

Abstract

The Chaparral Community Health Council will establish a youth health council utilizing area youth ages 15 to 18. These youth will be trained with the objective of becoming peer educators, conducting focus groups of pre-adolescents age 9 and 10, and utilizing the information gathered to develop educational materials to help implement changes in youth risk behaviors in the area of violence, pregnancy, and substance abuse, and to promote nutrition, and dental health. The project will target youth at risk between the ages of 9 to 18 with specific emphasis on preadolescent children age 9 and 10. The peer educators will conduct three focus groups, a minimum of ten presentations and develop three disease prevention and health promotion materials targeting preadolescents. Peer educators will be provided a small stipend for their participation.

Con Alma Health Foundation Grant Application

II. Background

Chaparral is a large, unincorporated, rural *colonia* located 35 miles southeast of Las Cruces, NM, on the Texas border, and is situated in the two counties of Doña Ana and Otero. *Colonias*, the Spanish word for *neighborhoods*, are rural, unincorporated communities located within 150 miles of the U.S.-Mexican border that frequently lack local governance, adequate infrastructure, and basic services. With a per capita income of \$10,033, Chaparral's high rate of poverty makes it difficult for residents to help pay for paved roads, public transportation, wastewater treatment systems, adequate housing, street lighting, and other services. Nearly 65% of Chaparral's "official" 2000 U. S. Census population of 6,117 is of Hispanic/Latino origin. Anecdotal evidence from the Colquitt Water Company of Chaparral estimates the "unofficial" population is actually 15,000 to 20,000 due to the community's undocumented residents. Chaparral's 2000 official U. S. Census population count of 6,117 represents a 106% increase from the 1990 official population count of 2,962, with the largest population growth of any municipality in southern New Mexico.

New Mexico has the 5th highest teen birth rate in the nation at 62.3% for the year 2002. While our rate is declining, it is occurring more slowly than that of the nation as a whole. By comparison the Dona Ana County teen birth rate has climbed from 66.4% in 1997 to 77.1% in 2002, according to New Mexico Vital Records and Health Statistics. A nurse for the Gadsden School District, which serves Chaparral, reported 20 pregnant or parenting girls in 2004. According to the New Mexico Teen Pregnancy Coalition the cost of teen childbearing to New Mexico Taxpayers is over half a billion dollars per year and nationwide, teen childbearing costs taxpayers over \$38 billion per year.

The Chaparral Substation of the Doña Ana County Sheriff's Department reports an increase in their average number of monthly domestic disturbances from 18.25 referrals per month January-December 2001 to 21.4 referrals per month from January-October 2002. This represents a 17% increase from the previous year in the 2002 referrals *prior* to the upcoming Thanksgiving through New Year's Eve peak domestic violence season. Sheriff's Department personnel estimates that for each *reported* domestic violence incident to their office, at least five more similar incidents go *unreported*.

According to data from the DWI Citation Tracking file of the NM Traffic Safety Bureau, the most prominent DWI arrests and convictions in 2000 were attributed to low-income Hispanic male offenders earning \$10,000 or less, ages 25 to 36, with a high school education or less. Anecdotal evidence from the Doña Ana County Sheriff's Office and Doña Ana County Health and Human Services Office indicates that this same Latino male population is most likely to be the batterers in domestic violence situations. Official 2000 U. S. Census demographics indicate that a large percentage of Doña Ana County's DWI offenders/ domestic violence batterers are likely to reside in Chaparral because we fit the above described profile.

III. Program Description

The program will establish a *concilio juvenil de salud* (youth health council); utilizing area youth ages 15 to 18. These youth will be trained with the objective of becoming peer educators, conducting focus groups of pre-adolescents age 9 and 10, and utilizing the information gathered to develop educational materials to help implement changes in youth risk behaviors in the area of violence, pregnancy, and substance abuse, and to promote nutrition, and dental health.

The Chaparral Community Health Council will hire a coordinator to develop and oversee the project. The coordinator will begin the process of promoting health care, disease prevention, and leadership building capacity and will engage in community education, reach special needs audiences, and present health education issues to youth and the community at large. The coordinator will establish the *concilio juvenil de salud* and facilitate education and training programs where the *concilio* will be trained in community

organization and health promotion, therefore, becoming, in effect, peer health educators. (A small stipend and consumables will be provided to the youth as incentives to participate in the project.) These peer health educators will initiate a comprehensive youth education effort to inform and orient 9 to 10 year olds in reference to healthy lifestyles and to motivate youth to take steps to reduce substance abuse, teen pregnancy, and violence. The project will be geared to attract youth and capture their interests through their involvement in cultural activities, production of the visual arts, print media, art, and music. The coordinator will train the *concilio* to produce health promotion and disease prevention materials and will provide the technical assistance for youth who are interested in producing video documentaries, newsletters, poetry, printed T-shirts and/or other material concerning and or related to health promotion and disease prevention. The material developed will be produced by youth, for youth, the project will make all efforts to document the language, style and current mode and/or trend used by youth. The methods used will be geared to promote ownership and empower the youth in the community by teaching them usable skills, such as team building, decision making, problem solving, reasoning, negotiating, budgeting, time management, evaluating and synthesizing information, and leadership building. Prevention materials will be marketed to help defray costs and promote self-sufficiency of the project. The primary aspect of the project will be to provide the *concilio* with training as peer educators (to preadolescent children age 10 or younger) on disease prevention, substance abuse, pregnancy, anti-violence, nutrition and dental health.

IV. Target Population

The project will target youth at risk between the ages of 9 to 18 with specific emphasis on preadolescent children age 9 and 10. The intent of the project for the first year is to develop effective educational materials geared at preadolescents to be used to combat teen pregnancy, violence, substance abuse, and to promote nutrition and dental health. It is expected that the first year will have little impact on the-afore mentioned concerns but will begin to raise self-esteem and pave the way to a healthier community. During the following years the project will utilize the peer educators and materials produced, for the early education of adolescents, as a warning of the dangers of at-risk behaviors.

V. Outcomes

Success will be measured through the completion of each objective

Hire a project coordinator	Within the first month
Recruit 15 youth ages 15 to 18 to establish the <i>Concilio Juvenil de Salud</i>	Within the first two months
Conduct a minimum of three focus groups with adolescents so as to determine tools that can be utilized in health promotion and disease prevention with their peers.	Four months after initiation of the project
Peer educators will conduct a minimum of ten presentations to preadolescents at area schools, clubs or other places where nine and ten year olds may congregate.	During the last six months of the first year.
Develop a minimum of three media materials geared toward the promotion of health and disease prevention in mental health, violence, pregnancy, substance abuse, nutrition or dental health targeting preadolescent youth.	By the end of the first year.

VI. Collaborators

- Kalpulli Tlalteca Inc. A non profit organization of El Paso Texas will provide on loan for the first year; cameras (1 35mm & 1 Panasonic AG Prosumer Camcorder) 1 computer, and laser printer for desk top publishing and internet access, and 50 hrs of digital video editing time and the loan of six color silk-screen printer and textile dryer essential for professional t-shirt printing.
- New Mexico Teen Pregnancy Coalition will provide technical assistance concerning teen pregnancy including two presentations on prevention and will supply up to date information on statistics and updates on prevention efforts.
- Gadsden Independent School District will provide access to it's students at Chaparral Middle School and Gadsden High School.
- Gadsden High School will allow recruitment of students for participation in the project.
- Chaparral Middle School will allow three on-campus focus groups of adolescent students with parental permission.
- Dona Ana County Human Resources Department will provide the use of buildings, recreation area, and or multi-purpose center in the Chaparral Area to accommodate the *Concilio Juvenil de Salud*.
- Substance Abuse Prevention Services
- Nutrition Presentations
- Dental Presentations
- Violence Prevention

The success of the project will open the doors to several opportunities including foundation grants, the establishment of small non profit businesses such as a silk screening (t-shirt printing) business supported through the marketing of materials to other non-profit organizations in both the El Paso, Las Cruces and Alamogordo area.