.21%
Sleep	7-9 hours	34	41.46%
	< 7 hours	48	58.53%

Table 3. Lifestyle-related conditions

		Total number	Percentage
Ischemic Heart Disease		12	14.63%
	Compliant with medications	8	66.66%
	Non-compliant with medications	4	33.33%
Hypertension		48	58.53%
	Compliant with medications	18	37.5%
	Non-compliant with medications	21	25.61%
Diabetes mellitus type 2		57	69.51%
	Compliant with medications	23	40.35%
	Non-compliant with medications	34	59.65%
Cancer		7	8.54%
	Completed treatment	3	42.86%
	Ongoing treatment	2	28.57%
	Non-compliant with treatment	2	28.57%
Overweight/Obesity	Overweight	28	34.14%
	Class 1 obesity	19	23.17%
	Class 2 obesity	1	1.21%
	Class 3 obesity	-	-

Table 4. Lifestyle-related knowledge

		Number	Percentage
Nutrition	Saturated fat sources (tropical plant oils, meat, dairy)	25	30.49%
	Dietary cholesterol sources (eggs, meat, dairy)	66	80.48%
	Food calories (Carb 4kcal, Protein 4kcal, Fat 9kcal)	15	18.29%
	Level of food processing (slightly processed, moderately processed, highly processed)	12	14.63%
	Plant-based diet for prevention and treatment of chronic diseases	39	47.56%
	Animal-based diet increases risk for chronic diseases	24	29.27%
	High salt intake increases risk of hypertension	42	51.22%
	High fat intake increases risk of prediabetes and diabetes type 2	8	9.75%

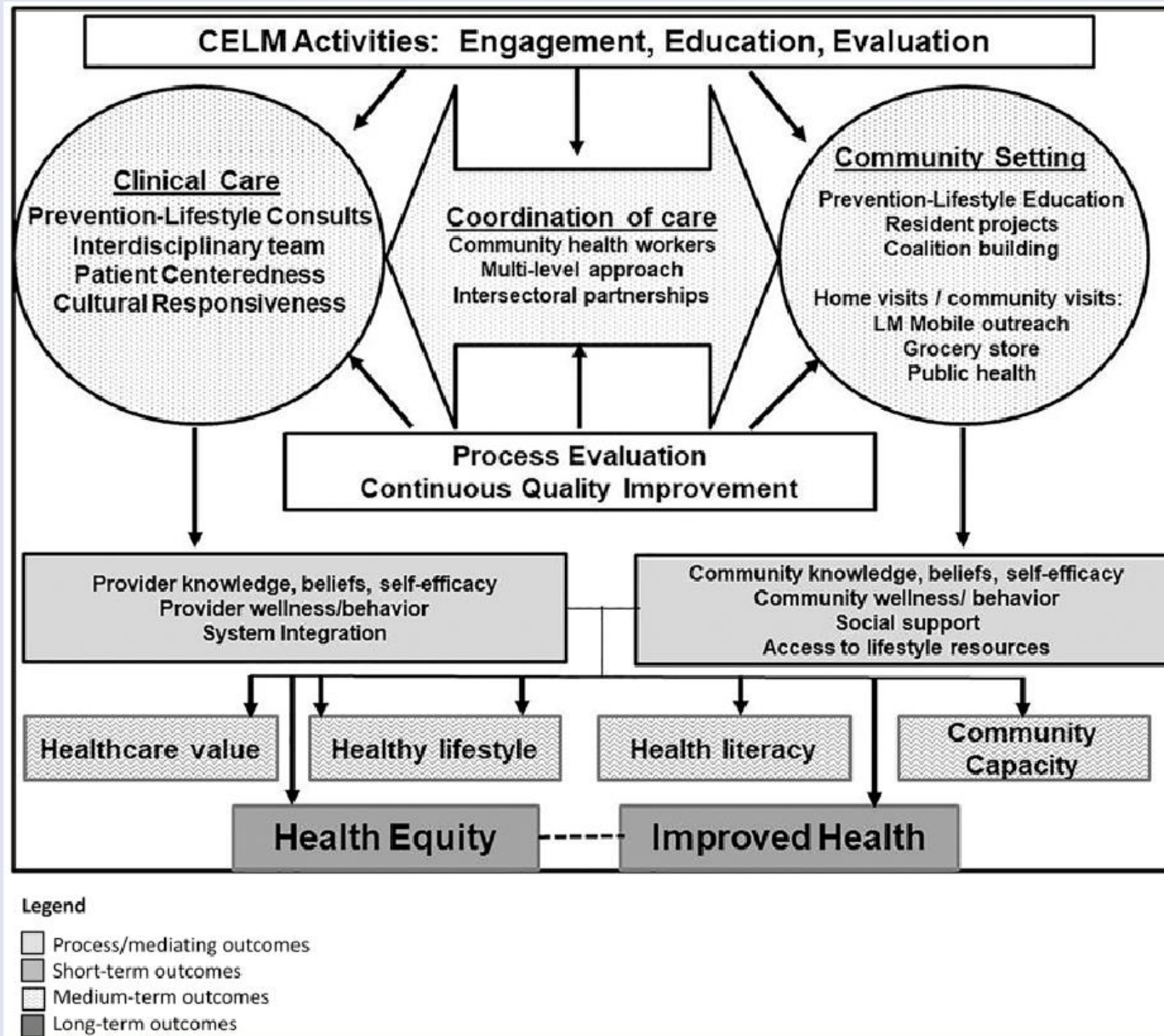
Table 4. Lifestyle-related knowledge

Physical activity	Regular moderate exercise (150 min/week) prevents and treats chronic diseases	75	91.46%
	Sedentary behavior (prolonged sitting, long screen time) increases risk of chronic diseases	43	52.44%
Stress	Stress induces risk of chronic diseases	55	67.07%
	Stress management strategies (meditation, exercise, yoga, social connections)	23	28.05%
Sleep	Inadequate sleep increases risk of chronic diseases	39	47.56%
	Ideal number of hours of sleep (7-9 hours)	63	76.83%

Community-based Intervention

- ▶ A 12-week community-engaged lifestyle education program was conducted from October 7, 2018 to January 6, 2019 mostly at Remnant Institute, Lapaz, Iloilo City and other venues, such as local urban gardens (Oton and Iloilo city).





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Table 5. Community-engaged lifestyle education program

OBJECTIVE	ACTIVITY	TIME FRAME	RESOURCES	EXPECTED OUTCOME
To improve healthy lifestyle literacy of participants	Education <ul style="list-style-type: none"> • Deliver lifestyle education lectures 	October 2018 – January 2019 (Weekly activity for 12 weeks)	Tarpaulin Printed materials Laptop and Projector	Improved healthy lifestyle literacy
	Health Promotion <ul style="list-style-type: none"> • Conduct community-based exercise program • Conduct activities on container gardening to improve basic indigenous vegetable supply • Demonstrate basic healthy food preparation 	October 2018 – January 2019 (Weekly activity for 12 weeks)	Sound system Gardening materials, tools and seeds Cooking utensils, recipe ingredients Field tour (garden visit)	Improved lifestyle practices





Program Outcome

- ▶ Participant's health-related knowledge and practices were assessed after the program which revealed a significant improvement (Table 6). Participants were also asked to share their experience and reflections on the program in verbatim. The lifestyle practices of the participants were also reassessed showing significant changes on nutrition, physical activity, stress, and sleep (Table 7).

Table 6. Lifestyle-related knowledge – Post intervention

		Number	Percentage
Nutrition	Saturated fat sources (tropical plant oils, meat, dairy)	75	91.46%
	Dietary cholesterol sources (eggs, meat, dairy)	82	100%
	Food calories (Carb 4kcal, Protein 4kcal, Fat 9kcal)	72	87.80%
	Level of food processing (slightly processed, moderately processed, highly processed)	82	100%
	Plant-based diet for prevention and treatment of chronic diseases	82	100%
	Animal-based diet increases risk for chronic diseases	82	100%
	High salt intake increases risk of hypertension	79	96.34%
	High fat intake increases risk of prediabetes and diabetes type 2	67	81.71%

Physical activity	Regular moderate exercise (150 min/week) prevents and treats chronic diseases	82	100%
	Sedentary behavior (prolonged sitting, long screen time) increases risk of chronic diseases	82	100%
Stress	Stress induces risk of chronic diseases	80	97.56%
	Stress management strategies (meditation, exercise, yoga, social connections)	82	100%
Sleep	Inadequate sleep increases risk of chronic diseases	82	100%
	Ideal number of hours of sleep (7-9 hours)	76	92.68%

Table 7. Lifestyle practices – Post intervention

		Total number	Percentage
Dietary intake	Vegetarian	5	6.01%
	Omnivore	77	93.90%
	Mostly plant-based	70	90.91%
	Mostly animal-based	7	9.09%
Physical activity	Highly active (>300 min/week physical activity)	39	47.56%
	Active (150-299 min/week physical activity)	40	48.78%
	Low active (60-149 min/week physical activity)	3	3.66%
	Inactive (1-59 min/week physical activity)	0	0%

Risky substance use	Smoking	18	21.95%
	Alcohol	12	14.63%
Perceived Stress	Low perceived stress (1-13 PSS score)	48	58.54%
	Moderate perceived stress (14-26 PSS score)	25	30.49%
	High perceived stress (27-40 PSS score)	9	10.98%
Sleep	7-9 hours	63	76.83%
	< 7 hours	19	23.17%

Discussion

- ▶ Community-engaged prevention and wellness initiatives can protect and improve the health of certain groups and the community. But to enhance and sustain the implementation of these programs, the prevention of disease and promotion of healthy behaviors should be supported by policymakers.

Recommendation

- ▶ Health education and promotion initiatives can be institutionalized and backed up by research to show its feasibility and sustainability. Policymakers may consider the broad range of health policies in the local government level to explore opportunities to improve women's overall health.