Medford and Tufts Community Health (MATCH) Research Collaborative

Report presented by: Students of Course 182: Community Health Theory and Practice
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A project done in collaboration with the Tufts University
Department of Community Health and Medford partners
Introduction

During the 2015-2016 academic year, a group of 13 undergraduate students led by Dr. Shalini Tendulkar from the Tufts University Department of Community Health’s year-long Community Health Theory and Practice (CH 182) course partnered with organizations in Medford to conduct a community-based participatory research project. Medford is one of Tufts University’s host communities. Unlike traditional undergraduate courses, the students in this course function as a research team and students conceive and implement a year-long project in the community guided by their instructor and in partnership with community organizations. This year, the overarching goal for the course was to better understand the organizational perspectives in the Medford community regarding health and wellness needs, and to use this information to inform future collaboration between Tufts University and the Medford community.

Methods

The students and instructor began the course by examining existing sources of data including past community reports and other online resources to understand the demographics of Medford. This data review was also prompted by an interest in not reinventing or repeating information already known. Concurrently they began to explore potential partners in the Medford community.

The partners were identified through various sources speaking to growing connections between Tufts University and the Medford Community. In September 2015, Dale Bryan, Assistant Director of Peace & Justice Studies at Tufts University, invited the research team to attend a meeting of Medford Conversations, a group comprised of key stakeholders in Medford to facilitate discussion among the Medford Community about relevant issues. At the same time, a few members of the research team were enrolled in a Tufts University Experimental College course focused on communities surrounding Tufts University, and were able to gain access to a list of organizations and resources in Medford. Additional support was provided by Barbara Rubel, Director of Community Relations at Tufts University. During the first few months of the project, the students amassed a list of over 60 organizational partners serving the Medford Community. The student group also learned of a local coalition, Medford Health Matters, convening in the community on a monthly basis and began to attend these meetings to listen, learn and develop partnerships. Ultimately, the students determined that collaborating with Medford Health Matters was an appropriate next step given the alignment of their mission with that of the course and our department. Medford Health Matters aims to foster an environment or wellness and healthy lifestyles for all in Medford. They were formed in 1999 and since then have been working with nonprofit organizations in Medford, the hospitals in Medford and the city government to improve mental health, the wellbeing of children and adults, and to create an overall healthier environment in Medford. This connection resulted in a year-long informal partnership between our course and this organization. Over the past year, the students benefited greatly from the input of partners in this organization.

This early information gathering process led to the identification of two key goals for the course work this past year:

- To identify and continue to develop partnerships with community organizations and stakeholders in Medford.
To better understand the organizational landscape in Medford and learn about health needs and community resources from the perspective of organizational partners.

**Development of Interview Guide**
To support these project goals, the students first developed an interview guide. This process included an initial brainstorming session to identify key areas for exploration and then the development of more specific questions. The research team together decided on the form of a semi-structured interview format. From the initial brainstorming session, four members of the research team created a rough draft of the guide. The rough draft went through numerous rounds of editing and review before the final version was decided upon. This editing included incorporation of feedback from the Medford Health Matters board. The final interview guide consisted of 9 questions focused on understanding the connections between Medford organizations and other entities in the city, existing Medford resources, and key health and wellness priorities in Medford.

**Training Interviewers**
Before interviews began, one class period was dedicated to interview training by Dr. Shalini Tendulkar. Each member of the research team was given instruction on interview techniques and had time to practice using the developed interview guide.

**Interview implementation**
Prior to implementing the interviews, the students obtained approval from the Tufts University Institutional Review Board (IRB), an entity that approves, monitors and reviews any research involving human participants. The research team then divided into 6 groups based on schedule availability and received assignments to contact their interview participants via email.

Each interview was set up at local offices, coffee shops or on the Tufts University campus. During each interview, one person interviewed the partner while the other took notes. Interviews of stakeholders began in November, 2015 and continued through March, 2016. A total of 52 people and organizations were contacted during this time, and 28 interviews were completed during this time, ranging from about 30 minutes to 1 hour. As stakeholders recommended other Medford community members to speak to, these individuals were also contacted and added to our list of interviewees. After each interview was completed, the interviews were transcribed and the field notes were uploaded into a secure class folder.

**Development and Process of Coding Interviews**
After the transcription of all interviews, the research team identified common key themes that were found throughout the interviews and created a code book based on these themes. To begin the process of coding each transcribed interview, the research team split into three groups of four people. Each group read 8-10 interview transcripts and identified codes either by hand or through the comment function in Word. Each member of a group would code the same transcripts for reliability and then the individuals would meet to form a consensus coded transcript and discuss any discrepancies. As interviews were coded, new codes or amended codes were discussed amongst all research team members and the code book evolved into the final version. The codebook and all consensus coded transcripts were input in NVivo, a qualitative coding program, to then begin data analysis.

**Analysis of Data**
All coded transcripts were uploaded to NVivo to then be analyzed. Teams of 2-3 students looked

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through all interviews by theme to determine the frequency of different topics. The research team used various functions of NVivo to determine word frequency and the context of which certain needs were discussed. With the help of Nvivo, the research team was able to better understand the characteristics of people that were interviewed, information and demographics about the organizations they worked for and partnerships that were formed throughout the Medford community.

Results and Implications
After conducting 28 interviews, we found many commonalities and themes that exist among our participants.

Our main areas of interest include:
The participant’s individual perception of Medford health and wellness and their connection to Medford.
Information about each organization including who they serve, what health needs they address in the community, and their perceptions of community assets and resources.
The relationships among community organizations and the history of partnerships in Medford.
The utility of a needs assessment in the community and what organizations would like to learn from it.

Interviewees and Demographics
Interview participants represented a variety of organizational sectors in Medford. In particular, most participants worked for the city government, non-profit organizations, and education sectors. 16 of the 26 interviewees were also residents of the Medford community at the time of their interview.

The population of Medford has changed over the years from a predominantly blue-collar Italian and Irish population to a more racially diverse community comprised of growing Haitian and Brazilian populations. Interviewees noted the importance of West Medford as the oldest African American community in the country. The focus of many interviewee's health concerns centered on youth and seniors.

Health Concerns
When interview participants were asked what they saw as the most prominent health concerns in Medford are, most were concerned about mental health and substance abuse. Mental health was discussed in 15 of the 28 interviews conducted, with special attention given to mental health in youth regarding school-related stress, depression/anxiety and substance abuse. Interviewees also identified the lack of visibility of mental health resources and the stigma surrounding mental health as issues that need to be addressed. For substance abuse across populations, the opioid crisis was the most concerning substance related health issue, identified by 7 of 28 interviewees. Physical health was also a concern, as it was discussed by 16 of 28 interviewees, but mostly within the context of the need for Medford to become a more walkable city. Food security as a health concern, particularly for youth, was cited by 11 of 28 interviewees. Additionally, it was discussed in the context of food pantries as an attempt to resolve the issue. Some interviewees also mentioned lack of access to healthy food as more of an issue than access to food in general. Furthermore, health insurance concerns were the most frequently mentioned topic around the issue of access, especially for the elderly and lower class.

Social Determinants of Health
Interviewees also discussed the importance of factors such as race, gender, socioeconomic status, housing, and education as they contribute to an individual’s health. Following are the general themes
that occurred with the greatest frequency in participants’ answers.

**Education**
There is a need for more education around opioid and alcohol education. There is a desire for a change in the structure of education to become less standardized, to reduce stress, and improve the mental health of students.

**Population Disparities**
There are parts of the community struggling with hunger and food insecurity. The gentrification of Medford is causing difficulties for low-income residents. Elderly residents have unmet needs around mental health, food, and hoarding.

**Transportation/Pedestrian Accessibility**
Huge need to improve walkability and bikeability of the city. The elderly face transportation difficulties. The city has heavy traffic and pedestrian safety could be improved by updated walk signs.

**Environment**
The large amount of green space is a strength of the city. The river also has the potential to be a strength but there are needs around river-clean up and better access to the river.

**Housing**
Housing prices in Medford are rising and residents are being forced out of the community. There is not enough low-income housing.

**Diversity**
The city’s makeup has changed dramatically from largely Irish, Italian, and African American residents to new immigrants. The population diversity of the city is a strength but there is a need for better understanding of different cultures and diversity.

**Collaborations & Partnerships**
When asked about organizations’ connections to other organizations or institutions, organizational partners most frequently mentioned connections to other non-profit sector partners. Interview participants listed connections to the following four sectors the most: 23 mentioned connections to non-profits, 17 mentioned connections to Tufts University, 14 mentioned connections to schools, and 14 mentioned connections to city government. The research team also coded for every time an interview participant mentioned a connection to an individual, and interviewees most frequently mentioned individuals by name from the education sector. According to the interview participants, organizations in Medford have also collaborated or currently collaborate with the neighboring cities of Malden, Everett, Revere, Cambridge, Chelsea, and Somerville.

Interview participants also described the challenges that they as an individual or their organization faces in terms of connections. Lack of communication both among organizations and between organizations and community members stands out as a crucial theme among the listed challenges. Interviewees described how the process for accessing and sharing information is not very clear in Medford, especially when figuring out how to disseminate information to a particular section of the population or the entire community.
population. Forming relationships also poses a challenge, particularly when discussing the overlap, if any, of the missions and goals of organizations. In addition, some interview participants described limited communication between Tufts University and Medford, suggesting that more partnerships could be formed between the institution and city. Furthermore, even though relationships between organizations exist in Medford, these connections are not formalized. Medford does not have a centralized source or entity that keeps everyone in the community informed about community events. Lack of coordination and structure of networks leads to challenges with visibility of the networks of organizations that exist in Medford. Despite explaining the challenges that they have faced in regards to connections, interview participants also mentioned the importance of creating and maintaining continued relationships between organizational partners in Medford.

Perceptions of Medford: Community Change & Community Strengths

When asked about their perceptions on changes in Medford, several interviewees discussed the gentrification of Medford and the new populations of people moving into the city. There is a much younger population moving into the city, and because of expected changes with the MBTA Green Line and the possible casino being built on the border of Medford, this has made it increasingly challenging for middle-income residents to stay here. Many interviewees saw the environment of Medford including the Fells, the Brooks Estate, and the many green spaces as a strong asset to the city. However, several others commented that these green spaces and the environment need to be taken better care of and that the city needs to improve accessibility of them for all Medford residents. Walkability and bikeability were also very important to the interviewees and they hoped that in the future there would be safer roads, especially for the elderly and the youth of Medford.

With the transition of Mayor Burke taking over in January after 28 years of Mayor McGlynn in office, various community members commented that this is an interesting time in the City and one that has brought a lot of hope to the city, as they see a new motivation in the community to create change.

The 28 interviewees also identified many strengths of the Medford community with the most emphasized strength being the connection that individual community members have to one another and how tight-knit the community is. Many interviewees identified the pride and participation in the community as another strength of Medford, as well as the diversity of its community members.

Needs Assessment

When asked about the usefulness of a needs assessment as a future product for our course to create, 15 different organizations that were interviewed though it would be very helpful, while only 1 organization disagreed. Most organizations thought that a needs assessment could help identify ideas and strengthen action plans to continue to improve health and wellness initiatives in Medford, although there was a concern about the sustainability of needs assessment as the data can become irrelevant once a certain period of time passes.

Strategies and Solutions

When asked about strategies and solutions that organizations have seen or are implementing to address health and wellness concerns in the community, there were various initiatives mentioned that included city-led, organization-led, and community-based solutions. Of the city-led strategies and solutions that were discussed, many focused on educating the community and were in collaboration with other organizations. These were created in order to address a need or concern in the community and were community driven. For example, committees and coalitions have been established in order to address concerns or needs.
in a community. Some of these include the Human Rights Commission, Mystic Valley Public Health Coalition, and Medford Health Matters. The education portion of these solutions are especially vital, such as the bathroom education about active users to small business owners to address the opioid crisis, and also creating diversity awareness because of the changing demographic makeup of the community to create inclusivity. The purpose of these initiatives are to promote empowerment, inclusion, skill-building, and resilience in the community. Some stakeholders note that in the future, they would like to see a Community Resource Guide distributed to the community, City Hall incentivizing good choices (such as nutrition), more funding of local programs and activities, and creating a community garden for every neighborhood. Other solutions and strategies that were mentioned were organization and community-based.

Community-based and organization-led initiatives all target a specific concern or need in the community. One of the concerns that was frequently mentioned was food insecurity in the community. The Unitarian Church has a prominent food pantry, and the farmer’s market accepts food stamps now. However, stakeholders have mentioned how there is a continuing need for more resources, especially since many people do not know that this is a prominent issue in the community. Another initiative was focusing on working with other organizations in the community. Medford Conversations was mentioned because they are trying to bring a diverse set of stakeholders in the same room to discuss the ongoing issues and concerns in the community and how they can all collaborate in order to address them. They are “trying to develop a platform and roll out a methodology for the community to use especially, ideally, a very diverse section of our community who don’t already know each other, talking about challenge things that are happening- the premise being Medford is in the midst of undergoing a number of different changes – generational, demographic, economic, those kinds of things.” Other organizations focused on the elderly, mental health, the Green Line extension, and walkability.

Other Communities

When interviewees were asked to compare Medford to surrounding communities, the responses provided some additional insight. One similarity between Medford and its neighboring communities is that they are all incredibly diverse in terms of ethnicity, religion, socioeconomic status, and age groups. Medford and other communities are also currently experiencing an increase in housing prices, which is creating a larger gap in socioeconomic status.

Besides population diversity however, the similarities between Medford and the surrounding communities are few. When comparing Medford and Somerville, it was emphasized by interviewees that Somerville had a lot more organizations and resources for the community. For example, Somerville City hall has an entire department devoted to food security. On the other hand, Medford has organizations that work to solve this problem, but these organizations are also working to address other health concerns. In Lowell there are many community organizations that also focus on specific health disparities, but these organizations also work with specific ethnic communities. For example, there’s an organization in Lowell that addresses the needs of the local Cambodian community. Similar to Somerville, this allows specific groups to focus on minority health needs, which is more effective when attempting to solve health concerns. Although Medford, Malden, and Everett are all part of a tri-cap organization group, now called ABCD, many of these organizations are located in Malden. This is inconvenient for Medford residents who need these specific services because they have to travel to another city. Also, the increase in housing prices are driving families out of Medford and they’re locating to Everett because of the closer resources and more affordable housing. These differences help explain some of Medford’s health concerns and offer some perspective to the governmental and organizational structure of Medford.
Limitations

There were various limitations that the research team encountered throughout the process of conducting this research. One of the foremost limitations was the time that the research team as a class had to dedicate to this research. Community based participatory research (CBPR) takes time in terms of building relationships. Because the course is only 8 months long, this is just the beginning of what could and should become a long term partnership between Tufts University and Medford. The class only met together once per week for between 50 minutes and 75 minutes, and this also limited the ability of the research team to achieve their goals. As a result of this lack of time, the research team was limited in the amount of people that they could interview and include in their research. Difficulty reaching to interview participants also prevented the team from interviewing everyone on their list. Lastly, throughout the past several months the scope of the interviews were also limited as the majority of the participants were involved in either the non-profit or government sectors, with a lack of participants from health care and faith-based organizations in the community. As a result of this, the research team can not be sure that they had an accurate sample of the entirety of Medford’s community organizations.

Reflections

As the research team reflects on this year of doing undergraduate research, they have identified various lessons and ideas that came out of this CBPR project and acknowledge that it is rare for undergraduates to have the opportunity to participate in this type of research. These are the lessons they found most valuable over the past year:

1. Forming relationships takes time and effort, but it is worth the investment.
2. Researchers need to be aware of their place and who they represent in navigating communities.
3. Reconciling student and community partner needs can be challenging.
4. Conducting authentic, engaged research is hard, particularly when first learning about a community.
5. Having a community champion is important
6. It is important to invest in team building activities.

To work in partnerships with a community means to work together with community members on a project. This research project was community-based as opposed to community led, meaning that it was being conducted within the community of Medford, but not led by the members of that community. As a result, the research team, as outsiders, had to take the extra time to learn about the community they were working with, in order to form strong, trusting relationships for the project to move forward. As a research team made up of undergraduate university students, the research team had to balance fulfilling the requirements of a college course, while simultaneously trying to conduct impactful work for the community. The researchers have the knowledge and skills to help with a task that the community needs, but the community members have the connections and understanding of what the community needs and wants, and both sets of insights are valuable. In order to bring the researchers and community members together, having an individual or organization to bridge the gap between these two groups is crucial. Without the support of community members such as Barbara Rubel, the research team would not have been as successful in reaching the Medford Community. Additionally, as a group of 13 students that had never all worked together in the past, the research team found that the project and their time together became much more open and successful as they began to spend more time together and work together inside and outside of the research environment.
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