

The Indiana Poison Center: Knowledge, Experience and Attitudes of the Hispanic Community

Part 1: Focus Group and Key Interview Analyses

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Prepared by the

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TABLE OF CONTENTS

ACKNOWLEDGEMENTS	5
INTRODUCTION	7
Study Purpose	8
Background	9
METHODOLOGY	12
Setting and Participants	14
Focus Groups Methods	14
Key Interview Administration	16
RESULTS-Focus Groups	18
Specific Summary Statements from the Focus Group Analysis	18
RESULTS-Key Informant Interviews	23
Specific Summary Statements from the Key Informant Interview Analysis	23
CONCLUSIONS	27
REFERENCES	29
ATTACHMENTS	30
Attachment 1 Focus Group Introductory Scripts: English and Spanish Versions	30
Attachment 2 Focus Group Questions: English and Spanish Versions	32
Attachment 3 Key Informant Introductory Script: English Versions	34
Attachment 4 Key Informant Interview Questions: English Versions	35
APPENDIXES	37
Appendix 1 – Focus Group Participant Responses	37
<i>Question 1: When asked about what do you think when you hear the word</i> <i>“poison”? What other words do you use for “poison”?</i>	37

<i>Question 2: The participants were asked to describe what kinds of things can poison a person?</i>	38
<i>Question 3: How do you decide if the situation is an intoxication or poisoning?</i>	40
<i>Question 4: How serious do you think it is if someone is poisoned?</i>	41
<i>Question 5: What would you do if you, a friend, or a family member were poisoned?</i>	41
<i>Question 6: Would you use home remedies if someone in your home were poisoned? What home remedies would you use?</i>	43
<i>Question 7: Who would you ask for help if someone was poisoned?</i>	44
<i>Question 8: How long would you wait before you asked someone to help? How would you decide when to call for help?.....</i>	45
<i>Question 9: Is there anything you do at home to prevent poisoning?.....</i>	45
<i>Question 10: Has anyone ever heard of a POISON CENTER? How did you hear about it?</i>	46
<i>Question 11: What does a poison center do?</i>	47
<i>Question 12: When should someone call the Poison Center?.....</i>	48
<i>Question 13: Are there times or situations when you think it might be better NOT to call the Poison Center? What are some of those times or situations?</i>	49
<i>Question 14: Have you ever called a Poison Center, or do you know anyone who has? What happened when you or they called the Poison Center?</i>	50
<i>Question 15: How do you feel about calling a Poison Center for help?</i>	51
<i>Question 16: How important do you think it is for families to know about the Poison Center?.....</i>	52
<i>Question 17: What would be some good ways to help people learn about Poison Centers?.....</i>	53
<i>Question 18: Do you have a telephone in your home? If not, do you have neighbors or anyone nearby with a telephone that you can use?.....</i>	54
<i>Question 19: Do you keep a list of important phone numbers in your home? Where do you keep the numbers?</i>	55
<i>Question 20: What would help you to remember the number to call for help if someone is poisoned?</i>	56
Appendix 2 – Key Informant Responses.....	57
<i>1. What is your profession?</i>	57
<i>2. How many years have you been providing professional services?.....</i>	58
<i>3. What is your connection to the Hispanic/Latino community?</i>	59

<i>4. Do you think that Hispanics/Latinos, in general, are just as knowledgeable about health services that are available to them as others in the community?</i>	<i>60</i>
<i>5. Do you think that Hispanics/Latinos, in general, utilize health services that are available to them less or more than others in the community</i>	<i>63</i>
<i>6. Where do you think Hispanics/Latinos generally get information about available health services and how to access them?</i>	<i>66</i>
<i>7. What role does the Hispanic/Latino culture play in their decisions to seek medical care services?</i>	<i>68</i>
<i>8. Before today, were you aware of the Indiana Poison Center and the services it provides?</i>	<i>71</i>
<i>9. What percent of Hispanics/Latinos in this county, do you think, are aware of the Indiana Poison Center?</i>	<i>73</i>
<i>10. We have found that Hispanics/Latinos less frequently utilize the Poison Center compared to non-Hispanics/Latinos. What possible explanations for this discrepancy come to your mind?</i>	<i>75</i>
<i>11. (If not listed in response to #10) Do you think Hispanics/Latinos are less aware of the Indiana Poison Center?</i>	<i>77</i>
<i>12. (If not listed in response to #11) Do you think Hispanics/Latinos are less comfortable contacting the Poison Center, if they need to use it and are aware of it? ..</i>	<i>80</i>
<i>13. If a member of a Hispanic/Latino family was poisoned, who would they most likely turn to for help?</i>	<i>82</i>
<i>14. What advice do you have for us to help the Hispanic/Latino community become more aware of the Indiana Poison Center and help them feel more comfortable contacting the Poison Center when they need it?</i>	<i>84</i>

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INTRODUCTION

Data collected by the Indiana Poison Center (IPC) consistently show that most poisonings are unintentional and could possibly be prevented if consumers were more aware of poison prevention measures. It is much easier and cost effective to *prevent* poisoning than to treat a person who has been poisoned. The majority of poisonings involving children seen in hospital emergency departments and physicians' offices could be safely managed at home under the direction of poison center specialists.

The IPC provides continuing statewide poison prevention education for the general public with the goal of decreasing the morbidity and mortality of poison exposures. In addition, specialists at the IPC provide immediate telephone advice to individuals who call 1-800-222-1222. Specially trained nurses and pharmacists provide advice for all kinds of poison exposures, twenty-four hours a day, seven days a week. The specialists also answer questions about poison prevention and how to make homes safer from unintentional poisoning. All services are free and confidential.

Previous studies conducted by the Poison Centers have indicated that more education is needed to increase public awareness of the services offered by poison centers. It is known that the majority of poisonings involving children seen in hospital emergency departments and physicians' offices could have been safely managed at home under the direction of poison center specialists. This unnecessary utilization of healthcare services results in a considerable cost to the system that could be avoided if parents simply called a poison center. Unnecessary utilization of emergency healthcare services results in a considerable cost to the system that could be avoided if parents simply called the poison center. Every dollar spent on a Poison Center saves at least \$6.50 in

unnecessary health care expenses. Poison Centers eliminate unnecessary physician office visits, hospital admissions, lab testing and ambulance runs. A very substantial cost savings is realized for every case of long-term hemodialysis, neurological impairment, or disability, which is prevented.

Study Purpose

In an effort to understand why Hispanic consumers choose not to use the services of a poison center, the Indiana Minority Health Coalition, under contract with IPC, conducted this study to gather individual's knowledge, experience and attitudes about poison centers in general and IPC specifically. This consumer input will be valuable to the IPC's administrators as they plan educational and outreach programs to promote use of its services among the Hispanic community. The IMHC focus group and key interview activity was the first of three goals undertaken by the IPC in a project supported by The Clarian Health Values Fund.

The three project goals were to:

- 1) Determine the attitudes and knowledge about poison prevention and treatment within the Hispanic population and identify perceived or real barriers limiting access to the Poison Center,
- 2) Develop linguistically and culturally appropriate educational materials for Hispanic consumers; and,
- 3) Conduct workshops to train members of the Hispanic community to teach poison prevention and treatment strategies to their peers.

This report presents the results of Part 1 - the Focus Group and Key Interview analyses.

Background

A study conducted in Texas found that 46 percent of children evaluated in an urban pediatric emergency center for unintentional poisoning were brought by a caretaker who had not first called the poison center for advice (Kelly et al, 1997, Kelly et al., 2002). The study found that many parents did not use poison center services for a variety of reasons, including not being aware of the services provided, not having access to the poison center, or simply preferring to rely on the more costly traditional providers. This information was used by the administrators of the Texas poison control center as they developed strategies to increase the utilization of their poison center services. After discussing the value of the Texas study results with Nancy Kelly, M.D., the decision was made to use the focus group script from the Texas study as the foundation of the script for the first IPC Underutilization Study conducted by Bowen Research Center investigators in 2003 to identify knowledge, experience and access barriers of the residents of six Indiana counties with less than expected calls to the IPC (Zollinger, Saywell, Muegge, 2003).

A challenge often faced by poison centers is how to best provide services to people who do not speak functional English, as studies have shown that recent immigrants and people who speak English poorly underutilize poison centers (Shepherd et al. 2004, Vassiley et al. 2003). Clark found in San Diego, California that poison center penetration values were significantly lower in zip codes with large numbers of Latino residents (Clark et al. 2002). In a similar study in Texas, Forrester found that counties

with a higher proportion of African-American and Hispanic populations, a lower population density, lower household median incomes, and a higher percentage of the population who spoke a language other than English at home and who spoke English less than “very well” experienced lower poison center utilization rates. Gender, age and education level were not related to utilization rates (Forrester 2005). Clearly, awareness programs and educational efforts need to be directed at this sub-population. Kelly evaluated the effectiveness of a video intervention aimed at improving the intention of using a poison control center and found that the videotape intervention was highly effective in changing knowledge, attitudes, behaviors, and behavioral intentions within low-income and Spanish speaking families (Kelly et al. 2003). Albertson found that a directed media campaign that included the use of Spanish language material and radio spots increased the calls made to poison control centers, particularly in the Los Angeles basin area (Albertson et al. 2004).

Indiana is becoming more racially diverse; based on U.S. Census data, 3.5 percent of the state’s residents identify themselves as Hispanic, up from 1.8 percent in 1990, which represents a 117.2 percent increase. Between 1990 and 2000, Indiana’s Hispanic population increased from 99,000 to 215,000. Programming geared toward Spanish-speaking families and individuals is needed; simply translating information into Spanish is not enough. Two-thirds of Hispanic immigrants have less than a high school education, which means that many cannot read their native language. Outreach and promotion of poison center services to non-English speaking consumers in Indiana has been extremely limited. Although the Poison Center has the capability to assist non-English speaking consumers, call monitoring shows that this population does not utilize the services of the

center. To develop effective strategies for this target population, input is needed from consumers of Hispanic descent. Participation of Hispanics can help determine the extent of their awareness of, prior experience with, and perceived barriers they believe they or others may encounter in attempting to access the IPC. This need formed the basis for the 2006 Hispanic community focus group and key interview study.

METHODOLOGY

The IPC project consists of three activities to help them more effectively address the needs of the Hispanic population in Indiana.

In Part 1, focus groups comprised of individuals of Hispanic descent were conducted in the six Indiana counties (Elkhart County, Lake, La Porte, Marion, St. Joseph County and Tippecanoe) that have the greatest number of Hispanic residents along with an established Indiana Minority Health Coalition local affiliate office. Investigators from the Bowen Research Center, as part of their consulting contract with IMHC, developed a set of targeted questions to elicit input from participants regarding their awareness of the services offered by the IPC. A copy of the questionnaire and the script are included in the Appendix. Spanish speaking staff/consultants of IMHC translated the survey instrument from English into Spanish. Trained focus group staff presenters from the six IMHC local affiliates conducted the focus groups during October 2005 to January 2006 and recorded and transcribed the conversation of the groups. Key informant interviews were also conducted. A bilingual person, in most instances, was identified by the participating local coalitions interviewed a key leader in their community, recorded and transcribed the key informant interviewee responses and translated participant responses into English where necessary. The results of Part 1 are presented in this report.

Part 2 of the project involves establishing a Working Task Force Committee consisting of representatives from Indiana's Hispanic community and coordinated by the IPC educator. This group will be responsible for developing culturally appropriate outreach strategies and educational materials using information gathered from the focus groups and other national sources. The IPC Coordinator for Poison Prevention and

Bowen Research Center staff will assist the Task force in this effort. The results of this activity will be presented in a separate report in the spring of 2006.

Part 3 of the project will use the educational materials developed by the Task Force and affiliated researchers in Part 2 to provide instructor-training workshops to community organizations working directly with the Hispanic population. These workshops will enable community groups to reach more Spanish speaking families and individuals with the poison prevention message in a cost effective manner.

The focus groups and key informant interviews in Part 1 were used to help identify perceptions, experiences, and attitudes about poison center issues.

Focus groups are informal, structured interview sessions in which participants are asked to discuss their thoughts on specific issues through guiding questions. The advantage of using focus group methods is that they lead to open and spontaneous group interaction, which provides a richer set of information than standard survey methods. It should be noted that this is a qualitative data collection method and responses cannot be quantified to make inferences to the general population in the same way that survey data can be used. The goal of the focus groups in this study was to obtain representative community input to better understand the factors behind the underutilization of the IPC.

Key informant interviews, on the other hand, are generally one-on-one interviews with key community leaders who are selected because of their knowledge and awareness of the subject under investigation. A series of pre-established questions form the basis of the interview; each person interviewed is subject to the same questions. The responses are then summarized.

Setting and Participants

Six counties were selected for this study: Elkhart County, Lake, La Porte, Marion, St. Joseph County, and Tippecanoe. These counties had the greatest concentration of Hispanics and were located in an area with an existing local minority health coalition affiliate office.

The Focus Group participants were a convenience sample identified and recruited by the contact person. Most of those who were invited to the focus groups attended. All participants were provided with refreshments and given a \$10 Wal-Mart gift certificate.

The Key Informant Community Leaders interviewed were selected by the local minority health coalition staff as individuals who had knowledge of and experience working with the community's Hispanic population.

Focus Groups Methods

For this study, trained moderators from the local minority health coalition affiliates ensured that the discussion remained focused on the topic, while encouraging input from all of the participants. Each session also included a recorder/assistant who ensured that the participants' comments were well documented and to ensure that all of the arrangements were adequate to allow the meeting to proceed smoothly. All six focus group sessions were also tape recorded as a means of supplementing the notes taken by the recorder.

The sessions were conducted in a manner that minimized group pressure, ensured anonymity and encouraged the participants to discuss the questions spontaneously. The session moderators listened attentively to the participants and were careful not to influence the direction of respondent's comments. The moderators asked for clarification

of both verbal and non-verbal responses when appropriate and often asked the participants to summarize their comments.

The focus group script was based on the script used in a similar study in Texas as well as previous scripts used by the Bowen Research Center and the Indiana Minority Health Coalition researchers for other focus groups. At the beginning of each session, the moderator welcomed the participants and spoke briefly about why they were invited and what information was being sought. The script was translated into Spanish by staff/consultants at the Indiana Minority Health Coalition. The moderators were provided with both the Spanish and English language versions of the script. The English and Spanish language versions of the introductory script are presented as Attachment 1.

The focus group moderator used a standardized list of probes to gather information regarding parents' attitudes and beliefs regarding unintentional childhood poisoning, including perceived seriousness and susceptibility, benefits of using a poison center and self-efficacy issues. The probes were translated into Spanish and back translated for accuracy by staff at the Indiana Minority Health Coalition. The moderators were provided with both the Spanish and English language versions of the questions. The English and Spanish language versions of the questions used are presented in Attachment 2. The 20 questions used in this study were categorized into two areas. The first set of questions (1-9) was designed to determine the individual's knowledge and beliefs about potential poisons and the actions they take to prevent poisonings in their homes. The second set of questions (10-20) addressed the individual's awareness of the IPC and their past experiences with a poison center.

The focus group audiotapes were transcribed by local coalition staff and then translated to the English language. To summarize the results of the focus group responses, discussion items and specific comments were organized by question, by site. The transcripts and notes taken by the recorder at each session were compared and common themes were noted from each of the sessions. The purpose of examining the common themes was to identify areas of concern and suggestions that might strike a common chord in a broader cross section of the community that underutilize the poison center services. Examining the comments made at specific focus groups provided indicators of the level of awareness of the poison center and utilization patterns. The results presented in this report were based on the major themes noted in the responses for each specific question. Where applicable and noted, direct quotations were used to emphasize major points raised in the sessions.

Key Interview Administration

Trained interviewers from local minority health coalitions were used to interview the key community leaders who were identified by the coalition staff. The interviews lasted between one hour and one and one-half hours; the interviewers recorded the responses and prepared the overall outline of comments found in this report.

At the beginning of each session, the interviewer used a script to introduce themselves to the key interview participants and speak briefly about why they were contacted and what information was being sought. The interviewers were provided with the English language version of the script. The English language version of the introductory script is presented as Attachment 3.

The interviews used a standardized list of probes to gather information regarding Hispanics' knowledge about health services available in the community, how often they used those services, and where they received information about services and how to access them. They were asked about the role of the Hispanic/Latino culture in deciding to seek medical care for accidental poisoning and their awareness of the IPC services. The key informants were also asked to provide their opinion why individuals do not seek assistance from the Poison Center and what might be done to improve their utilization. The interviewers were provided with the English language version of the questions. The 14 questions that guided the key informant interview are located in Attachment 4.

RESULTS-FOCUS GROUPS

Six focus groups were conducted with a total of 62 participants: Elkhart 12 (11 female), Lake 7 (6 female), La Porte 12 (8 female), Madison 11 (4 female), Marion 14 (8 female) and St Joseph 6 (6 female). The average age of the participants was 36.8: Elkhart 30.5, Lake 40.0, La Porte 39.0, Madison 33.7, Marion 35.3, and St. Joseph 50.6.

Appendix 1 lists the focus group participants' comments for each of the sites by question. The comments are presented as the participants made them. Some perceptions were incorrect or did not agree with current recommendations. At the end of the focus group sessions, the moderator corrected the misconceptions voiced during the session.

Specific Summary Statements from the Focus Group Analysis

- Clearly the Hispanic participants knew that poisoning can be very serious and potentially fatal for individuals. Other terms that the Hispanics use for the Spanish word for "poison," were translated as "death," "danger," "overdose," and "intoxication."
- The Hispanic participants understood the Spanish term for "poison" to refer to the traditional items that non-Hispanics would normally list such as cleaning chemicals, paint, insecticides, pesticides, plants, and gasoline. However, the Hispanics also listed medication misuse and poison gases which non-Hispanics usually might not list. A few mentioned that foods, such as shrimp and peanut butter were also sources of potential poisoning via an allergic reaction.
- Participants could recite signs and symptoms of a person who has ingested a poisonous substance. Difficulty breathing, convulsions, becoming drowsy or sleepy, foaming at the mouth, changes in skin color and burning sensations, skin

inflammation, crying, vomiting, foaming at the mouth or reading the label on a bottle were commonly listed. Vomiting was the most frequently mentioned sign of poisoning.

- There was general agreement that it was important to ask for help if someone was poisoned.
- The majority of participants responded that they would call 911, their hospital or their physician in the event that they, a friend, or a family member were poisoned. Only two participants in one of the sessions offered the IPC as an option. Other sources of help included emergency rooms, hospitals, pharmacists and neighbors. Several mentioned a poison center as a source to get help.
- Most participants recognized the need for quick treatment in the event of a poisoning.
- Frequently the participants indicated that it is important to read the labels on the product that was ingested to find out what should be done.
- Interestingly in one session, there was common agreement that they would NOT use home remedies to treat a poisoned person, but then they offered several examples of home remedies that could be used.
- Routinely the participants suggested they would use home remedies if someone in their home were poisoned. The home remedies suggested were:
 - Milk (clearly the most common)
 - Lemon or orange juice
 - Cooking oil
 - Teas
 - Water
 - Combinations of the above

- Participants provided many suggestions of things that one can do to prevent an accidental poisoning. Most commonly the suggestions included home-proofing and keeping things out of reach of children. One suggested teaching children about poisoning. Several indicated that they had not thought about how to prevent poisoning.
- The responses were mixed when asked if they had heard of a poison center. In some sessions most or all indicated that they had not heard of poison centers. In some of the other sessions, some had heard of a poison center.
- Many, even in the groups where no one had heard of poison centers, had a general idea of the services provided by a poison center – mostly to help poison victims and families or provide information.
- Once the groups started discussing poison centers, most of the participants indicated that they should call the poison center right away if someone had been poisoned. Only one participant indicated that you could call the poison center to get information about how to prevent poisoning.
- Most all indicated they could not think of a time when it would be better NOT to call the poison center; however, some would call 911 first if the person's condition was serious.
- The majority of the participants had never called a poison control center nor knew anyone who had called a poison center. Only one called a poison center to get information about a product.

- Most of the participants feel comfortable about calling a poison center if needed. Several expressed appreciation for the information and encouraged efforts to increase knowledge about poison center services.
- An overwhelming number of participants felt that it is very important for families to know about the Poison Center. One indicated that they will tell everyone they know.
- When participants were asked to suggest some good ways to educate people about the poison center, the suggestions included:
 - Have a Spanish speaking person answer the phone
 - Make announce about the Indiana Poison Center on the radio in Spanish
 - Put an ad in the Spanish newspaper
 - Provide stickers with the phone number
 - Give information about the Poison Center to schools/day care centers,
 - Flyers going to the homes,
 - Magnets for the refrigerator
 - Talk to people by holding meetings at schools, churches or other places
 - Have health care providers and community organizations to provide information
- There was general agreement that Hispanics have phones in their home or cell phones.
- Most participants keep a list of important phone numbers near their phone. Several put a magnet or a sticker on their refrigerator of important phone numbers.
- Several suggestions were made to help people find the phone number for the poison center when they need it. Suggestions included:
 - Keep it on the refrigerator

- Program it into the memory of the phone
- Keep it on a card
- Put it with the phone numbers for the police, fire department, hospital and doctor
- Make it short like the 3 digits for 911
- Associate it with a song
- Have only one number for both English and Spanish speakers

Through out the focus group sessions occasional comments were made about the Hispanic culture. The comments are helpful to better understand the factors that influence the decisions that Hispanics make relative to poisoning, such as:

- In Mexico, little information is available about poisoning.
- In Mexico, families turn on their stoves and sleep by them to stay warm.
- In the U.S., they don't have access to the teas that can be used to treat individuals who are poisoned.

In addition, comments were made that indicate Hispanics feel they are discriminated against when they call for help.

- If callers are Latino, the police won't pay attention.
- If you speak in Spanish, then it's like you don't matter.
- In one group, several stories were told about waiting in emergency rooms for hours without being seen because they were Hispanics.

RESULTS-KEY INFORMANT INTERVIEWS

Nineteen community leaders and representatives were selected for the personal one-on-one interviews. Three key informant interviews were conducted in five of the six counties in the study, (Elkhart, Lake, La Porte, Madison, and St. Joseph); four individuals were interviewed from Marion County. Of the nineteen, nine were males. The average length of experience in their profession averaged 14 years and ranged from 2 years to 25 years. Five individuals were administrators, five worked in the social services, or were community liaisons or interpreters, three were educators, two were health providers, two were business managers, and one was a lawyer and another a clergyman. All of the key informants had strong ties to the Hispanic/Latino community. Most were Hispanic/Latino themselves.

Appendix 2 lists the key informants' comments for each of the sites by question. The comments are presented as the participants made them.

Specific Summary Statements from the Key Informant Interview Analysis

- Most of the interviewees felt that Hispanics were not as knowledgeable as others about health care services. “They are less aware of what is available, how the system works, and how to access health services.” Reasons suggested for the lack of knowledge were:
 - Not enough information provided in Spanish—insufficient information
 - Language, cultural and educational barriers
 - Lack of trust in providers
 - Miscommunication
 - Fear of reprisal

- Lack of time
 - Lack of transportation
 - Because of work requirements, they only seek care at the last minute
 - No job means no health insurance
 - No social security number to report
 - Preventive health is not a priority
- Several of the key informants felt that the Hispanics are more knowledgeable than the majority population gives them credit.
 - Hispanics generally use available health care less than other racial and ethnic groups in the community. However, when they are aware of services and if the services are culturally sensitive, the Hispanics use them a lot.
 - Lack of health insurance is a primary reason why Hispanics do not use available health services.
 - As a family oriented culture, Hispanics get their health information by word of mouth from friends and family members, local radio announcements, health fairs and churches. Health information is also exchanged at Hispanic/Latino food markets, laundries, community centers, agency offices and other places where Hispanics gather.
 - Hispanics will listen to persons in the community that they trust.
 - Culture plays an important role in the Hispanic population. However, Hispanics in the U.S.:
 - Place little value on prevention
 - Are suspicious and afraid of health service providers and facilities

- Will try home remedies first
- Hispanics look for places where they can afford the services, where they speak Spanish and where those providing care are Hispanics.
- Most of the interviewees were aware of the IPC. A few reported yes they were aware of the IPC, but did not know about the services that the IPS provides.
 - Most the interviewees who answered this question reported that they felt that few or a very small proportion of the Hispanic community were aware of the IPC. Several indicated that they had no idea.
- When asked why Hispanics do not use the IPC, the replies included:
 - Not aware of it (most common response)
 - Do not know the phone number
 - There is no advertising in Spanish
 - Lack of information/awareness
 - Language barrier
 - Fear because of their immigration status
 - They have not needed to use it
- There was general agreement that Hispanic/Latinos are less aware of the IPC. There is a need for more Spanish poison center awareness publications and more teaching of poison awareness in schools.
- When asked why Hispanics do not use the Indiana Poison Center, even if they are aware of it, the following were provided as answers:
 - It is an unusual concept; an American concept, so they are not familiar with poison centers

- They don't think they need the services provided
- Scared—fear as immigrants
- Use herbal remedies
- Customer services are in English and not offered in Spanish
- When asked who do Hispanics turn to for care with a poisoning, the replies were:
 - 911
 - Emergency rooms, doctors and hospitals, because that's the system they are familiar with
 - Relatives or friends
 - Spouse or mother
- The following advice was offered to increase the awareness of the IPC within the Hispanic community:
 - Use Spanish radio stations for public service announcements
 - Use Spanish newspapers for public service announcements
 - Use newsletters aimed at Spanish speaking individuals
 - Advertise in local Latino gathering places
 - Spread the word if someone in the Hispanic community has had a positive experience with the Indiana Poison Center
 - Have bi-lingual phone services
 - Promote the 1-800 number
 - Organize poison center awareness workshops for Hispanics
 - Educate Hispanic advocates to teach others about the poison center

CONCLUSIONS

Based on the focus group comments and the key informant interviews, the under-utilization of the IPC by the Hispanic population is primarily because that population is unaware of poison centers in general and the IPC specifically. In addition, they are unaware of the services provided by poison centers. There was agreement that it is important for the Hispanic population to become aware of the IPC services. Most of the participants had not used the IPC and did not know of other families who had used it. Many suggestions were made by the focus group participants and the key informants to increase awareness, such as placing advertisements about the IPC services and contact information in Spanish language media and by engaging the support of Spanish speaking providers. There is clearly a need to inform the Hispanic community leaders about the services provided by the IPC as well as the Hispanic population.

Special efforts will be needed to increase the comfort level of Hispanics in contacting the IPC when they need services. Hispanics may not contact the IPC even when they are aware of the services for many reasons, including past experiences with discrimination and fear of authority. Thus, the IPC will need to build trust in the Hispanic community by working closely with those community leaders who currently have their trust to inform the Hispanic population.

Lack of understanding of what can poison people did not seem to be a major need for the Hispanics. Neither was the lack of understanding about the importance of getting help quickly when a person is poisoned. There is a need to help this sub-group understand the best way to treat individuals who are poisoned, since many of them would turn to home remedies that might not be effective. Clearly, the Hispanic population needs

to have a better understanding of when it is appropriate to contact the IPC and when it is appropriate to seek other emergency services.

Lack of access to telephones does not appear to be a barrier for Hispanics to seek services from the IPC. There were many suggestions of ways to assist Hispanics to find the phone number for the IPC when they need it. These suggestions were similar to the ones suggested by non-Hispanics in previous studies.

Another need for this sub-population is to help them understand what they can do to prevent accidental poisoning by teaching their children about avoiding potentially harmful exposures, helping all in the family appropriately use medications and reducing access to toxic substances.

The key informants indicated that Hispanics will access the services provided by the IPC when they are aware of them and when those services are culturally sensitive. By the end of the session, the focus group participants had a better understanding of the IPC and were enthusiastic to share their knowledge of services they could receive from it.

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ATTACHMENTS

Attachment 1 Focus Group Introductory Scripts: English and Spanish Language Versions

Focus Group Script (English)

(Adapt as needed, but keep the messages)

Hello, my name is _____ from ____ (*Coalition Name*). The ____ (*Coalition Name*) ____ is conducting this focus group on behalf of the Indiana Poison Center. The purpose of our discussion today is to identify the awareness in the Hispanic (*use the term “Latino” if more appropriate*) community of the Poison Center services and their attitudes about using the Poison Center services.

Let me start by telling you about the ____ (*Coalition Name*) ____ and what we do. Our mission is to increase the health status of minority populations, improve their access to quality care, reduce disparities in health outcomes, and increase the cultural competency of health care providers and organizations. We provide health screening and conduct other outreach programs in the community to better link individuals to health care services that are available to them.

We invited you to participate in our group today to share with us what you know about the Indiana Poison Center and your attitudes about using their services. We also would like why Hispanics may not use the Indiana Poison Center. We value your perspectives and opinions and are thank you for your suggestions. We will share your comments and suggestions to the Indiana Minority Health Coalition who will summarize the comments from this focus group and the other ones that are being conducted through out Indiana to write a report to the Indiana Poison Center. The Indiana Poison Center will use our report to develop a plan to address the concerns of the Hispanic community.

Before we get started, I would like for you to fill out this short form that asks some questions about you. We need this information to be able to describe the people who came to our focus group. We don't need your name on the data form.

Pick up the data forms...

We have name tents for everyone here today so that we can direct questions to other people. We would like to use a tape recorder today because we want to make sure we capture all of the good comments you make. We will also take notes of your comments. Does anyone have a concern about the tape recorder?

Okay, let's get started...

Focus Group Script (Spanish)

Grupos de Enfoque Scrip ©

(Adaptar como sea necesario, pero mantener el mensaje)

Para el

Indiana Poison Center

Hola mi nombre es: _____ de ____ (Nombre de la coalición) _____. El ____ (Nombre de la coalición) ____ esta conduciendo un estudio de parte del Indiana Poison Center para identificar problemas o preocupaciones asociados con el uso del servicio en el (los) condado(s) _____.

Déjenme empezar diciéndole acerca de la coalición ____ (Nombre de la coalición) ____ y que estamos tratando de hacer. Nuestra misión es incrementar la salud de la población de las minorías en el estado, mejorar el acceso a la calidad de los servicios de salud, reducir las diferencias de salud, e incrementar la competencia cultural de organizaciones y proveedores de salud. Nosotros proveemos exámenes de salud y llevamos a cabo otros programas en la comunidad para conectar mejor a las personas con los servicios de salud que están disponibles para ellos.

Nosotros lo invitamos a participar en este grupo de enfoque porque usted tiene el conocimiento y el punto de vista acerca de la disponibilidad de los servicios de salud en la comunidad y, el porque la comunidad Hispana/Latina no los usan. Nosotros valoramos sus perspectivas y opiniones y estamos requiriendo de su ayuda para identificar las preocupaciones o problemas de las personas que viven en su condado. La información que usted comparta con nosotros hoy será añadida a la información de salud relacionada que nosotros tenemos de otras fuentes. Nosotros usaremos sus comentarios o sugerencias para darle prioridad a las preocupaciones de salud en un reporte que será usado por el Indiana Poison Center para planificar acciones para atender las preocupaciones de la comunidad Hispana/Latina.

Attachment 2 Focus Group Questions : English and Spanish Language Versions
Focus Group Questions (English)

1. What do you think when you hear the word “poison”? What other words do you use for “poison”?
2. What kinds of things can poison a person?
3. How do you decide if the situation is an intoxication or poisoning?
4. How serious do you think it is if someone is poisoned?
5. What would you do if you, a friend or a family member were poisoned?
6. Would you use home remedies if someone in your home were poisoned? What home remedies would you use?
7. Who would you ask for help if someone was poisoned?
8. How long would you wait before you asked someone to help? How would you decide when to call for help?
9. Is there anything you do at home to prevent poisoning?
10. Has anyone ever heard of a poison center? How did you hear about it?
11. What does a poison center do?
12. When should someone call the poison center?
13. Are there times or situations when you think it might be better NOT to call the poison center? What are some of these times or situations?
14. Have you ever called a poison center, or do you know anyone who has? What happened when you or they called the poison center?
15. How do you feel about calling a poison center for help?
16. How important do you think it is for families to know about the poison center?
17. What would be some good ways to help people learn about poison centers?
18. Do you have a telephone in your home? If not, do you have neighbors or anyone nearby with a telephone that you can use?
19. Do you keep a list of important phone numbers in your home? Where do you keep the numbers?
20. What would help you to remember the number to call for help if someone is poisoned?

BE SURE TO USE THE CORRECT WORD FOR “POISONING”

Focus Group Questions (Spanish)

Preguntas para el Grupo Hispano/Latino

1. ¿Qué piensa usted cuando escucha la palabra veneno? ¿Qué otra palabra usa usted para veneno?
2. ¿Qué cosas pueden envenenar a una persona?
3. ¿Cómo se da usted cuenta si existe una situación de intoxicación o envenenamiento?
4. ¿Toma usted en serio una situación de envenenamiento?
5. ¿Qué haría si un familiar, amigo o usted se envenenara?
6. ¿Usaría usted remedios caseros si alguien en su casa se envenenara? ¿Qué podría usar usted?
7. ¿Usted pediría ayuda si alguna persona se intoxicara o envenenara?
8. ¿Cuánto tiempo usted esperaría antes de pedir ayuda? ¿Cómo usted decidiría cuando llamar por ayuda?
9. ¿Usted hace algo en su hogar para prevenir envenenamiento?
10. ¿Ha escuchado usted acerca del “POISON CENTER”? ¿Cómo escuchó usted de este centro?
11. ¿Qué hace el “POISON CENTER”?
12. ¿Cuándo debe llamar una persona al “POISON CENTER”?
13. ¿Usted pensaría que es mejor NO llamar al “POISON CENTER” en ciertas situaciones? ¿Cuáles son esas situaciones?
14. Usted ha llamado alguna vez al “POISON CENTER”? o ¿Conoce a alguien que lo haya hecho? ¿Qué pasó cuando usted o las otras personas llamaron al “POISON CENTER”?
15. ¿Cómo se siente usted pidiendo ayuda al “POISON CENTER”?
16. ¿Qué tan importante es para usted y su familia saber acerca del “POISON CENTER”?
17. ¿Cuáles serían algunas maneras de ayudar las personas a conocer el “POISON CENTER”?
18. ¿Tiene usted teléfono en su casa? Si / No, ¿tiene un vecino o alguien cerca con teléfono que usted pueda usar?
19. ¿Mantiene usted una lista de teléfonos importantes en su casa? ¿En qué parte de su casa se encuentran esos números de teléfonos?
20. ¿Cómo podría recodar fácilmente un número de teléfono para pedir ayuda si alguien está envenenado?

Attachment 3 Key Informant Introductory Script : English Versions

IMHC Indiana Poison Center Key Informant Script

(Adapt as needed, but keep the messages)

Hello, my name is _____ from _____. The _____ is conducting this interview on behalf of the Indiana Poison Center. The purpose of our discussion today is to identify the awareness in the Hispanic (*use the term “Latino” if more appropriate*) community of the Poison Center services and their attitudes about using the Poison Center services.

Let me start by telling you about the _____ and what we do. Our mission is to increase the health status of minority populations, improve their access to quality care, reduce disparities in health outcomes, and increase the cultural competency of health care providers and organizations. We provide health screening and conduct other outreach programs in the community to better link individuals to health care services that are available to them.

We invited you to participate in this discussion because you have the opportunity to interact with the Hispanics who live here. I would like to ask you some questions about the Indiana Poison Center and attitudes of Hispanics about using its services. We value your perspectives and opinions and thank you for your suggestions. We will share your comments and suggestions to the Indiana Minority Health Coalition who will summarize the comments from our conversation and the other ones that are being conducted through out Indiana to write a report to the Indiana Poison Center. The Indiana Poison Center will use our report to develop a plan to address the concerns of the Hispanic community.

Attachment 4 Key Informant Interview Questions: English Versions

Question List

1. Do you think the Hispanics, in general, are just as knowledgeable about health services that are available to them as others in the community?

Follow-up – IF THEY SAY THE HISPANICS ARE NOT AS KNOWLEDGEABLE...
Why do think they are less aware?

2. Do you think the Hispanics, in general, utilize available health services less or more than the others in the county?

Follow-up –IF THEY SAY THAT THE HISPANICS UTILIZE HEALTH SERVICES LESS THAN OTHERS...
Why do you think they don't utilize services as much as others?

3. Where do you think Hispanics generally get information about available health services and how to access them?
4. What role does the Hispanic culture play in their decisions to seek medical care services?

As you may know, there is a toll-free telephone number that people can use to call the Indiana Poison Center when they or someone else has been poisoned. The Indiana Poison Center experts give advice to those who call about they should do to help the person who was poisoned. The experts follow-up when needed and offer to send information about poisonings to the caller.

5. Before today, were you aware of the Indiana Poison Center and the services it provides?
6. What percent of Hispanics in this county, do you think, are aware of the Indiana Poison Center?
7. We have found that Hispanics less frequently utilize the Poison Center compared to non-Hispanics. What possible explanations for this discrepancy come to your mind?
8. (If not listed in response to #8) Do you think Hispanics are less aware of the Indiana Poison Center?

Follow –up IF THEY ANSWER “YES”...
What advice can you give us on how we might effectively increase their awareness?

9. (If not listed in response to #8), Do you think Hispanics are less comfortable contacting the Poison Center, if they need to us it and are aware of it?

Follow-up: IF THEY ANSWER:"YES"...
Why do you think they are not as comfortable?

10. If a member of a Hispanic family was poisoned, who would they most likely turn to for help?
11. What advice do you have for us to help the Hispanic community become more aware of the Indiana Poison Center and help them feel more comfortable contacting the poison center for help when they need it?

Closing Statement

That was the last of the questions about Indiana Poison Center. This has been a valuable discussion and I'll make sure your comments are included in our report.

GO TO THE KEY INFORMANT DATA FORM→

APPENDIXES

Appendix 1 – Focus Group Participant Responses

*Question 1: When asked about what do you think when you hear the word “poison”?
What other words do you use for “poison”?*

St. Joseph County Focus Group Responses:

- Dangerous
- Deadly
- Chemicals to kill
- Chemicals to clean
- Toxic

Hispanic/Latino of Greater Indianapolis Focus Group Responses:

- The death
- Danger

Madison County Focus Group Responses:

- Death
- Rat
- Don't eat
- Yuck
- A harmful substance that can cause harm
- Nothing
- Danger
- Toxic
- Your life is in danger
- Another word- intoxication

Lake County Focus Group Responses:

- Overdose
- Overdose
- Overdose
- Overdose
- Overdose
- Overdose
- Overdose

Elkhart County Focus Group Responses:

- Something that is very dangerous, something that can affect a person

La Porte County Focus Group Responses:

- Bad

- Poison is something bad.
- Something not to use, be real careful.
- No
- No
- Danger
- Dangerous
- No
- Dangerous
- Dangerous

Question 2: The participants were asked to describe what kinds of things can poison a person?

St. Joseph County Focus Group Responses:

- Pills / Medication—abuse / “look like candy”
- Bad combinations of medications
- Friends / people medicate each other (share medications)
- “I had a friend that was advised to take something from another friend. She swelled up and she was allergic to it”
- In Mexico, there isn’t that much information
- Food can also be dangerous—allergies (shrimp, peanut butter)
- Gas—stove if used for heat, can be deadly; Carbon oxide
- Heaters
- Culture in Mexico of turning on the stove and sleeping with it on for heat (but they announce that it is bad but to warm up people turn on the burners for heat)
- Paint
- Smoke
- Clorox; Cleaning items

Hispanic/Latino of Greater Indianapolis Focus Group Responses:

- House-cleaning products
- Medicines
- Paints or paint thinners

Madison County Focus Group Responses:

- Arsenic, food
- Cleaning products
- Drugs
- Toxic substance
- Chemicals
- Medicine
- Detergent

- Poison gases
- Carbon monoxide
- Food allergies like fish or peanuts

Lake County Focus Group Responses:

- Medicine, cleaning supplies, and cleaning supplies for car
- Cleaning supplies, and Medicine
- Household chemicals, Medicine and plants
- Medicine, drugs and cleaning supplies
- Medicine, cleaning supplies, plants
- Medicine, cleaning supplies, plants (car and house)

Elkhart County Focus Group Responses:

- Well, some things like food, could be or something that we take in a drink, right?
- Medicine
- Medicine
- Very good
- Chemical products that get mixed
- Even things that are sold, like poison for certain things, even a kid can ingest and get poisoned
- That brings CLOROX to my mind because if it is not in the right bottle that has a label on it that says CLOROX or if it is in a soda bottle someone might drink it and get poisoned right?

La Porte County Focus Group Responses:

- Sprays
- Gas
- Ammonias
- Cleaners
- Medication
- Insecticides
- Pesticides
- Different cleaning materials
- Medications
- Gasoline
- Some people get poisoned from different sprays or ammonia...we need be careful
- Gasoline, chemicals are dangerous
- Cleaning product
- Danger - Gasoline
- Cleaning Products and Gasoline

Question 3: How do you decide if the situation is an intoxication or poisoning?

St. Joseph County Focus Group Responses:

- Inflammation / Swelling
- Hives
- Skin changes color, looks bruised
- Skin burning sensation
- Bumps

Hispanic/Latino of Greater Indianapolis Focus Group Responses

- Red skin
- Throw up
- Difficulty breathing
- Convulsions

Madison County Focus Group Responses:

- Eyes dilated and fixed
- Loss of balance
- Skin color change
- Respiration change
- Drowsy or sleepy
- Breathing
- Feel of skin
- Foaming at the mouth

Lake County Focus Group Responses:

- Reaction, crying, and Vomiting
- Vomiting reaction
- Reaction of child, vomiting
- Vomiting and reaction of person
- Vomiting
- Vomiting

Elkhart County Focus Group Responses:

- When someone feels bad
- When they are having a bad headache
- Vomiting

La Porte County Focus Group Responses:

- If you are feeling sick
- You become sick, some people throw up your color changes if you breathe something bad
- By the instructions or the label
- I will look at the bottle
- Look at the bottle

- Because we can see that the child has different reactions
- Look at the bottle
- Look at one test

The participants clearly recognized that some poisons can cause more harm than others and that some poisonings may require medical treatment.

Question 4: How serious do you think it is if someone is poisoned?

St. Joseph County Focus Group Responses:

- Yes, you could die
- Everyone shook their heads in agreement

Hispanic/Latino of Greater Indianapolis Focus Group Responses:

- Yes
- Of course

Madison County Focus Group Responses:

- They could die
- Very serious
- Depends on the amount and the substance

Lake County Focus Group Responses:

- Very serious
- Yes
- Very serious

Elkhart County Focus Group Responses:

- No response

La Porte County Focus Group Responses:

- Really serious that you could die
- Very
- Very serious, you could die
- I will call 911
- Call 911
- Call the ambulance
- Call 911
- Call 911

Question 5: What would you do if you, a friend, or a family member were poisoned?

St. Joseph County Focus Group Responses:

- 911; Ambulance; It's like a reaction to call 911
- Emergency

- If they don't know 911
- If they are Latino, the police don't pay attention
- "One time a person tried to break into my house. I called the police trembling and crying and they didn't listen to me. It's like if you're a Latino then they don't listen or care about you. If people speak in Spanish then it's like you don't matter."

Hispanic/Latino of Greater Indianapolis Focus Group Responses:

- Prevention
- Get away from the place and drink a glass of milk
- Red the label of the product where it says about in case of poison
- Call 911
- Go to the emergency room

Madison County Focus Group Responses:

- Try to help
- Call 911
- Call a doctor
- Call the ambulance
- Call the police
- Give first aid
- Call poison control center

Lake County Focus Group Responses:

- 911 and read the bottle
- 911, hospital, and look at the back of label
- Call 911
- Call 911, check label
- 911, read labels
- Call 911, check label
- 911

Elkhart County Focus Group Responses:

- No response

La Porte County Focus Group Responses:

- Take them to Hospital or call poison control
- Call the poison control center, 911, doctor
- Take them to the hospital; we go there when someone is in bad sickness or health
- 911
- None
- Call the doctor or take the person to the hospital

***Question 6: Would you use home remedies if someone in your home were poisoned?
What home remedies would you use?***

St. Joseph County Focus Group Responses:

- No, oh no (all agreed)
- Go to the Emergency room
- We do know some remedies that we learned from family members
- Herbal cures
- Drink milk, lemon with water
- Well my niece took penicillin and her lip swelled up. She took lemon juice and it got better.
- We used to drink teas but here (U.S.) there are no teas but there are other things (pills)

Hispanic/Latino of Greater Indianapolis Focus Group Responses:

- Milk
- Egg
- Lemon juice
- Cooking oil
- Cause throws out

Madison County Focus Group Responses:

- Yes - Drink milk
- Don't know any home remedies
- Lemon and milk
- Cooking oil and milk

Lake County Focus Group Responses:

- No
- Milk, and emergency rooms
- Milk
- Teas, Milk, and hotline for nurses
- Milk
- Milk

Elkhart County Focus Group Responses:

- Milk
- Orange juice
- As you said, milk, other medications, water
- Lots of water, right?

La Porte County Focus Group Responses:

- Only if instructed by poison control center or Doctor
- If the doctor said it was ok
- Milk

- Milk
- One glass of milk
- Milk
- None
- Milk
- Milk

Question 7: Who would you ask for help if someone was poisoned?

St. Joseph County Focus Group Responses:

- Yes, of course

Hispanic/Latino of Greater Indianapolis Focus Group Responses:

- Yes

Madison County Focus Group Responses:

- pharmacist
- doctor
- poison center

Lake County Focus Group Responses:

- ER, minority hotline, St. Margaret, Indiana poison control, and the health department
- doctor
- ER

Elkhart County Focus Group Responses:

- Go to a help Center like a hospital or call 911

La Porte County Focus Group Responses:

- The poison control center
- Yes, the doctor, or call the poison control center at the hospital
- I would call 911,
- The person or number on the label
- A neighbor
- I will call the nearest person
- My neighbor
- The hospital
- Doctor and call 911
- The doctor (Monica)
- Call 911 or the hospital

Question 8: How long would you wait before you asked someone to help? How would you decide when to call for help?

St. Joseph County Focus Group Responses:

- As soon as it happens

Hispanic/Latino of Greater Indianapolis Focus Group Responses:

- Immediately
- Call your neighbor, when people turn their eyes around or they are fainting

Madison County Focus Group Responses:

- Right away,
- immediately,
- seconds

Lake County Focus Group Responses:

- No wait
- Don't wait
- Call ASAP, no waiting
- No wait
- Seek help right away
- Right away
- Right away

Elkhart County Focus Group References:

- Depending on what it is, if it's poisoning...it's difficult because they could lose their lives at any time...grab the car and take the person, make a phone call most of all
- As we said it depends on the emergency, right?

La Porte County Focus Group Responses:

- 15 to 20 minutes
- Call the person to get their attention, check eyes, breathing, pulse
- look for signs of poisons
- When I need

Question 9: Is there anything you do at home to prevent poisoning?

St. Joseph County Focus Group Responses:

- Put things up high
- Put cleaning materials high away (everyone agreed)
- Put dangerous materials away and secure them

Hispanic/Latino of Greater Indianapolis Focus Group Responses:

- Yes, I put the toxic products away or locked
- Away from children's reach.

Madison County Focus Group Responses:

- Teach kid
- keep poison locked away
- put poisons out of reach of kids
- keep things clean

Lake County Focus Group Responses:

- Read labels
- Put chemicals child proof
- Locks, put items in high shelves
- Lock them up
- Read labels, child caps

Elkhart County Focus Group Responses:

- No, not me
- I hadn't thought about that
- Well, things that we might know are dangerous, not having them on hand to get them
- Leave the containers with liquids tightly closed; keep them out of reach of children or not changing containers from their original content.

La Porte County Focus Group Responses:

- Not leave anything around, like sprays
- Put cleaners, medications out of reach of children or in locked cabinet
- We need to keep cleaning materials and medications out of children's reach, have lots of air to circulate
- Lock stuff up, put poison outside
- I will keep it away from the children
- Keep it in a safe place at home
- Keep it away from the kids in a safe place at home
- No, keep away all dangerous products
- Keep it away from the kids at home
- Keep the product away

Question 10: Has anyone ever heard of a POISON CENTER? How did you hear about it?

St. Joseph County Focus Group Responses:

- No
- Yes

- Stickers—“Yuck”: Have seen them, but don’t know the phone number to call
- In school have gotten information from kids
- We receive information from Health Fairs

Hispanic/Latino of Greater Indianapolis Focus Group Responses:

- No, one person said yes but she did not know what was the purpose of it
- A refrigerator magnet

Madison County Focus Group Responses:

- 7-Yes/ 4-No
- In school the “Mr. Yuk program”
- News paper
- clinic

Lake County Focus Group Responses:

- No
- No, call health department
- No
- NO, CDC Atlanta, call local health department
- Athenas Hospital and health dept.

Elkhart County Focus Group Responses:

- No
- No, Never

La Porte County Focus Group Responses:

- Yes, on TV
- No, Yes on TV
- No
- No
- No

Question 11: What does a poison center do?

St. Joseph County Focus Group Responses:

- Tell you what you should do and steps to take next quickly
- Depends on what the situation is

Hispanic/Latino of Greater Indianapolis Focus Group Responses:

- It is a call center where people can call to ask questions and the center can tell people what to do.
- It is a call center just for poison cases.

Madison County Focus Group Responses:

- Teach,
- Help poison victims,
- Help families,
- Help people who are intoxicated,
- Teach health,
- Give information and prevention for poison,
- Tell you what to do if you have taken a poisonous product,
- Don't know other then you can call them.

Lake County Focus Group Responses:

- Info
- Give info
- Help you
- Provide information in case of emergency
- Give information
- Give information

Elkhart County Focus Group Responses:

- No, this is the first time.

La Porte County Focus Group Responses:

- Tell you what to do when someone is poisoned.
- Ask questions about the condition of the person poisoned, and give instruction on what to do next
- They ask questions about your condition and give you instruction on what do to, they show you what to do
- Look at the bottle and the ingredients

Question 12: When should someone call the Poison Center?

St. Joseph County Focus Group Responses:

- As soon as someone is poisoned (everyone shook their heads in agreement)

Hispanic/Latino of Greater Indianapolis Focus Group Responses:

- To prevent, we can call and ask questions or have information and how the Poison Center can help.
- To ask for help or emergency
- When somebody just drank something that could be toxic

Madison County Focus Group Responses:

- If you think someone has been poisoned
- when you feel something just isn't right
- to prevent poisoning

Lake County Focus Group Responses:

- Right away
- Right away
- Call anytime, to get info in case of emergency
- ASAP
- Anytime
- Right away

Elkhart County Focus Group Responses:

- No response

La Porte County Focus Group Responses:

- When they've drank something (like sprays) and fell really sick
- As soon as possible
- As soon as possible, when you drink something poisonous
- When you feel really sick
- When you feel something is wrong is happening

Question 13: Are there times or situations when you think it might be better NOT to call the Poison Center? What are some of those times or situations?

St. Joseph County Focus Group Responses:

- Always call (one stated)
- Now, what if they take the children away (three agreed)
- The moment they call the responsibility of parent they are not responsible watching their kids. What if it was an accident but the parents are responsible and then they start to investigate the parents?

Hispanic/Latino of Greater Indianapolis Focus Group Responses:

- I think you should call and find out. I cannot think why I should not call.
- We are not doctors, we always need to call...Well, unless you are drunk, you should not call, well there had been cases where people can get intoxicated because of the alcohol, so it is important to call depending on the case.

Madison County Focus Group Responses:

- No, I do not think there is time or situation you shouldn't call it is important to call just to be safe.
- Yes if someone is passed out call 911 first, if someone is throwing up call 911 first

Lake County Focus Group Responses:

- No
- No
- No

- Depending on situation
- No

Elkhart County Focus Group Responses:

- Well, in any case, if there is a poison center, as you said call them if something happens that we might believe is poisoning, call as soon as possible.
- Well as she said if one were aware that something like that exists, one would try before anything happens or if someone is intoxicated, be informed through this place on how to prevent or cure.
- And if it is a place that can give specific information for that, go immediately to that place

La Porte County Focus Group Responses:

- No
- If a person is not breathing or no pulse if felt
- No, If a person is not breathing call 911, or the person has no pulse
- Do call unless you are 100% sure
- When it is not a 100% sure it is needed

Question 14: Have you ever called a Poison Center, or do you know anyone who has? What happened when you or they called the Poison Center?

St. Joseph County Focus Group Responses:

- No (everyone agreed)
- First time hearing about it for me; No friends know of calling center either

Hispanic/Latino of Greater Indianapolis Focus Group Responses:

- No
- No
- No

Madison County Focus Group Responses:

- 9-No
- 2-no response

Lake County Focus Group Responses:

- No
- No
- No
- No

Elkhart County Focus Group Responses:

- No response

La Porte County Focus Group Responses:

- No
- Yes, about a product
- No, didn't know about center
- I don't know

Question 15: How do you feel about calling a Poison Center for help?

St. Joseph County Focus Group Responses:

- Feel fine
- Better now knowing (others agreed)
- Participants continued with ER stories and stories about experiences with doctors: Emergency situations going in and you sit dying in waiting room, it's not right it's discrimination. I want a doctor that will explain what he will do to me. I had to go to four doctors and they didn't help it took forever for them to help me. You can be sitting there bleeding until all your blood runs out. Why go to the emergency room to sit there for hours?

Hispanic/Latino of Greater Indianapolis Focus Group Responses:

- You are doing the right thing

Madison County Focus Group Responses:

- Not comfortable
- no
- ok
- security
- happy to get help

Lake County Focus Group Responses:

- Yes
- Yes
- Yes
- You have to call
- Do it
- Yes

Elkhart County Focus Group Responses:

- (That doesn't apply because you don't know about the center, right?)

La Porte County Focus Group Responses:

- I feel that it is great that we have people like them
- I always kept the number by the phone
- I keep the number by the phone, I feel it is great to have people at a poison center; they know what to do

- I would call next time I need them, they are really important because we would not know what to do
- Not sure

Question 16: How important do you think it is for families to know about the Poison Center?

St. Joseph County Focus Group Responses:

- I came here and I'll tell everyone I know
- To be prepared / prevent situations
- No one knows when we will need to use it
- Yes it is very important to know
- Need to have someone on the line that speaks Spanish otherwise it won't help

Hispanic/Latino of Greater Indianapolis Focus Group Responses:

- It is very important; you can save a person's life
- It is vital to do
- Saves lives
- You received information you did not know

Madison County Focus Group Responses:

- I think it is very important it's there
- It could save a life
- Very important
- Happy that it helps people
- Saves lives

Lake County Focus Group Responses:

- Very
- Very
- Yes important
- Important
- Very important
- Very
- Very important for the families
- Very important for the families

Elkhart County Focus Group Responses:

- No response

La Porte County Focus Group Responses:

- Really important because we would not know what to do if someone was poisoned
- Very important could save life

- Very important this could save a life
- Really important
- Very important for the families

Question 17: What would be some good ways to help people learn about Poison Centers?

St. Joseph County Focus Group Responses:

- When someone calls in to have a Spanish-speaking person answer
- Announce it on the radio in Spanish (everyone agreed)
- Informational sessions to educate
- With kids from school deliver information (all agreed); my kids already know the word Poison Center from school. When I make fish, they say, “Oh poison” (talking about food preparation). But then when I cook something that they don’t like to eat that that’s poison because she doesn’t like to eat it.
- Spanish newspaper—a lot of people read it and it’s free!
- Ticket with the phone number on the sticker
- Magnets

Hispanic/Latino of Greater Indianapolis Focus Group Responses:

- Talk to people, spread the voice
- Meetings
- Advertising in Hispanic media (radio, TV)
- Focus groups
- PSA
- Magnets

Madison County Focus Group Responses:

- Meetings like this one.
- Talk about it and have poster out at stores.
- Give direction or telephone number.
- Talking about it.

Lake County Focus Group Responses:

- Flyers and schools
- Schools and churches
- Flyers, and come speak to us
- Come to school and churches

Elkhart County Focus Group Responses:

- Well, letting people know this information
- If they give some flyers, provide them and direct people to them

La Porte County Focus Group Responses:

- Have more stuff on T.V.
- Flyers, pamphlets
- Flyers, pamphlets
- I don't know, have more stuff on T.V.
- To give information to us at the doctors office
- I don't know

Question 18: Do you have a telephone in your home? If not, do you have neighbors or anyone nearby with a telephone that you can use?

St. Joseph County Focus Group Responses:

- Everyone had a phone in their homes. If not cell phones. Everyone has a cell phone (all agreed).

Hispanic/Latino of Greater Indianapolis Focus Group Responses:

- Yes
- Yes

Madison County Focus Group Responses:

- 8-Yes. 3-No (Response having telephone in your Home)
- 1-Yes 2-No (Response having neighbors or anyone nearby with a telephone)

Lake County Focus Group Responses:

- Yes
- Yes
- Yes
- Yes
- Yes

Elkhart County Focus Group Responses:

- Yes

La Porte County Focus Group Responses:

- Yes
- Yes
- Yes, yellow book also
- Yes, Yellow book

Question 19: Do you keep a list of important phone numbers in your home? Where do you keep the numbers?

St. Joseph County Focus Group Responses:

- Yes
- We have a list of family, job, emergency stuck by the phone or refrigerator magnets of important numbers: School, Trash pick-up, etc.

Hispanic/Latino of Greater Indianapolis Focus Group Responses:

- No—Two people said yes
- On the refrigerator
- In her purse

Madison County Focus Group Responses:

- Yes
- Programmed into my cell phone
- on the refrigerator
- agenda
- purse

Lake County Focus Group Responses:

- Yes
- Yes
- Fridge, Yes
- Yes
- Put on magnet on fridge
- Ice Box
- Yes

Elkhart County Focus Group Responses:

- No response

La Porte County Focus Group Responses:

- Yes, in a phone book; or address book
- Near the phone
- Yes in a phone book
- By my bed
- Near the phone
- Yes
- Yes
- Yes
- Yes, next to my telephone
- Yes

Question 20: What would help you to remember the number to call for help if someone is poisoned?

St. Joseph County Focus Group Responses:

- I would call the police
- Having the number on the refrigerator
- Programmed in the telephone
- Confusion with the phone number if there is a Spanish & English—instead have only one number and a catchy number easy to remember would help.

Hispanic/Latino of Greater Indianapolis Focus Group Responses:

- Save the number in your cell phone
- Magnet on your refrigerator
- Three digit number

Madison County Focus Group Responses:

- Associate it with a song
- Keep a copy with you
- Make it easy and short to remember
- Program it in my cell
- Underline with a red pen

Lake County Focus Group Responses:

- Card
- Keep on refrigerator
- Magnets might spell the word poison
- Card on my refrigerator
- Card
- A Card

Elkhart County Focus Group Responses:

- No response

La Porte County Focus Group Responses:

- Keep the number in read by the phone
- Write the letters and numbers large then they are easy to see when you are upset.
- Police, hospital, doctor, and fire department

Appendix 2 – Key Informant Responses

1. What is your profession?

- St. Joseph County Key Informant # 1:
Family Community Specialist / Social Worker (Female)
- St. Joseph County Key Informant # 2:
Anthropologist / Community Health Educator (Female)
- St. Joseph County Key Informant # 3:
Nurse BSN RN (Female)
- Hispanic/Latino Greater Indianapolis Key Informant # 1:
Educator (Female)
- Hispanic/Latino Greater Indianapolis Key Informant # 2:
Latino Affairs Manager (Female)
- Hispanic/Latino Greater Indianapolis Key Informant # 3:
Lawyer (Male)
- Hispanic/Latino Greater Indianapolis Key Informant # 4:
Business Developer for a Bank (Male)
- Elkhart County Key Informant:
School Principal (Male)
- Elkhart County Key Informant:
Family Doctor (Male)
- Elkhart County Key Informant:
Health Information / Interpreter (Male)
- Madison County Key Informant:
Chaplain (Male)
- Madison County Key Informant:
Hispanic Interpreter (Male)
- Madison County Key Informant:
Nurse and Hispanic Outreach Coordinator (Female)
- La Porte County Key Informant:
English Second Language (Male)

La Porte County Key Informant:
Receptionist (Female)

La Porte County Key Informant:
Secretary (Female)

Lake County Key Informant # 1:
Director, Gary Neighborhood Services (Female)

Lake County Key Informant # 2:
Business Management (Male)

Lake County Key Informant # 3:
Executive Director, Healthy East Chicago (Female)

2. How many years have you been providing professional services?

St. Joseph County Key Informant # 1: **8 years**

St. Joseph County Key Informant # 2: **25 years**

St. Joseph County Key Informant # 3: **17 years**

Hispanic/Latino Greater Indianapolis Key Informant # 1: **35 years**

Hispanic/Latino Greater Indianapolis Key Informant # 2: **5**

Hispanic/Latino Greater Indianapolis Key Informant # 3: **2**

Hispanic/Latino Greater Indianapolis Key Informant # 4: **15+**

Elkhart County Key Informant: **10 years**

Elkhart County Key Informant: **14 years**

Elkhart County Key Informant: **2 years**

Madison County Key Informant: **10 years**

Madison County Key Informant: **5 years**

Madison County Key Informant: **6 years**

La Porte County Key Informant: **25 years**

La Porte County Key Informant: **10 years**

La Porte County Key Informant: **15 years**

Lake County Key Informant # 1: **15 years**

Lake County Key Informant # 2: **20+ years**

Lake County Key Informant # 3: **20 years**

3. What is your connection to the Hispanic/Latino community?

St. Joseph County Key Informant # 1:

I am one of them (Hispanic).

St. Joseph County Key Informant # 2:

I grew up in Latin America.

St. Joseph County Key Informant # 3:

I work through St. Joseph County Regional Medical Center in the community outreach tobacco control program and teach prenatal classes to Hispanics.

Hispanic/Latino Greater Indianapolis Key Informant # 1:

I coordinate the K through 12 Esc Program for Indianapolis Public Schools.

Hispanic/Latino Greater Indianapolis Key Informant # 2:

I work for Girl Scouts in the Spanish community

Hispanic/Latino Greater Indianapolis Key Informant # 3:

I'm the Tobacco Program Coordinator at the Hispanic/Latino Minority Health Coalition of Greater Indianapolis, Inc.

Hispanic/Latino Greater Indianapolis Key Informant # 4:

I am the President of A.L.M.A. (Association of Mexican Leaders In Action). Part of our mission is to support health collaborative efforts amongst the Latino- Mexican population of Central Indiana. Also, as part of my job, I help the Latino Community establish banking and financial relationships including bank accounts, establishing credit, how to purchase homes and obtain other necessary banking products that will fit their family needs.

Elkhart County Key Informant:

Community leader and advocate

Elkhart County Key Informant:
Hispanic Physician.

Elkhart County Key Informant:
Informant / service provider.

Madison County Key Informant:
I work with the Hispanic and other minority population in the chaplaincy program.

La Porte County Key Informant:
Counselor / advisor.

La Porte County Key Informant:
My parents are Hispanic and Caucasian.

La Porte County Key Informant:
I am Hispanic/African American.

Lake County Key Informant # 1:
Liaison for community of Hispanics

Lake County Key Informant # 2:
Community activist and spokesperson for the Hispanic community

Lake County Key Informant # 3:
Liaison to Hispanic community

Key Informant Questions/Responses

4. Do you think that Hispanics/Latinos, in general, are just as knowledgeable about health services that are available to them as others in the community?

St. Joseph County Key Informant # 1:

No, I think at this point there (in the past 5 years) is more of a raised awareness because of translation services, intentional hiring of bilingual staff like hospitals and health centers. The awareness is not there as to the others—African Americans and Caucasians because they are set in their cultural ways.

St. Joseph County Key Informant # 2:

No, they are more knowledgeable than given credit for. Length of time that they are here, language, social networks that are familiar with the system

St. Joseph County Key Informant # 3:

No, I don't think so. 911 was the answer given when she asked her group for prenatal health where to call when an emergency. Not aware because no one is talking about this, information is not out there.

Hispanic/Latino Greater Indianapolis Key Informant # 1:

No

Hispanic/Latino Greater Indianapolis Key Informant # 2:

Not at all

Hispanic/Latino Greater Indianapolis Key Informant # 3:

No, I don't think so

Hispanic/Latino Greater Indianapolis Key Informant # 4:

No, I don't believe that the Hispanic/Latino community is as knowledgeable about health services as others.

Hispanic/Latino Indianapolis Responses on Follow-up question: If you say the Hispanics/Latinos are not as knowledgeable, why do you think they are less aware?

Hispanic/Latino Greater Indianapolis Key Informant # 1:

Less aware of what is available, how system works, and how to access

Hispanic/Latino Greater Indianapolis Key Informant # 2:

Not enough information in Spanish

Hispanic/Latino Greater Indianapolis Key Informant # 3:

Insufficient information

Hispanic/Latino Greater Indianapolis Key Informant # 4:

I believe they are less aware for many reasons and factors; among those factors are:

- **Language, cultural, and education barriers**
- **Lack of trust or miscommunication**
- **Materials not always translated into Spanish**

- **Fear of reprisal**
- **Seek health services only when it's absolutely necessary (reactive)**
- **Lack of time or lack means of transportation**

Elkhart County Key Informant # 1:

Yes, I really think some are. Some are told by their supervisor or friend

Elkhart County Key Informant # 2:

No, there is no access of the information in Spanish and most Hispanics don't speak or read English and it's hard for them to understand the useful information

Elkhart County Key Informant # 3:

No, we need to inform them of what is available to them, and when and where. Their main concern is work. They do not seek health assistance until the last minute.

Madison County Key Informant # 1:

No

Madison County Response on Follow-up question – IF THEY SAY THE HISPANICS ARE NOT AS KNOWLEDGEABLE...Why do you think they are less aware?

No SS#; no job therefore no insurance; some are illegal; they are afraid to seek help.

Madison County Key Informant # 2:

No

Illegal immigrants.

Madison County Key Informant # 3:

Yes

La Porte Key Informant # 1:

No because of language barriers and most are new arrivals to the county

La Porte Key Informant # 2:

Some are but most are not.

La Porte Key Informant # 3:

No, many Hispanics are afraid to seek medical help.

Lake County Key Informant # 1:

No

Language barrier, health not a top priority

Lake County Key Informant # 2:

No

Lack of education, some areas of health not a top priority such as poison

Lake County Key Informant # 3:

No

Lack of communication services not marketed or translated.

5. Do you think that Hispanics/Latinos, in general, utilize health services that are available to them less or more than others in the community

St. Joseph County Key Informant # 1:

Less—still language barriers and still lack of knowledge about American systems and the process of how those systems work, the culture does not place much value on preventative health.

St. Joseph County Key Informant # 2:

If they know about them and they are accessible they would utilize them more. When they know about them they use them a lot. If not they use the emergency room. One woman said that if you go to a doctor office and you are not a regular patient they will send you home with aspirin. You come back and the same thing happens so you might as well wait until you get so sick that you go to the hospital to get care.

St. Joseph County Key Informant # 3:

Hard question because it depends on the type of service. Service that is not in Spanish and culturally aware. When you have programs specifically for the community they will get the message and be more aware. Spanish radio station here in South Bend is the best way to reach the Latino community. 98.1 Sabor Latino. Cultural competence.

Hispanic/Latino Greater Indianapolis Key Informant # 1:

Less

Hispanic/Latino Greater Indianapolis Key Informant # 2:

Less

Hispanic/Latino Greater Indianapolis Key Informant # 3:

Less, because they don't have the information

Hispanic/Latino Greater Indianapolis Key Informant # 4:

I believe that they use health services less than others in the country.

Responses on Follow-up question: If you say the Hispanics/Latinos utilize health services less than others, why do you think they don't utilize services as much as others?

Hispanic/Latino Greater Indianapolis Key Informant # 1:

Lack of health insurance—would be a primary reason—money goes for other things.

Hispanic/Latino Greater Indianapolis Key Informant # 2:

Maybe because of their legal situation or language barriers

Hispanic/Latino Greater Indianapolis Key Informant # 3:

Because they don't know where they are.

Hispanic/Latino Greater Indianapolis Key Informant # 4:

I believe that they do not utilize services as much for many of the same reasons that they are not knowledgeable. They are reactive and cautious to the health care issue. If there is no medical coverage or benefits covering their sickness, then they do not want

to miss work for fear that they will lose it. If they seek health services, then they fear reprisals and the cost of the medical attention.

Elkhart County Key Informant # 1:

Yes, I think they utilize the services like every body else in an equal matter

Elkhart County Key Informant # 2:

No response

Elkhart County Key Informant # 3:

The Hispanic population here in the USA uses the health services less due to their everyday priorities, and these priorities never include health. Once again, it is not a priority for them.

Madison County Key Informant # 1:

Less

Communication and they are afraid.

Madison County Key Informant # 2:

Less

The language.

Madison County Key Informant # 3:

The same as other in the community, at least the people I come in contact with.

Communication and they are afraid.

La Porte Key Informant # 1:

Less because they don't have health insurance and are not knowledgeable of health services.

La Porte Key Informant # 2:

Many do because the services are talked about at the churches and social Service agencies they utilize.

La Porte Key Informant # 3:

Less because they are mostly illegal citizens in our community.

Lake County Key Informant # 1:

Less, out of fear

Lake County Key Informant # 2:

Less than other groups

Lake County Key Informant # 3:

Less

Lake County Key Informant # 1:

Fear of medical community access to health, immigration status concerns

Lake County Key Informant # 2:

Unaware of many of the services available

Lake County Key Informant # 3:

Not being educated to the importance

6. Where do you think Hispanics/Latinos generally get information about available health services and how to access them?

St. Joseph County Key Informant # 1:

Word of mouth, local Spanish radio station

St. Joseph County Key Informant # 2:

Sabor Latino (local Spanish radio station) and from their friends on the phone. Your friends tell you what to do. Once information gets out into the social networks it can grow from there but not all social networks are reliable. You must have experiential knowledge of services and information well get out if experience will be positive. If you can show how poison can harm the children then parents will bend over backwards to make sure that it won't happen.

St. Joseph County Key Informant # 3:

Through groups already in the community. Spanish radio, and word of mouth referral system (one person will tell another). Radio is key.

Hispanic/Latino Greater Indianapolis Key Informant # 1:

Word of mouth, fairs, community centers

Hispanic/Latino Greater Indianapolis Key Informant # 2:

In the health fairs

Hispanic/Latino Greater Indianapolis Key Informant # 3:

At the church, Hispanic/Latino food market, laundries, and Complex

Hispanic/Latino Greater Indianapolis Key Informant # 4:

I believe that the Hispanic/Latino and the immigrant community get a lot of their information by word of mouth. Once they find out about a positive experience that someone else had, then they will follow it. If the experience that they hear is negative, then they will not seek it. I believe good information is now being disseminated through the media, including radio, television, newspaper, and health fairs/seminars

Elkhart County Key Informant # 1:

In any clinic or any place they get attention with the government or they find out by them selves

Elkhart County Key Informant # 2:

Well, it depends on where they go

Elkhart County Key Informant # 3:

The Hispanics are very family oriented. Therefore, the majority of time they follow the recommendations and information that their families, and relatives suggest to them. The second source to get information is the church.

Madison County Key Informant # 1:

From a friend, family member, or some one they trust.

Madison County Key Informant # 2:

From one another.

Madison County Key Informant # 3:

Word of mouth.

La Porte Key Informant # 1:

El Puente Center and D.F.C. - F.S.S.A

La Porte Key Informant # 2:

Social Services agencies

La Porte Key Informant # 3:

Church, WIC office, DFC

Lake County Key Informant # 1:

WIC of family-friends

Lake County Key Informant # 2:

From persons in the community that they trust or family

Lake County Key Informant # 3:

Word of mouth or referral

7. What role does the Hispanic/Latino culture play in their decisions to seek medical care services?

St. Joseph County Key Informant # 1:

Hispanic culture does not place value on preventative health care. The culture also is not used to the concept of planning ahead, which interferes with preventative care.

St. Joseph County Key Informant # 2:

1. Machismo—protect your family, men who if doing the right job; 2. Strong belief in seeking out help if you are not well; 3. Responsible mother does not think she knows everything but knows who and where to consult; 4. Source of pride to spend money for those that are close to you.

St. Joseph County Key Informant # 3:

Big problem with insurance, which one program will they be able to afford. Language, who will speak Spanish, looking for a Spanish face. Location of the place; Transportation plays a role in this. Latino's always look to go to doctor when sick, not for prevention. They always go immediately to the emergency room without knowledge of huge costs.

Hispanic/Latino Indianapolis Key Informant # 1:

Hispanics who have been in the U.S. for a while are able to access health care. I think it is more a function of acculturation than culture.

Hispanic/Latino Indianapolis Key Informant # 2:

Small role or none

Hispanic/Latino Indianapolis Key Informant # 3:

The language—they need interpreters

Hispanic/Latino Indianapolis Key Informant # 4:

I believe that culture plays a very strong role in the decision to seek medical care services especially attitudes among the genders. The immigrant community in general is “suspicious” of health services and facilities. Immigrant families especially from rural areas of their countries tend to continue to use “home remedies” for their ailments.

Elkhart County Key Informant # 1:

Sometimes they are afraid of going for help because they think that those places don't have the information in Spanish

Elkhart County Key Informant # 2:

Most of the Hispanics depending on what county they came from,

they go to Mexican stores and get medicine that is not prescribed and if it does not work then they go to the doctor.

Elkhart County Key Informant # 3:

They seek medical care for their children first. As you may know, there is a toll-free telephone number that people can use to call the Indiana Poison Center when they or someone else has been poisoned. The Indiana Poison Center experts give advice to those who call about they should do to help the person who was poisoned. The experts follow-up when needed and offer to send information about poisonings to the caller.

Madison County Key Informant # 1:

It depends on the need; they may go to the Hispanic store and get an over the counter medication or try a home remedy.

Madison County Key Informant # 2:

Often times they will try to treat the problem with home remedies before seeking professional medical care.

Madison County Key Informant # 3:

Some Hispanics come from areas where medical care is free, and are use to not paying. Another thing is the male “Macho” mind set “I am OK”, “I can take it”. Another is Curanderos (Healers) or witches to get well.

La Porte Key Informant # 1:

The culture says most have never seen a doctor, its economical vs. culture a lot of them use folk doctors and medicine.

La Porte Key Informant # 2:

Lack of trust, fear of being sent back to Mexico

La Porte Key Informant # 3:

The culture says that we use medicine made at home, mid-wives

Lake County Key Informant # 1:

Large role

Lake County Key Informant # 2:

Because of their culture, many are reluctant to get involved in various community services available

Lake County Key Informant # 3:

Need more education

8. Before today, were you aware of the Indiana Poison Center and the services it provides?

St. Joseph County Key Informant #1:

Was aware of a number but not of exactly what you got when you dial that number.

St. Joseph County Key Informant # 2:

Know there is a billboard somewhere but cannot recall the phone number if needed to call it. You don't remember the number even when you see it.

St. Joseph County Key Informant #3:

Yes I am. Have called and asked questions.

Hispanic/Latino Indianapolis Key Informant # 1:

Yes

Hispanic/Latino Indianapolis Key Informant # 2:

No

Hispanic/Latino Indianapolis Key Informant # 3:

I unknown (?)

Hispanic/Latino Indianapolis Key Informant # 4:

Yes, I was aware of some of the services, including the toll free number.

Elkhart County Key Informant # 1:

I was actually aware of the Poison Center but not about the services it provides

Elkhart County Key Informant # 2:

Of course I refer to them mostly when we have intoxication

Elkhart County Key Informant # 3:

Yes

Madison County Key Informant # 1:

Yes.

Madison County Key Informant # 2:

Yes.

Madison County Key Informant # 3:

Yes, but don't know the number.

La Porte Key Informant # 1:

Yes

La Porte Key Informant # 2:

Yes

La Porte Key Informant # 3:

Yes

Lake County Key Informant # 1:

Yes

Lake County Key Informant # 2:

No

Lake County Key Informant # 3:

Yes

9. What percent of Hispanics/Latinos in this county, do you think, are aware of the Indiana Poison Center?

St. Joseph County Key Informant # 1:

Probably about 10% and most of them would work in health related fields.

St. Joseph County Key Informant # 2:

Any conclusion that you reach is unreliable

St. Joseph County Key Informant # 3:

Less than 50%

Hispanic/Latino Indianapolis Key Informant # 1:

20%--a guess

Hispanic/Latino Indianapolis Key Informant # 2:

Very small percent

Hispanic/Latino Indianapolis Key Informant # 3:

A lot

Hispanic/Latino Indianapolis Key Informant # 4:

I honestly do not have a good idea of what percent would or would not be aware of the Poison Center, but I would guess that it is a very low percent.

Elkhart County Key Informant # 1:

I think that about 40% of them are aware or it

Elkhart County Key Informant # 2:

I don't know, I don't have that information with me.

Elkhart County Key Informant # 3:

10%

Madison County Key Informant # 1:

Not many

Madison County Key Informant # 2:

5%

Madison County Key Informant # 3:

None

La Porte Key Informant # 1:

1%

La Porte Key Informant # 2:

In our county 3% of the Hispanic population

La Porte Key Informant # 3:

10%

Lake County Key Informant # 1:

A very small percentage

Lake County Key Informant # 2:

Possibly approximately 75-80%

Lake County Key Informant # 3:

25% or less

10. We have found that Hispanics/Latinos less frequently utilize the Poison Center compared to non-Hispanics/Latinos. What possible explanations for this discrepancy come to your mind?

St. Joseph County Key Informant # 1:

They don't know the number. They don't know what it is. It is not advertised in Spanish in an appropriate cultural way

St. Joseph County Key Informant # 2:

There is not as much of an awareness of the harmful...in U.S. there is so much worry about everything dirt, allergies, etc. There isn't that concern. Don't they know about it? Where is the information in Spanish? If it is out there it is lost among other pamphlets and billboards while driving. Not as much awareness and those that use them more are paranoid.

St. Joseph County Key Informant # 3:

Lack of information, they don't know where to call; they don't know Spanish-speakers area available. Should have different number for Spanish-speakers otherwise they will hang up as soon as they hear English.

Hispanic/Latino Indianapolis Key Informant # 1:

No knowledge of its services—another guess

Hispanic/Latino Indianapolis Key Informant # 2:

They don't know about it

Hispanic/Latino Indianapolis Key Informant # 3:

Information and the language

Hispanic/Latino Indianapolis Key Informant # 4:

I would guess that it is in par with the utilization of other health services. Lack of education that this service exists and dissemination of this information to this community in a way that it reaches the people that need to use it.

Elkhart County Key Informant # 1:

The reasons could be they are not aware of the Poison Center, they have not been told, or they don't know what it is.

Elkhart County Key Informant # 2:

Once again, language barrier, lack of information in English about the Poison Center

Elkhart County Key Informant # 3:

They have not been in need of the Poison Center. In addition, if somebody suggest them to utilize the Poison Center they are not aware if the services are offered in Spanish, or what kind of information is asked in order to receive the service, or if they have to pay something for the call.

Madison County Key Informant # 1:

Not aware, the language

Madison County Key Informant # 2:

Lack of awareness of its existence: knowing whether they're poisoned: concerned person on the other end will speak Spanish.

Madison County Key Informant # 3:

Not aware.

La Porte Key Informant # 1:

They don't know it exists- lack of marketing in the Hispanic Community.

La Porte Key Informant # 2:

Literacy, the fact that many can not read, trust

La Porte Key Informant # 3:

Most don't know it is available; they just go to the emergency room.

Lake County Key Informant # 1:

They don't know about the center; they are not culturally sensitive

Lake County Key Informant # 2:

Many of those that are aware are hesitant because of immigration status and fear.

Lake County Key Informant # 3:

Unaware of center, Need literature in Spanish

11. (If not listed in response to #10) Do you think Hispanics/Latinos are less aware of the Indiana Poison Center?

St. Joseph County Key Informant # 1:

Yes. Free magnets along with using the local Spanish radio station with PSA's on what the center is for.

St. Joseph County Key Informant # 2:

Sabor Latino (local radio station). Presence at health fairs. Provide food and childcare at events where education is provided. Strong presence where Latinos attend (Indiana Health Center, La Casa, Marycrest, WIC/BABE). Support more programs that go door to door to educate.

St. Joseph County Key Informant # 3:

Education. Through groups already in the community. Church, radio, hospital, clinics. Have a line that answers immediately in Spanish.

Hispanic/Latino Indianapolis Key Informant # 1:

Yes

Hispanic/Latino Indianapolis Key Informant # 2:

Yes

Hispanic/Latino Indianapolis Key Informant # 3:

Yes

Hispanic/Latino Indianapolis Key Informant # 4:

(no answer)

Responses on Follow-up question: If you Answer “Yes”, what advice you can give us on how we might effectively increase their awareness?

Hispanic/Latino Indianapolis Key Informant # 1:

Info about why they should call and help that is available

Hispanic/Latino Indianapolis Key Informant # 2:

More campaigns in Spanish

Hispanic/Latino Indianapolis Key Informant # 3:

With a bilingual person and excellent promotion

Hispanic/Latino Indianapolis Key Informant # 4:

The key thing for all us that are trying to reach this community (and not just the Poison Center) is that this community has very little free time. We have to be more creative in catching their attention, which might be through mailings, radio, TV, and some of the local Latino papers, as well as reaching them at their place of worship.

Elkhart County Key Informant # 1:

Basically by just sending out people that speak Spanish and explaining about the services it provides

Elkhart County Key Informant # 2:

Not than any other culture, if you say compared to the American culture, probably so.

(What advice can you give us on how we might effectively increase their awareness?)

Probably with the distribution of flier in Spanish

Elkhart County Key Informant # 3:

Oh, yes.

Follow –up IF THEY ANSWER “YES”...What advice can you give us on how we might effectively increase their awareness?

Publish all the information in Spanish in places or media that Hispanics visit, read or watch.

Madison County Key Informant # 1:

Yes

Get more information out and realize that many can not read (Spanish).

Madison County Key Informant # 2:

Yes

Advertise in Spanish newspapers, Spanish TV, radio programs, at Spanish grocery stores and clinic.

Madison County Key Informant # 3:

Yes

Teach it in school to the young children and notify the parents.

La Porte Key Informant # 1:

Yes, market more in the Hispanic Community, Churches, El Puente Center

La Porte Key Informant # 2:

Yes

La Porte Key Informant # 3:

Yes, have more workshops for Hispanics on services available, talk with the doctors they visit.

Lake County Key Informant # 1:

Yes, provide Spanish language cultural sensitive in English materials

Lake County Key Informant # 2:

Yes, provide Hispanic advocates to educate the community.

Lake County Key Informant # 3:

Yes, promote through radio publicity

12. (If not listed in response to #11) Do you think Hispanics/Latinos are less comfortable contacting the Poison Center, if they need to use it and are aware of it?

St. Joseph County Key Informant # 1:

Probably not comfortable using it because it is an unusual concept, one they are not used to—an American concept, one that they are not used to such a service.

St. Joseph County Key Informant # 2:

It is widely known that a Spanish-speaking person will answer—announce in Spanish. Not have through an English-speaking person first to get to the Spanish-speaking person. Those that are more likely to poison are those that just got to the U.S. If you are used to working with harsh chemicals in household and working in the fields with pesticides you don't know that there are alternatives that are more body-friendly.

St. Joseph County Key Informant # 3:

Yes, they are scared, especially if someone answers in English. They don't know that can call for information. Latinos also use a lot of health products that are not from here, like herbal medicine from Mexico or other countries. This should be another type of information they should look into, common herbal medicines, etc. that are actually harmful.

Hispanic/Latino Indianapolis Key Informant # 1:

Yes

Hispanic/Latino Indianapolis Key Informant # 2:

(no answer)

Hispanic/Latino Indianapolis Key Informant # 3:

Yes

Hispanic/Latino Indianapolis Key Informant # 4:

I don't believe that they are less comfortable. I believe it's a matter of utilizing the service, having a positive experience, and then having that positive experience permeated among the rest of the community.

Responses on Follow-up question: If you answer “Yes”, why do you think they are not as comfortable?

Hispanic/Latino Indianapolis Key Informant # 1:

(no answer)

Hispanic/Latino Indianapolis Key Informant # 2:

Language barriers, legal status

Hispanic/Latino Indianapolis Key Informant # 3:

Customer service is in English

Hispanic/Latino Indianapolis Key Informant # 4:

(no answer)

Elkhart County Key Informant # 1:

Yes, probably, is because they don't know about it or because of the language barrier

Elkhart County Key Informant # 2:

No response

Elkhart County Key Informant # 3:

No

Madison County Key Informant # 1:

Yes

Language

Madison County Key Informant # 2:

Yes

Language

Madison County Key Informant # 3:

Yes

They would be hesitant if they think no one at the Center could speak Spanish or if they can speak English and their English is not very good.

La Porte Key Informant # 1:

Yes, because of lack of knowledge, some are not legal, lack of trust.

La Porte Key Informant # 2:

They are not comfortable using a service they are not familiar with.

La Porte Key Informant # 3:

Yes they are less likely to use poison control center –many need to know that information collected will not send them back to the old country.

Lake County Key Informant # 1:

(no answer)

**More comfort seeking information from family and friends
Most use their own remedies**

Lake County Key Informant # 2:

Yes

Again, fear as illegal immigrants

Lake County Key Informant # 3:

**Yes
Immigration status**

13. If a member of a Hispanic/Latino family was poisoned, who would they most likely turn to for help?

St. Joseph County Key Informant # 1:

911 or relatives

St. Joseph County Key Informant # 2

Mom and if not available the next accessible female relative or friend. Or husband (if you are the mom). Husbands care very much about health.

St. Joseph County Key Informant # 3

911. Clinic or emergency room. In the Latino countries we do not have 911, so they run to the emergency room. A cultural custom. Accustomed to another system.

Hispanic/Latino Indianapolis Key Informant # 1:

Family member, emergency room

Hispanic/Latino Indianapolis Key Informant # 2:

Hospital

Hispanic/Latino Indianapolis Key Informant # 3

Emergency 911 or hospitals

Hispanic/Latino Indianapolis Key Informant # 4

They would probably turn to the most respected, knowledgeable, trustworthy family member or close friend. Trust would be huge amongst the Latino family.

Elkhart County Key Informant # 1:

Most of the time as more common for them, they go to the ER or their family doctor if they have one, but most likely the emergency room

Elkhart County Key Informant # 2:

Probably they would go to the emergency room

Elkhart County Key Informant # 3:

The emergency room.

Madison County Key Informant # 1:

Another trust issues, family, friend, or some they or some one else

says they can trust.

Madison County Key Informant # 2:

Friend, family member, or last resort hospital.

Madison County Key Informant # 3:

The emergency room.

La Porte Key Informant # 1:

They would call Dr. Monica or go to the emergency room.

La Porte Key Informant # 2:

They would go to the emergency room.

La Porte Key Informant # 3:

Emergency room.

Lake County Key Informant # 1:

Family and friends

Lake County Key Informant # 2:

Physician or emergency room

Lake County Key Informant # 3:

Family or hospital (emergency room)

14. What advice do you have for us to help the Hispanic/Latino community become more aware of the Indiana Poison Center and help them feel more comfortable contacting the Poison Center when they need it?

St. Joseph County Key Informant # 1:

Using Spanish radio station, PSA announcements for a couple of months. Magnets with the number available at all clinics, especially low income clinics. Everyone that receives state funds—make information a part of outreach services that we provide.

St. Joseph County Key Informant # 2:

Covered already. Use Spanish churches, newsletters, newspaper, local Spanish radio station, person-to-person contact, local health fairs, and Latino gathering places. Take marketing lessons from banks and grocery stores on how to access attention—they get to the bottom line—they provide free childcare, food, seminars. Places where people congregate.

St. Joseph County Key Informant # 3:

Pass out information. Correct the system in place.

Hispanic/Latino Indianapolis Key Informant # 1:

Information blitz, Spanish and English, make outreach to community

Hispanic/Latino Indianapolis Key Informant # 2:

Have more information in Spanish; Do a big media campaign (radio, TV, magazines, newspapers)

Hispanic/Latino Indianapolis Key Informant # 3:

Advertising bilingual customer service or delivering information with flyers or by TV.

Hispanic/Latino Indianapolis Key Informant # 4:

I don't have any statistics or knowledge as to the total usage of the Poison Center and then what percentage of those respondents are Latino. Is it proportionate to the population?? Of those that did use the Poison Center, was it a positive experience? If so, spread and use that positive experience into a "marketing" campaign that would spread the word about the Poison Center. Establish trust and they will come...

Elkhart County Key Informant # 1:

I just say that spreading the word out in Spanish and explaining the services it provides

Elkhart County Key Informant # 2:

Like I said before by having a bilingual phone service available for the people that don't speak English and written information in

Spanish. In the clinic the answering machine is in English and most of the time people don't leave there information because they don't understand so now we have it bilingual.

Elkhart County Key Informant # 3:

Promote the services, 1800 number and general information in Spanish. Advertisement: Hispanic Television; Radio Station (for example, Radio Kañon in Elkhart County and Goshen area); Flyers in churches, Mexican stores, and schools; organize workshops to increase their awareness regarding the Poison Center and its services.

Madison County Key Informant # 1:

Education, do more out reach (see a real person), more verbal/oral communication.

Madison County Key Informant # 2:

Again advertise in Spanish newspapers, TV, radio, grocery stores, and clinic.

Madison County Key Informant # 3:

More awareness and let Hispanics know a Spanish speaking person is available

La Porte Key Informant # 1:

Provide information in English and Spanish at the local stores, churches, schools - children can take information home and read it to parents.

La Porte Key Informant # 2:

Put the information where Hispanics frequent.

La Porte Key Informant # 3:

Make information available in all social service agencies and ask persons in those agencies to READ information to them.

Lake County Key Informant # 1:

Having people who are like them to communicate with them, to educate them, use the churches (Hispanic) as a communication education center

Lake County Key Informant # 2:

Hire Community Advocates of Hispanic to effectively educate citizens.

Lake County Key Informant # 3:

Provide:

- Literature that is culturally sensitive**
- Literature in Spanish**
- Educator who is both culturally sensitive and speaks and interprets Spanish**