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Et al.

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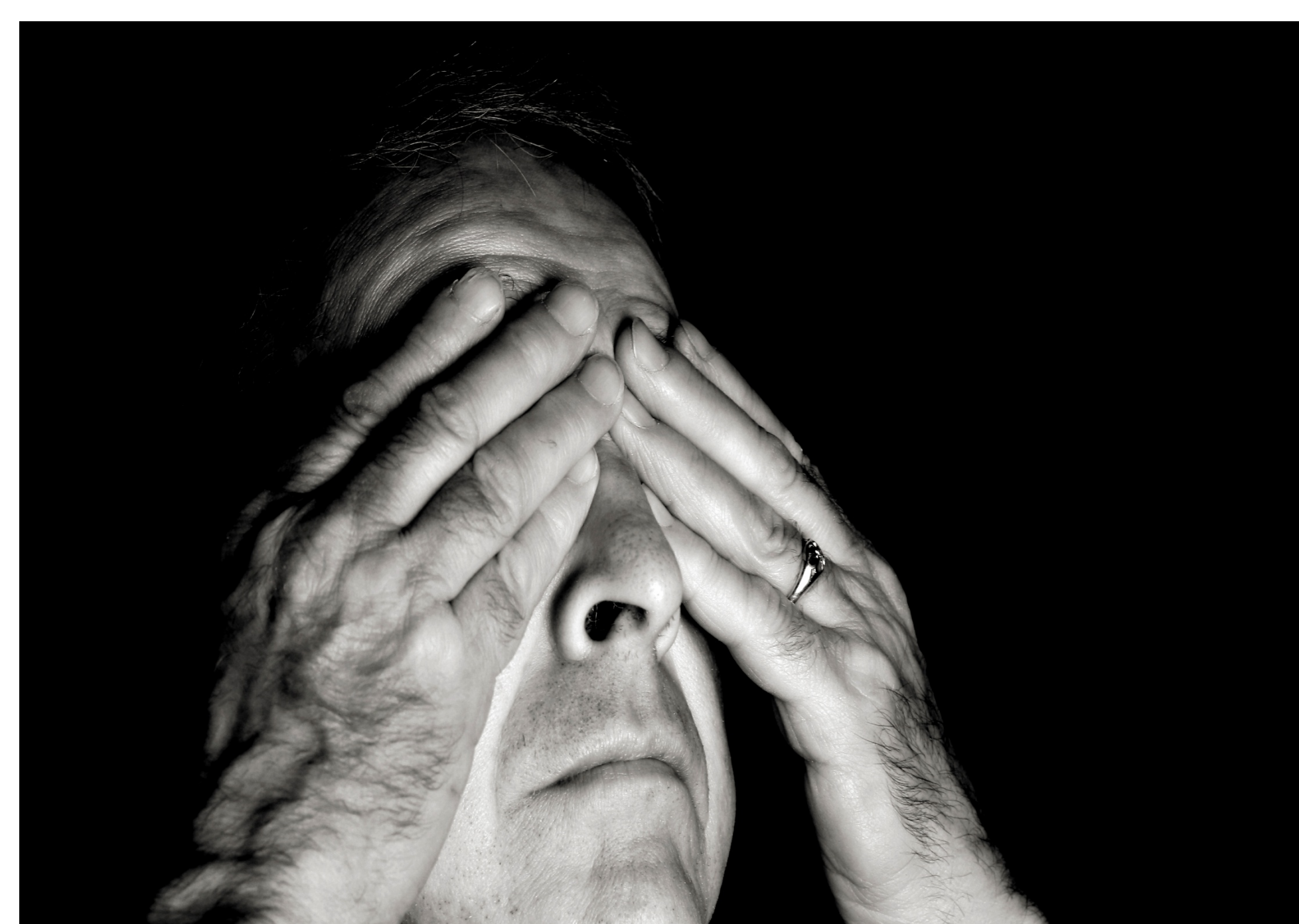
Understanding Sleep Patterns in the Brazilian Community in Lowell, MA: Perspectives from Community Health Workers and Healthcare Consumers



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Introduction

The purpose of this study was to collect pilot data on the sleep and medical/psychiatric health of immigrants from the Brazilian community in Lowell, Massachusetts. Studies on Brazilian immigrants are rare in the United States.



The first objective was to seek information related to sleep, sleep dysregulation and medical/psychiatric health from consumers of healthcare services within the Brazilian immigrant community in Lowell. The second objective was to solicit information from Brazilian community lay health workers (Promotoras) regarding their impressions of factors related to sleep dysregulation with members of the Brazilian immigrant community in Lowell. Both groups participated in focus groups. In addition, the immigrant healthcare consumers completed a Health Questionnaire, the Pittsburgh Sleep Quality Index and the Epworth Sleepiness Scale.

The study was supported by a seed grant from the University of Massachusetts Lowell School of Health & Environment with additional funding from the Office of the Provost

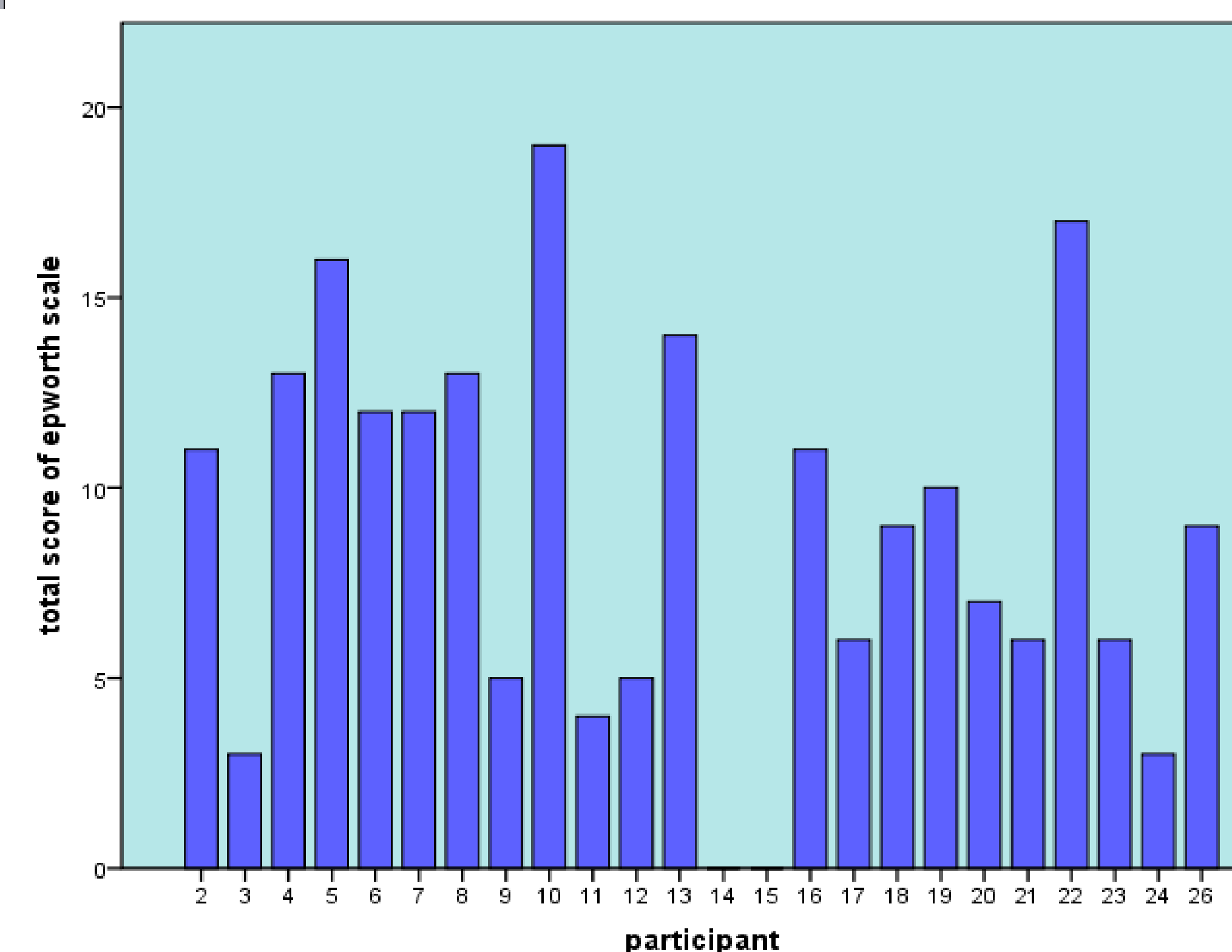
Methods

We conducted three focus groups with Brazilian healthcare consumers with the participation of 25 Brazilian immigrants, and one with 8 Brazilian lay health workers or Promotoras. Promotoras are specially trained members of the Brazilian community who serve as liaisons between their community and health, human, and social service organizations in Lowell, such as the Lowell Community Health Center and the Massachusetts Alliance of Portuguese Speakers (MAPS). They work formally and informally with individuals, families, and local organizations to bring health-related information to their communities.

Twenty two of the focus groups participants were females, while 10 were males. The focus groups lasted 1.5 hours and were conducted in the Lowell office of MAPS in the spring and summer of 2010. The topics addressed in the focus groups included: quality and duration of sleep; problems associated with sleep; sleepiness during the day; safety concerns related to sleepiness; relationship between work schedule and sleep; use of medications to assist sleep; amount of daily use of stimulants to combat sleepiness; knowledge and perceptions of the relationship between sleep and diseases such as diabetes and psychiatric disorders; and suggestions for informing the community about sleep-related issues.

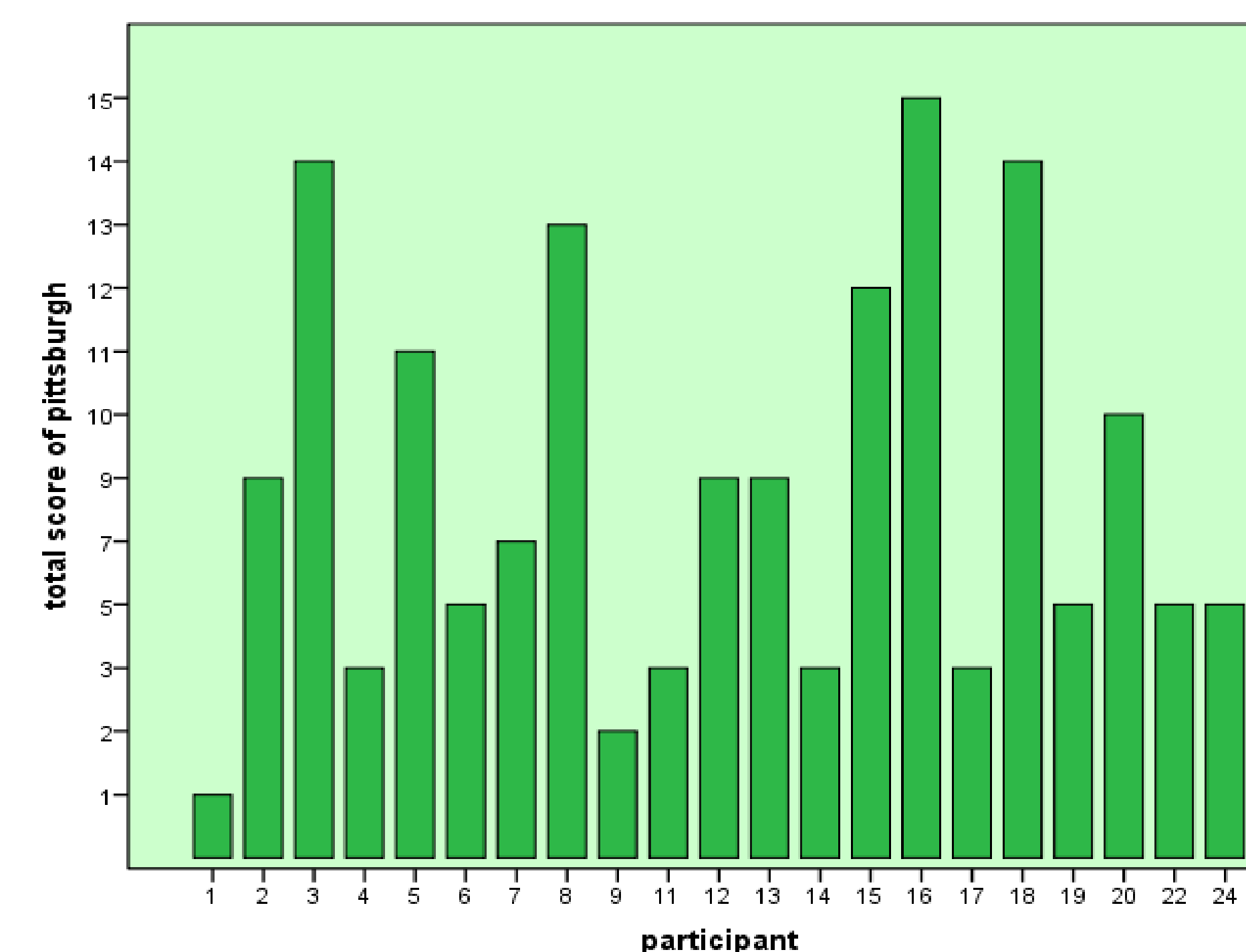
All focus group sessions were conducted in Portuguese by bilingual facilitators and audio recorded. The recordings were transcribed in Portuguese and translated into English by the same bilingual transcriber. Transcripts were analyzed for themes related to sleep dysregulation amongst Brazilian immigrants in Lowell.

Results



Descriptive Statistics

	N	Range	Minimum	Maximum	Mean	Std. Deviation
Age	23	57	15	72	42.39	13.086
Total score Epworth scale	24	19	0	19	8.79	5.183
Total score Pittsburgh	21	14	1	15	7.52	4.445



Conclusions

Most participants in the focus groups agreed that sleep deprivation is a common problem in the Brazilian community. According to several participants, many Brazilians sleep 4 or 5 hours a day, noting long work hours, irregular work schedules, high levels of stress and financial pressures. Common daily work schedules are in excess of 17 hours a day.

While it seems that the regular use of drugs to induce sleep does not seem to be common, high consumption of caffeinated beverages, such as Red Bull and coffee are common to combat excessive daytime sleepiness. Drowsy driving or falling asleep at the wheel were commonly reported. Impaired work performance due to sleep deprivation was widespread. Many participants reported that they or their spouses had poor sleep quality. They viewed sleep apnea, obesity, irritability, and excessive snoring to be associated with poor sleep quality. A few participants also reported depression, anxiety, and other psychiatric disorders as the reasons for their insomnia. Combined, these factors point to significant sleep-related morbidity.

The experience of participants with health care providers suggests that most providers, especially physicians, do not ask Brazilian patients about sleep-related issues during regular visits, unless the patients themselves voice complaints such as insomnia.

