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PERCEPTIONS OF CULTURALLY SENSITIVE OUTREACH WORK ON THE TERKKU PROJECT-IMMIGRANT THIRD SECTOR PERSPECTIVE-A QUALITATIVE STUDY

ABSTRACT

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Outreach being new, is gradually making its way into different sectors in Finland. With the help of Moniheli, a Non-Governmental Multicultural Organization, the Terkku project has helped push the course of outreach work in Finland. The two-year Terkku community health outreach project that ran from 2020 to 2022 focused on developing culturally sensitive outreach work amongst immigrants focusing on non-communicable diseases.

Through participating NGOs with immigrant backgrounds, the Terkku project helped mobilize and sensitize participants (target group) on all aspects of non-communicable diseases. Several holistic sessions were held with ex-pats of necessary fields and students of Diaconia and Laurea Universities of Applied Sciences to help immigrants on matters concerning non-communicable diseases in a culturally sensitive manner.

This thesis aims to discover the perceptions of culturally sensitive outreach work of the Terkku Project from the perspective of participating NGOs and collect recommendations on what could be done better. It was a qualitative research focusing on development. Data was collected via interviews and analyzed using the thematic data analysis method.

The findings of this study indicated the success of the Terkku project while relating to the Purnell model of cultural sensitivity. Participants indicated satisfaction with the knowledge gained during interventions. However, the findings of this thesis will help other NGOs and Moniheli (working life) with her other projects and possibly Terkku in the future, should they receive funding.

Keywords: Culturally Sensitive, Immigrants, Intervention, Non-Communicable Diseases, Non-Governmental Organizations, Outreach Work.

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1. INTRODUCTION

Outreach work has a history as a method of engaging individuals and communities whilst acting as an umbrella term for a wide range of activities designed to bridge both physical and ideological gaps between users and services (Mackenzie et al, 2011). The Cambridge Dictionary (n.d) definition of outreach work is a kind of service that makes an effort to bring services or information to people where they live or spend time. In relation to the main theme of this thesis, the outreach work, focuses on non-communicable disease(NCD) intervention for immigrants living in Finland through the Terkku project under the Moniheli organization.

According to Moniheli (2022), immigration has been recognized as one of the factors leading to a global health challenge, and immigrants possess a higher risk of developing chronic diseases. Culturally sensitive outreach work among the immigrant population of Finland is gradually gaining ground, especially among non-profit organizations including the Moniheli ry network. "Moniheli is a Finnish multicultural network which includes over a hundred member organizations supporting immigrant, integration, social inclusion, and advance equity". The 'ry' acronym at the end signifies a registered non-profit organization. Moniheli has, over time, managed many projects that include outreach work through its member organizations (Moniheli, 2022). The current project of Moniheli, the Terkku project focuses on outreach work targeted at the immigrant population of Finland to fulfill Moniheli's main objectives of integration, social inclusion, and equity (Moniheli, 2022).

This thesis is all about promoting the integration and advancing equity of immigrants in the Finnish community; it falls under the main goals of Moniheli. For these reasons, the thesis topic is equally current based on the United Nations 'Sustainable Development Goals of promoting good health and well-being and the reduction of inequality (United Nations, 2022). This thesis is going to describe the perceptions of culturally sensitive outreach work interventions on immigrants

of African, Middle Eastern origins, and Russian Speakers from the perspective of participating organizations. Different kinds of interventions were tried both online and physically, from which models were hoped to be formed. The findings aim to help Moniheli (Terkku Project) produce knowledge to support the development of the outreach models from the point of view of the participating organizations.

Culturally sensitive outreach work under the Terkku project started in the autumn of 2020. According to the Moniheli organization, the Terkku project was born due to the many factors affecting immigrants' health in Finland: darkness, cold weather, lots of indoor hours, etc. It was also due to the fact that many immigrants in Finland are not aware of how to deal with these factors affecting their health. As a result, the risk of chronic disease increases and prevention is the key (Moniheli, 2020). The main objective of the Terkku intervention project was to improve the health of immigrants. Secondly, to increase the capacity of health organizations and health professionals to interact with multicultural cultures (cultural sensitivity). Thirdly, it had as a goal to strengthen coordination between different multicultural organizations and health organizations. Lastly, it aimed to train cultural mediators to support and encourage the development of culturally sensitive healthcare services (Moniheli, 2023). This research seeks to find out how beneficial such projects can be to the immigrant population via the participating organizations representing them. It will in the course of it, investigate the experiences of participants (first- and second-generation immigrants of African countries, Middle Eastern countries, and Russian speakers) relating to non-communicable disease prevention. Non-communicable diseases (NCDs) in this context also known as chronic diseases are diseases of long duration and result from a combination of genetic, physiological, environmental, and behavioral factors (WHO, 2021).

So far, the project organized cultural mediator training, chronic disease awareness interventions, and breast/cervical cancer awareness interventions. The three-year Terkku project ended in Autumn 2022. The project organizers are interested in knowing how successful the project was and how to further develop

the models for future similar projects. The Funding Centre for Social Welfare and Health Organisations (STEA) funded the project. The Terkku project did not succeed in getting further funding from STEA.

2. OUTREACH AND BACKGROUND

2.1 Outreach Work

Health sector outreach work is a phrase used to describe any type of health service that mobilizes health workers to provide services to the population or to other health workers, away from the location where they usually work and live (Roodenbeke et al, 2011). In another perspective, community health outreach provides health-related services to community residents who are at a socioeconomic disadvantage or old and/or lonely. The definition is contextual and often relates to the community in question. It is sometimes referred to as "detached," "street-based," or "preventive work" (Shin et al., 2020). In the context of this research, outreach work is focused on immigrants from African, Middle Eastern Countries and Russian speakers.

Non-communicable diseases (NCDs) also known as chronic diseases are those that tend to be of long duration and are the result of a combination of genetic, physiological, environmental, and behavioral factors (WHO, 2021). According to the World Health Organization, detection, screening, and treatment, as well as palliative care, NCDs have been well responded to (WHO, 2021)

2.2 Outreach in Finland

The phrase 'outreach work' does not translate directly to any Finnish word and the nearest translation is "etsivä työ" or "jalkautuva työ" a term commonly used in Moniheli. That shows how narrow the whole concept is in the Finnish language and how much more needs to be done, especially in the English language. In terms of background material, research in English on outreach work in Finland is scarce. No research in English exists on outreach work in Finland focused on immigrants of African origin and Middle East. Existing research on outreach work

focus on care poverty among the elderly (Sihto and Van Aerschot, 2021), attempted suicide, and mental disorder among young adults (Suokas et al., 2011). Internationally, in America for example, there are numerous research similar to this. Primary healthcare for Korean immigrants: sustaining a culturally sensitive model by Kim et al. (2002) seeking to promote primary health of Korean immigrants in Chicago. It describes the needs of this population and strategies used in addressing Korean immigrants' mental health needs emphasizing outreach work in collaboration with other partners. Gorman et al (2013) in 'Reaching the hard to reach, Lessons Learned from a Statewide Outreach Initiative' uses an outreach model to address underutilized federal assistance programs in the United States of America focusing on eligible immigrants and low-income earners. Leung (2020) in her 'Concerns about Suicide among Asian Americans: The Need for Outreach?' seeks to effectively reduce the increasing rate of suicide among Asian Americans using an outreach method of creating awareness, especially in Asian-dominated communities.

It is therefore deemed necessary to carry out this research in English and in Finland surrounding the concept of NCD, outreach work, and cultural sensitivity
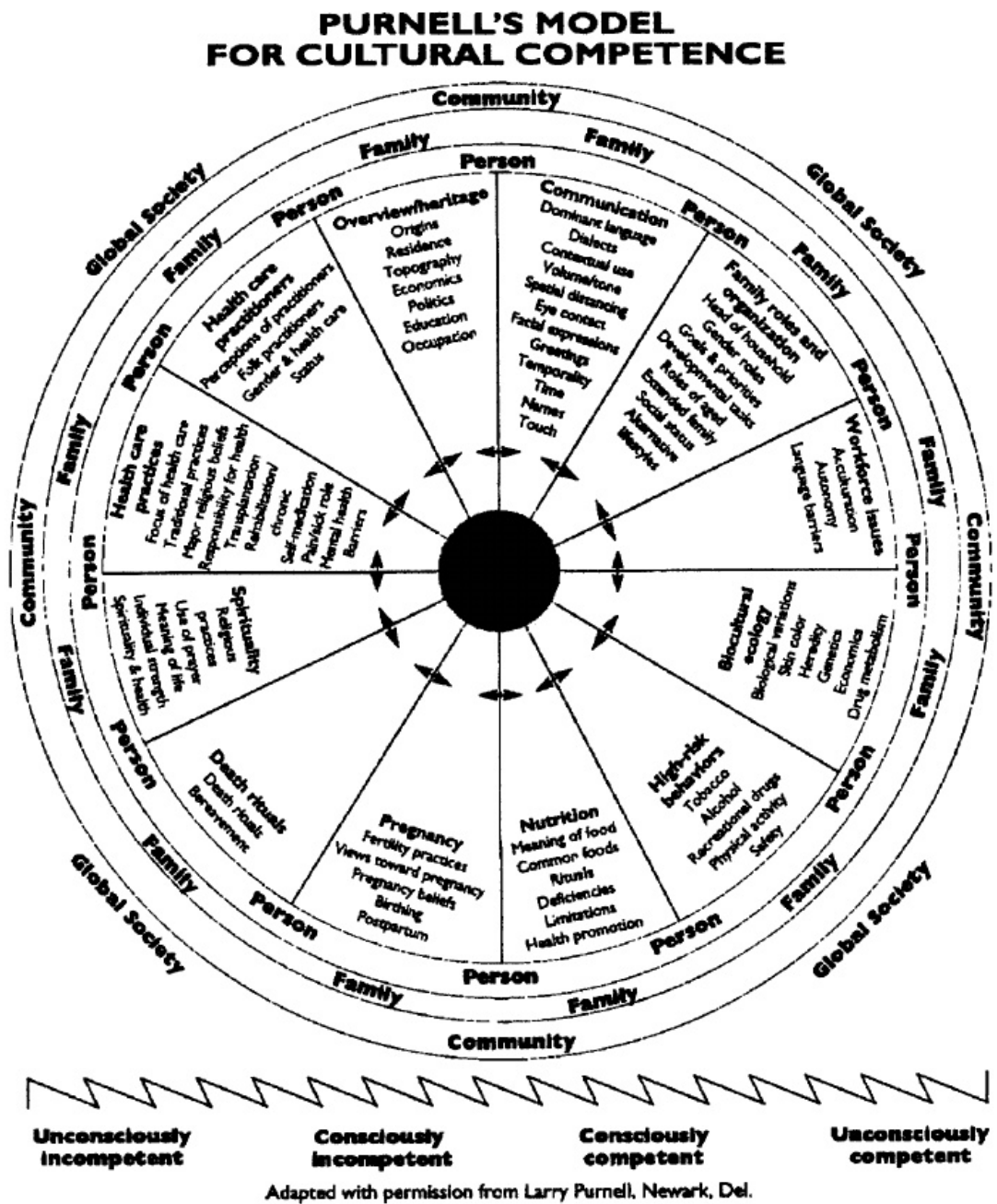
3. CULTURAL SENSITIVITY

Amongst other models and theories, the 'Purnell model for cultural competence' relates to this thesis with a focus on the prevention of NCD in a culturally diverse network (Moniheli). In most communities, the recipients of care are seen as continuously adapting to a changing society, trying to maintain their most important values and beliefs as they interact in an increasingly diverse technological global society. It is in recognition of this concept and the whole Purnell model for cultural competence, that the Terkku project recognizes the importance of recognizing the existence of cultural diversity in the Helsinki metropolitan area. The healthcare students of Diaconia and Laurea Universities of Applied Sciences in the same context have helped in the planning, implementation, and evaluation of cultural sensitivity in interventions. The Terkku project in so doing, visited member organizations to formulate, test, and evaluate different models of culturally sensitive outreach work including encounters with target groups at different thresholds interventions (Moniheli, 2022). In line with the Purnell model, healthcare providers and recipients of care have a mutual obligation to share information to obtain beneficial outcomes. The health professionals have the primary responsibility for creating an environment for openness to collect this information through organized outreach works.

The Purnell model for cultural competence is depicted in a circular diagram outlining different rims representing how to culturally define an individual and the factors affecting a person. The global society is on the outermost rim, the second rim represents the community in which the individual belongs, the third rim represents the family in which they belong and the inner fourth rim further represents them as a person. This 'person' is further divided into 12 pie-shaped wedges representing cultural domains and concepts that are interrelated with each other because a person cannot be simply defined by one aspect. Purnell leaves the center

empty representing the unknown factors about the cultural group. The erose line at the bottom of the circle represents the nonlinear concepts relating to health care providers and organizations. It is evident from the diagram that knowing and defining a person becomes even clearer the further inside you go.

Figure 1. Purnell's model for cultural competence. Source: Purnell 2000

PURNELL'S MODEL
FOR CULTURAL COMPETENCE

Unconsciously incompetent — Consciously incompetent — Consciously competent — Unconsciously competent

Adapted with permission from Larry Purnell, Newark, Del.

Purnell further justifies that delivering culturally sensitive and culturally competent care to individuals, families, and communities is essential for health promotion and maintenance, illness and disease prevention, and effective interventions as is the case of the Terkku project. Outreach healthcare providers or facilitators who can assess, plan, and intervene in a culturally competent manner increase the possibility of preventing NCD through outreach interventions given the complexity of ethnicity and culture. The Purnell model can therefore serve as a guide to the development of assessment tools, planning strategies, and individualized interventions as it is intended for use by all healthcare providers (Purnell, 2005).

4. MONIHELI ORGANIZATION

The Terkku project under the umbrella of Moniheli is one of those projects aimed at carrying out outreach work in collaboration with member organizations, Diaconia and Laurea Universities of Applied Sciences, and professionals in the health and social care sector. The main goal of the project was to design, test, and evaluate different models of culturally sensitive outreach work on non-communicable diseases among people of African or Middle Eastern origin (Moniheli, 2022). Three cultural mediator trainings for professionals with an immigrant and/or multicultural background in the social and healthcare sector were organized. These trainings helped strengthen professionals' competencies in culturally sensitive work as well as participants' ability to use their own multicultural background and competence in their work(Moniheli, 2022). Due to the COVID-19 pandemic and the reduction of respondents, the sample size was expanded to include an organization of Russian Speakers. It does this by carrying out outreach works aiming at early detection and referral of participants with worrying signs/symptoms for proper screening and possible treatment in hospitals.

The primary characteristic of outreach work including the Terkku project is the fact that professionals and outreach teams are not stationary, but rather always mobile and ready to meet target groups in other locations and at interventions. Trust is strengthened and sensitization is expanded beyond the local threshold. For such outreach work to be successful, outreach workers need to possess qualities including enthusiasm, friendliness, empathy, flexibility, and communication skills. The outreach workers do not necessarily have to be from a particular background.

5. PURPOSE, AIM AND RESEARCH QUESTION

The purpose of this thesis is to describe perceptions of culturally sensitive outreach models to immigrants based on the representatives of the participating organizations. It is a qualitative approach, and the results will further influence the planning of future similar interventions for Moniheli and other organizations.

The thesis aims to produce knowledge to support the development of outreach models on the prevention of NCD from the perspective of representatives of the participating organizations. In so doing, tools for working with different multicultural clients are provided and expertise to work in a multicultural environment is gained (Moniheli, 2022). These trainings were organized by a lecturer from Laurea University of Applied Sciences with years of experience in multicultural work, who also doubles as the chairperson of the Heed Association Finland. The Heed Association is an immigrant organization that aims to promote the health, integration, and education of African immigrants in Finland (Moniheli, 2023). The target group on the other hand benefits from the knowledge gained from organized outreach model sessions via the respective persons who participated in the trainings. They get to know more about their health and signs/symptoms to look out for depending on the topic of discussion. Knowledge gained during the training sessions was not directly used as data in this thesis.

Research questions will be linked to the purpose of the thesis while seeking to find out how successful the outreach models have been in the promotion of immigrants' health on non-communicable diseases to Moniheli. At the end of the outreach work and analysis, we should be able to answer the following questions.

1. What kind of perceptions there were of culturally sensitive outreach models amongst immigrants based on the representatives of participating organizations?
2. How the culturally sensitive outreach models could be developed in the future from the viewpoint of participating organizations?

The responses from the representatives of the participating organizations will reflect firsthand information achieved during the outreach project.

6. RESEARCH METHODOLOGY, DATA COLLECTION AND DATA ANALYSIS

6.1 Research methodology

Chambers (2013) views qualitative research design as that which is implemented based on the commonality of a lived experience in a particular group using interviews performed with individuals having firsthand knowledge of an intervention like outreach work. The methodology chosen for this research is further justified by Isaacs (2014) as he emphasizes the fact that findings following this methodology explore a social and human problem. Thus, helping the researcher build a complex, holistic picture, analysis words, detailed views of informants, and usage of natural settings. Kothari (2004) emphasizes that qualitative research is more focused on any phenomenon related to quality or kind and about any human behavior. Thus, experiences from the outreach models on the perspective of representing organizations are of utmost importance.

6.2 Participants and data collection

To get firsthand information and perceptions on the outreach models, participating organizations representing immigrants from African, and Middle Eastern origins and Russian speakers were targeted at the data collection process. There were originally seven organizations participating in the outreach project. These organizations were all member organizations of Moniheli and of foreign backgrounds.

The participants of this study are representatives of each member organization, seven in total. It was up to the organizations to nominate one representative which was likely the person with firsthand information on the project. This is in accordance with the fact that an interview as a form of data collection is effective in soliciting and documenting, the words of an individual's or group's perspectives, feelings, opinions, values, attitudes, and beliefs. It is also about

their personal experiences and social world, in addition to factual information about their lives (Saldana et al, 2011).

With the help of Moniheli's Terkku Project coordinator, contacts of participating organizations were made. Emails were sent to the above-mentioned contacts informing them (Information letter in Appendix 2) of the intention of carrying out research as such. To those who responded and were willing to participate, consent letters (Consent letters found in Appendix 3) were sent as follow-up. Upon receipt, some interviewees signed consent letters and sent them back while others returned on the date of the interview. Interview dates were then organized with four organizations that responded and interviews were conducted via the Teams Video Conferencing tool. The participating organizations will not be named to avoid any form of identification and maintain confidentiality.

Interview sessions were arranged, and data was collected between November and December 2022. Data was primarily collected and recorded using personal interviews (interview questions in Appendix 1) with voluntary participants meeting them face-to-face via the Teams conferencing tool. Recordings were made using the Teams media conferencing in-built recorder. Interview questions were carefully formulated to embody aspects of the research questions and the main purpose of the thesis. Questions were kept short and concise to avoid confusion and get intended answers from participants. Interviews varied between 40 to 50 minutes and were all recorded with permission from the interviewees. The data was later transcribed into an average of 40 pages in New Times Roman font style, 12 font size, and 1.5 line spacing. The text was made up of all conversations during the interview consisting of some short sentences as well as long ones. After the transcription stage, data was analyzed. The thematic method of data analysis is chosen to get in-depth knowledge from project participants who have firsthand information on the project (Chambers, 2013), and focus or capture additional useful information.

The popular standardized open-ended question method was used in which the researcher asked identical questions to all participants. Even though questions in

this type of interview are strict and concise, there was a possibility for open-ended answers. The questions were worded in a way to allow participants to express their minds freely with detailed information (Turner, 2010). Questions were formed as neutral as possible without showing emotion to avoid biased answers or tilting the interviewee in the desired direction. The main goal of the interview questions was to answer the research questions and fulfill the purpose of the thesis. The interview questions were piloted/tested during thesis seminars with the help of peers and supervisors. This led to further editing of the interview questions making sure the questions came across as intended. Long and ambiguous questions were shortened, separated, and made easily understandable after piloting sessions.

The table below demonstrates the relationship between the research questions and interview questions.

Research questions	Related interview questions
1. What kind of perceptions there were of culturally sensitive outreach models amongst immigrants of African, Middle Eastern origins, and Russian speakers based on the representatives of participating organizations?	• What culturally sensitive outreach work models were planned? • How were culturally sensitive models represented during outreach sessions? • How were the planned outreach models implemented in your organization? • How in your opinion were cultural factors taken into account during outreach sessions? • What are your perceptions of the culturally sensitive outreach models? • What would you say are some of the current effects of this outreach work on the immigrant population?
2. How the culturally sensitive outreach models could be developed in the future from the	• How would you access the implementation of the models? • What did you achieve during the implementation phase and after?

viewpoint of participating organizations?	- How easy was it to get members of your organization to participate in the outreach project? - With regards to outcomes, in your opinion what long-term outcomes do you hope to achieve? - How would you wish to develop the outreach models for future purposes? - I am aware that some outreach work happened remotely. How would you comment on the differences between remote and face-to-face outreach work? How does this impact the results of the outreach work practice?

Table 1: Relationship between research questions and interview questions

The table above illustrates the two foci of this thesis with research question one assessing the success of the outreach intervention and the second, looking for suggestions to improve similar interventions in the future. In other to formulate the table, the research questions and interview questions were put side-by-side and reviewed. After reviewing, it was clear which questions fall in what category of the research question. By determining that, it was therefore straightforward to create the table.

Research question one and supporting interview questions seek to get in-depth knowledge of the outcome of the intervention. Interview questions targeted participating organizations to get diverse perspectives on the intervention outcome giving room for discussion and more diverse answers to questions.

Research question two looks closely at the results at hand while proposing future solutions to make similar interventions even more successful. I think this is the most valuable part of the piece of work because Moniheli and similar organizations are likely to host similar interventions in the future.

6.3 Data analysis

Interview sessions were recorded with the permission of the interviewees. After the interviews, the audio was transcribed (Rohit et al., 2021) and transcribed data was analyzed using the thematic data analysis method to help classify the answer into themes allowing easy interpretation and analysis. An inductive approach to data coding and analysis (bottom-up) approach was used. This was driven by the content of the data. This means the codes and themes are derived from the content of the data itself to help the researcher closely match analysis to the content of the data (Braun & Clarke, 2012). Data collected for this research was transcribed using basic-level transcription (Finnish Social Science Data Archive, 2022.) because interview sessions were the only means of data collection.

Data was analyzed using the stratified coding system developing themes and categories. These themes are highly related to the thesis topic and research questions (Braun & Clarke 2012).

A thematic data analysis will best suit this research theme because it is considered the most appropriate for any study that seeks to interpret conferring accuracy and intricacy to enhance the research's whole meaning (Alhojailan, 2012). This method comprises familiarizing oneself with the data by reading and re-reading, coding the whole text while searching for themes. These themes will then be reviewed to make sure they fit the data and if they do, that they are defined and named.

Familizing oneself with available data → Generating initial codes → Searching for themes → Review potential themes → Define and name themes → Coherent narrative/report

Illustration 1: Generated from text (Rucker, 2010)

After all this is concluded, a coherent narrative will be made that includes quotes from the interviewees (Rucker, 2010). Illustrated above are the steps to follow to get results. Given the chosen data collection method used, there is a tendency to deal with cumbersome data. Separating this data into themes requires the researcher to listen to the material thoroughly. According to Gall, Gall, and Borg (2003), as cited in Turner (2010), this reduces the researcher bias within the study if the interviews involve diverse participants.
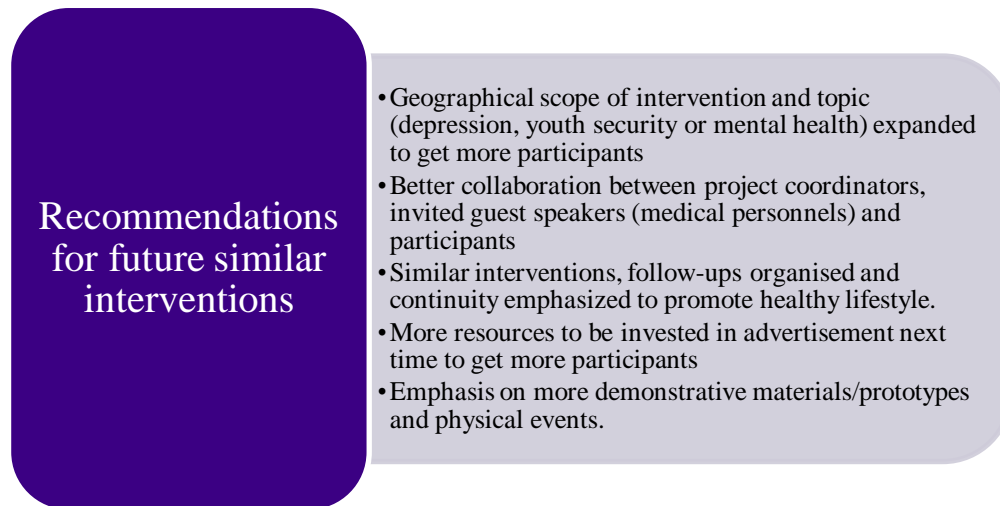
successes recorded	• Culturally sensitivity consideration • Immigrant encouragement in taking health factors more seriousely, health checks and benefits of healthy food preparation demonstration • Benefits of aiding students do research • Ability in accessing health care online

B.

Points of improvement	• Low turnout and motivation to participate by immigrants • Limitations presented by online sessions and the COVID-19 era • No continuity disadvantage and sponsor for the next project. • Lack of intervention originality.

C.

Recommendations for future similar interventions

- Geographical scope of intervention and topic (depression, youth security or mental health) expanded to get more participants
- Better collaboration between project coordinators, invited guest speakers (medical personnels) and participants
- Similar interventions, follow-ups organised and continuity emphasized to promote healthy lifestyle.
- More resources to be invested in advertisement next time to get more participants
- Emphasis on more demonstrative materials/prototypes and physical events.

Figure 2: Development of themes(A, B and C)

As seen in the above illustrations (A, B, and C), themes were developed after reading and re-reading the transcribed materials from the interview sessions. Three illustrations (themes) were developed to cover the most important aspects of the project. Illustration 'A' covers the successes recorded during the intervention, illustration 'B' covers factors that could be improved, and 'C' covers the proposed recommendations. While reading, patterns and connotations were identified. Illustration 'A' focuses on the success factors of the project with data with similar patterns classified forming codes and themes. These codes were carefully reviewed to make sure they correspond to the original data collection. The same pattern was observed with illustration 'B' and illustration 'C'.

7. RESULTS

Results were subdivided into three themes for better understanding. These sections were carefully considered to answer research questions and fulfill the overall purpose of this study. From the results which are going to be explained in detail in the sections to follow, the outreach intervention organized by Moniheli through the Terkku Project recorded successes, and points to improve for next time's purpose. There were a massive number of suggestions aimed at helping similar interventions of Moniheli as well as other organizations. For clarity and privacy, extracts in the results section will not be classified/named in any form to maintain privacy and uphold secrecy. participating in the outreach intervention.

The following section is going to be elaborate with detailed data presented to establish clarity. Direct quotes from the interviewees will be added to support their views. Results are going to be presented in the following sections under the heading 'positive effects', 'points to improve', and 'current state with recommendations for the future'.

7.1 Success factors of the outreach intervention

Cultural sensitivity consideration

This factor in my opinion is the notable success factor of the intervention. Cultural factors were well considered since this was a culturally sensitive intervention involving all immigrants. Immigrant organizations were a good place to start because they are already a community that knows their boundaries. Statistic relating to immigrants was well utilized in getting a suitable target population for NCD.

"They were trying to relate to our community."

To make it more culturally inclusive, there was a standby translator at one of the events to help translate in case there was a need.

"We even had a translator to help us in situations where language was a problem"

The interviewees made mention of sensitive issues considered and discussed with separate groups about culture. Muslims for example Somali speaking women.

"Uh, cervical cancer, for example, with women and the cervical cancer screening with women! When it came to demonstration/prototypes, men would be very uncomfortable."

In the same light, participants were allowed to shop for food items used during healthy living demonstration sessions. Participants with Muslim backgrounds in this way were assured of the compliance of food items to religious beliefs.

"We got halal-compliant items ourselves from the shops."

It was therefore easy to navigate based on the fact that cultural factors were considered, and each group had the same background. To this same effect, there was an interpreter in place to help with language barriers.

One group of participants (Russian speakers) was not affected by any cultural considerations. No ethical considerations were taken into account since the Russian speakers are mostly Europeans who share the same culture and diet requirements.

<u>Encouraged Immigrants to take better care of their health.</u>

This code in the intervention program is one of the key reasons why the outreach program took place. Encouraging immigrants to take better care of their health. It is generally agreeable that a big chunk of the immigrant population of Finland (especially elderly/males) do not take their health as seriously as they should.

"Like I hope to have like a healthier people in the future like a make those old people not to think that their life is stopped and they start to think about".

"Being old and unhealthy are two different things"

In one session where basic health checks were performed, participants had the chance to get tested for blood pressure, sugar levels, and cholesterol levels.

"….one participant had a very high sugar level and was advised on what to do."

It was noted by the participants that most elderly do not see it worth taking care of themselves after the age of forty because they assume themselves as old.

"Interest in improving healthy lifestyle especially as above 40 years Arabic men stop taking care of themselves because they feel they are old enough and it is no more important to take care of their health. There is an Arabic expression saying 'big tummy in men comes with good prestige'".

Nonetheless, there was a participant who had a different point of view from most of the other participants. In her opinion, there is not much difference in how they take care of their health agewise or genderwise.

"We don't give up easily on our health even as we age. After 40 years, we try to find a balance. This is because our bodies become slower as we age. So you need to take care of what you drink and what you eat. What you drink and how much you drink, if you drink alcohol for example "

From a completely indifferent perspective and hope for the future. Another participant was not so critical of the current event and thought it was a humble beginning for a better tomorrow.

"Still a long way to go but we have started on a good footing."

This participant thought lots of relationships have been established and working together on similar projects in the future has been made easy. She went ahead to acknowledge that there has been good collaboration with similar organizations who share similar goals and we are eager to continue.

In this same code, participants during some interventions were taught through demonstrations of healthy meal preparation options. This came to support the educative part of the intervention because people learn better when they watch and copy after a demonstrator.

Benefits of aiding students do research

Even though this thesis was focused on cultural outreach work for noncommunicable diseases for immigrants, there were other benefits attained. The Terkku project was done in collaboration with Diaconia and Laurea Universities of

Applied Science students. These students had this intervention as a course in their study path and it greatly helped them achieve the educational know-how they all deserved.

"To me, Terkku was not successful and the only success of it was the students (Laurea and Diak students) as it helped them write their thesis and study. …..the most clear success story about Terkku is exactly what exactly you are doing now. But to grassroots, no!"

"Our community lacks knowledge on many health factors and such events are beneficial even to the students involved".

It is no doubt that students benefitted and it served as a gateway to many outreach interventions for them.

<u>Ability to access health care online</u>

It is the internet era and most services are going online, especially with the COVID-19 pandemic that forced many people and professionals from operating from home. A systematic review from the UK analyzed 81 studies and reported that the utilization of healthcare in care facilities sharply decreased by about a third during the pandemic period, with greater reductions among people with less severe illnesses (Zhang & Ma, 2022).

"I think more people turned out because it is online and they can sit in the comfort of their homes and participate"

"More can attend online than in person because people are more connected to Facebook, and social media and can sit in the comfort of their homes to participate. they can put off their camera to comment, they are not shy and are more comfortable ".

It is sometimes convenient for shy people to express themselves when they are not very visible (just audio online sessions) and in the comfort of their homes. This was a plus to the event.

Another interviewee was not so sure if online sessions would increase turn-out/productivity. In her opinion, it hugely depends on the topic of discussion and other factors.

> *"Whether more people will attend online or offline depends on many things like the subject, the theme of discussion, location (if it is easy to access or not), means of transportation, how available you are (if you have kids, then online option)."*

As demonstrated above, there were a great number of successes recorded conforming to the purpose of the intervention.

7.2 POINTS OF IMPROVEMENT

On this theme, we will be looking at the aspects that did not go so well and what can be done to improve similar projects. Other associations would also be able to benefit from this knowledge.

Low turnout and motivation to participate by immigrants

The intervention in general had a lower turnout than was expected. All the interviewees had similar observations about this.

"Difficult to work with this group of people. They do not see the point of coming for this except they are sick. It was a good point adding demonstrations to make it interesting."

Low turnout in this situation too had a lot to do with low motivation and cultural barriers. Most immigrants would rather go to their jobs than attend events like this. Some of them do not get the point. One interviewee thinks the reason for this is that the intervention program was not properly advertised.

"More time needs to be put in next time for adverts to guarantee a better turn-out. There should be lots of work put in to prepare, find people and to make advertisements, to invite people and talk about the events."

From another angle, another interviewee thought turnout was low because the outreach intervention was a project without continuity. In their opinion, people tend to get attached to events that are continuous and that have some form of follow-up to them.

"It has been would have been good if we had more sessions."

"In the long run, I would suggest that it has to be constant and not just a project. We have to continue and do this continuously otherwise we will forget"

"We had an average of 8 people in our session"

In as much the above factors are mentioned, it is difficult to determine what number is considered as low, average, or many.

Limitations presented by online sessions and the COVID-19 era

Online sessions during the interventions triggered by the arrival of the COVID-19 pandemic cannot be underestimated. With the COVID-19 pandemic, the supply of face-to-face healthcare services was relatively insufficient, resulting in partial healthcare service disruption (Zhang & Ma, 2022). It is for this reason some sessions were held online due to the pandemic. To answer the question of how different sessions could be in terms of physical or online, interviews had the following to say. One interviewee is of the opinion that face-to-face contact is preferable because we are social beings.

> "*I believe face-to-face is better because we are social beings who need each other. Information can be gotten online but to be fully involved, it has to be physical.* "

She goes further to acknowledge the fact that online interactions are good in many cases but differ in the fact that outreach is completely not in the same category here.

> "*Working online is a nice opportunity but outreach is different. For example, you cannot do blood work online*"

Another also preferred for face-to-face sessions when asked. Medical demonstrations and explicit pictures can only be demonstrated effectively if done physically she noted.

> "*Explicit pictures/drawings used for in-person sessions are good but PowerPoint slides for online sessions are not so explicit.* "

She goes further to add that it is difficult for people to fully participate in online sessions because they are scared to ask private questions to the hearings of everyone.

>"It was a disadvantage to have some of these sessions online because face-to-face sessions are much better because people are more involved when it is physical. "It is impossible to have reactions online because people are not eager to ask a question even if they do not understand". "Want to tell their private things when there are so many people listening when they don't know who is participating and things like that? It's much, much more reliable to do this kind of thing face to face."*

In this same point, another thinks that prototypes can not be effectively demonstrated via a video conferencing tool.

>"Prototypes can not be shown online"*

She tries to further explain and support what the previous interviewee said earlier about the physical connection. She reiterates the fact that body movement, lip movement, and body language all matter when dealing with people face-to-face. People relate better and tend to be more involved in physical sessions as opposed to online sessions.

>"Professional language online may be difficult to understand to a layman but physically might be better to understand."*

To conclude on this aspect of online sessions, another interviewee says online sessions vary in effectiveness on many factors. The theme of discussion and other factors should be taken into consideration.

"Whether more people will attend online or offline depends on many things like the subject, theme of discussion, location (if it's easy to access or not), means of transportation, how available you are (if you have kids, then online option)."

"It is difficult to say because I haven't participated in any online session"

Like in the last statement, one interviewee is not so sure what the difference will be because she has no experience.

No continuity disadvantage and sponsor for the next project.

One of the most important characteristics of a project is the timing. Simplilearn (2023) reiterates this by saying, projects are temporary in nature. Meaning that all projects have defined start and end times within which the project concept is birthed, planned, executed, and delivered. They acknowledge that once project objectives have been met, the project comes to a close. All interviewees would have loved for this intervention to not only be a project but a continuous process.

"STEA is not willing to sponsor Terkku next year's intervention because the Terkku Project was transferred to another organization under Moniheli and STEA does not understand why"

As seen in the statement above, one interviewee had suspicions about the reason Terkku has no further funding. An interviewee thought it would be nice to make it stationary so that people and get help with matters regarding their health.

"Would be nice to have such events continuously to guarantee people have somewhere to get health answers"

To support the quotes above, the other participants feel it is easy for participants to forget what they studied because it is not a continuous intervention.

"There should be a way of making it continue or else people might tend to forget what they learned. "In the long run, I would say that this has to be constant that this can't be just a project we have to continue and do this continuously otherwise we will forget".

One interviewee comes from the 'measurability perspective', It was a one-time event in her opinion, and difficult to assess its success.

"It was just a day event and hard to say what the effects are without a follow-up. But people learned about healthy lifestyles e.g. learning about different types of diabetes contrary to how they knew it before."

The Terkku Project ended in Autumn 2022 and there is currently no sponsor for the next intervention.

Lack of intervention originality

One interviewee in participants in particular had a lot to say about what could be done better. One factor she spoke at length about was the originality of the Terkku Project. In her opinion, the Terkku project lacks originality and similar interventions have been held by numerous Non-Governmental Organisations in the past. For that reason, many immigrants do not see the point of attending, and this may have been the reason for the low turnout.

"Some of these target group belonging to these organizations have already had similar events in the past and are not so interested in this one."

"You must work with the organization to know what people want".

"Maybe the lackof originality is what happened and caused a low turnout. Because it is not the quantity of the events but quality"

The above interviewee further states that proper consultation was not made before the beginning of the project. To her, the main persons who have links to the grassroots were not consulted. People like organizational leaders or consultants who know what the people need.

"You have to find a way to get to the people through the main persons that matter in the society. If not, then the program goes to waste like Terkku. Because it's going to end out here and doesn't get down to the people, so no benefit. We need the benefits to get down to the grassroots".

"These stakeholders people know the right buttons to press because this is how a community works".

She thinks the right topics that are truly disturbing the community could pull people to attend. The immigrant population of Finland is growing tremendously and the immigrant youth population is also on the increase. Therefore, topics affecting this set of populations could be fertile ground for discussion even though not related to the NCD intervention topic.

"Project organizers should be opened for more suggestions like security problems among young people of Finland from foreign backgrounds. Experts herding these organizations know what the society is suffering, they should be consulted"

In conclusion, her opinion centered on proper planning because that is where the success of any project starts.

7.3 Recommendations for the Future

<u>The geographical scope of the intervention and topic (depression, youth security, or mental health) expanded to get more participants</u>

The Terkku intervention project on non-communicable diseases was geographically limited mostly to the Helsinki Metropolitan area with an exception to one organization from the South Ostrobohnia area. As a result, of the low turn-out as mentioned above, some interviewees thought the situation would have been better if the geographical scope was expanded to include outside the stipulated region. They say it would have hardly increased the budget of the intervention, especially for the online intervention sessions.

> "Other cities could be included especially for online events to have more people since it does not include extra cost"

The main focus of this intervention was on 'non-communicable diseases' and factors affecting immigrants' health in Finland. It is no doubt a very important and well-appreciated topic but most interviewees thought more could be added to the scope. They thought there was a lot more affecting immigrants in Finland and health is just one of them. So it was suggested that other topics like depression in immigrants, youth security, or even mental health could be considered for next-time's purpose. One participant thought the topic of 'non-communicable disease' has been repeated severally and there is nothing new for participants to benefit from. In her opinion, there is a lot more affecting the immigrant population of Finland that no one is paying attention to especially with regard to the youth. She went on to explain that the youthful immigrant population of Finland is increasing and so are the issues plaguing their existence that should be handled already to avoid future societal dysfunctions. For this reason, she is proposing Terkku to be

more welcoming to ideas regarding community needs. Maybe get different stake-holders to partake in the planning process.

"Projects should be opened for more suggestions like security problems among young people of Finland from foreign backgrounds. Experts herding these organizations know what their communities are suffering, they should be consulted"

" It shouldn't only be the case of the students deciding on topics."

The above participant had a strong opinion of not being considered in the planning process. Another interviewee had a couple of suggestions to make regarding this same point. With reference to her community, the interviewee thought topics like breast cancer, health awareness for men between 40-50, blood donation, and pre-marital checkups should be considered.

"I think Disease related to age especially for men between 40-50 is a good thing to talk about. Breast cancer events for women and creating awareness about breast cancer are also good. Blood donation is something we do not know about."

" Pre-marriage checkups should be emphasized for immigrants." But here in Finland, anyone can marry anyone and then we can have kids with serious problems."

She spoke at length about pre-marital checkups because she has seen victims of this. By pre-marriage checkups, she meant genetic compatibility to uncover whether a couple is at risk of conceiving an ill child. She mentioned that these tests are not emphasized in her home country but the repercussions are enormous when you get married to someone not compatible with you. Having kids

with illnesses due to parents' compatibility problems can be avoided if people know the importance of pre-marital checkups.

Better collaboration between project coordinators, medical personnel, and Participants

John-Steiner (1998) as mentioned in (Derry et al, 2005) believes that collaboration centers on an integrative, intense, long-term relationship where participants share a vision and construct thoughts. In this same regard, a fraction of interviewees thought that it was important to foster better collaboration between organizers and target groups (participants). In their opinion, less was done in that sector, and the reasons why the turn-out was low. To improve collaboration between stakeholders and organizers, the right channels have to be followed to get the target group to participate. To another, the right channels were not followed, and for this reason, the information does not trickle down to the grassroots. The intervention therefore becomes unbeneficial if people do not get to participate. She proposes that organizers should take advice from people like her who have been working in the field for a long as translators/social workers and know the culture of the people.

" *We Know the old tactics that work and have been there from the beginning! We know the right buttons to press because this is how a community works."*

She further proposes that for next time's purpose, Moniheli should rather strengthen the capacity of the grassroots organizations than strengthen the capacity of the projects. In so doing, they can get to the target faster to avoid low turnout and improve participation because these organizations know how to get to their people. Turnout will then be improved as the intervention works hand in hand next time with the organizations early enough to encourage participation.

"You have to find a way to get to the people through the main persons that matter in the society. If not, then the program goes to waste like Terkku. "Because it's going to end out there and doesn't get down there to the people, so no benefit…..because you need to get down to the grassroots."

"Established connections should be maintained for future purposes. Conne

ctions have now been made and we know whom to contact next time. For ex-ample, we have contacts for the Arabic-speaking people and we know who to contact in times of need."

Interestingly, another interviewee came from rather neutral grounds acknowl-edging the success of the event while softly proposing contacts made should be maintained and used for the better next time. These contacts amongst others include those of medical personnel and instructors that were instrumental to the success of this project.

<u>Similar interventions, follow-ups organized, and continuity emphasized to pro-mote a healthy lifestyle.</u>

As mentioned in the previous sub-heading, some interviewees expressed con-cerns about the continuity of the intervention. They strongly suggest some form of continuity to enable participants to have somewhere to fall back on when there is a need.

"It was just a day event and hard to say what the effects are without follow-up. But people learned about healthy lifestyles e.g. learning about different types of diabetes contrary to how they knew it before."

"There should be a way of making it continue or else people might tend to forget what they learn. In the long run, I would say that we make this constant and that this is not just a project. It should continue otherwise we will forget."

From the same perspective, another interview proposed some form of evalua-tion for participants at some form. It would be nice for project organizers to get in touch with participants at some point to see if they are keeping up with all they learned during the intervention. If not, they may forget what they learned.

" Follow-up method proposed to see what´s up with participants after the pro-ject. To see if they implemented the changes learned during the outreach pro-grams. Because it is of no use if they come and just go without any follow-up. You might go home after the intervention and not know what to do or repeat it. If you don't know how to do these things, you will give up. People won't be able to get help after that. "

Similar events of this caliber can be organized to include physical wellness for immigrants considering the the background of participants. One participant pro-poses that most immigrants lack knowledge on many aspects and would benefit from frequently organized interventions.

"Such events should be organized more often to raise awareness on a particu-lar subject at a time. "Our community lacks knowledge on many health factors and such events are beneficial even to the students involved".

To summarize this sector, it is clear that the participants are unanimously in support of either similar events or some form of follow-up.

<u>More resources to be invested in advertisement next time to get more participants</u>

Advertisement is very important in making people aware of an upcoming happening. This intervention according to some interviewees should have been advertised more. They blamed the low turnout on insufficient adverts that did not reach the main target group, especially considering it was the COVID-19 era.

"Better advertisements should be done via concerned organizations. More time needs to be put in next time for adverts to guarantee a better turnout. They were supposed to do a lot of work to prepare, find people, and make advertisements, inviting people to talk about the intervention."

"Difficult to work with this group of people. They do not see the point of coming for this except they are sick. It was a good point to add demonstrations to make it interesting."

In the course of advertisements for interventions like this, emphasis should be put on educating people to see the importance of interventions like this. thinks there is a tendency that some people do not see it as important.

<u>Emphasis on more demonstrative materials/prototypes and physical events.</u>

 acknowledged the benefits of demonstrations during the sessions they had. She made emphasis on how important it was for participants to have a visual understanding and demonstration of what was transpiring during sessions. To her, these demonstrations help participants stay connected and truly understand what they are being taught.

"It was a very good idea to organize such an event with demonstrations because participants don't just want to come to sit down and listen to bored orientations".

"Explicit pictures/drawings used for in-person sessions which are good but PowerPoint presentations for online sessions are not so explicit."

For another, it all came down to how involved participants were during sessions.

There was also a concern raised with regard to online or offline preference. While a fraction of participants believed that online sessions are better because of convenience, others thought it better to have all physical sessions next time.

"Working remotely negatively affected the project and so I propose physical next time. The first time I met others physically was during the ending seminar that was geared toward assessment. That was more participation as compared to the online sessions"

"I believe face-to-face is better because we are social beings who need each other. Information can be gotten online but to be fully involved, it has to be physical. Working online is a nice opportunity but outreach is different. For example, blood work cannot be checked online"

The COVID-19 pandemic forced some of the Terkku interventions to happen in digital environments. While one participant has mixed opinions as to whether online or offline sessions are preferable, she mentioned that it all depends on the topic of discussion. Some topics irrespective of online or offline sessions will lure people to attend while others will not, she believes.

8. ETHICAL CONSIDERATIONS

The Finnish Advisory Board of Research Integrity (TENK) has in its guidelines, rules on how to maintain responsible conduct of research to promote responsible conduct of research and the prevention/fairness of handling violations (TENK, 2021). It is the responsibility of the researcher to respect the dignity and autonomy of human research participants as laid down by the Finnish constitution (1999/731, Sections 6-23 as cited in TENK, 2019). Also, the researcher by TENK (2019) should research to avoid constituting risk, damage, or harm to participants, communities, or other participating subjects. It is for this reason that with the help of intervention organizers, research permits were sent by the researcher to all participating organizations after the research proposal was accepted. Thereafter, signed informed consent was requested and received from each participant.

All research is subjected to the principles of medical research ethics set out in the Declaration of Helsinki (World Medical Association, 2020). In an open and transparent academic atmosphere, all participants have the right to know, their information is protected, and the principles of fairness and justice guide their actions in research. Analysis is carried out with rigor and truth-seeking, deep thought, and reflection. All participants signed an informed consent form, guaranteeing their right to consent, protection of privacy, confidentiality, and anonymity. (Reid. et al., 2018). Priority was given to issues of inclusion across gender, class, and social status whilst making sure that the plans fit the reality of the groups. With all permissions in place, participants were informed of all relevant aspects regarding the research process involved while privacy was highly maintained Weil et al. (2013, pg. 265).

Following the most recent review on ethical consideration by the Finnish National Board on Research Integrity (2021), special emphasis was placed on preventing any harm that research might cause to the research subject. All ethical considerations were applied to the participants in the research. The researcher

must conduct an in-depth study of all of Moniheli's member organizations to familiarize herself with the background of the organization as recommended by TENK. It is therefore important that the researcher does an in-depth study of the organization in question via their webpage or asks for further information from the Moniheli project coordinator. Therefore, the researcher needed to obtain permits from Moniheli and participating organizations as well as consent forms signed by participants.

After ethically reviewing the research in question, the researcher concluded that it was needless to apply for an ethical review statement. This was because the research does not deviate from the principle of informed consent, does not interfere with the integrity of participants, does not involve minors under 15, does not expose participants to strong stimuli, has no risk of causing mental harm, and is of no threat to the safety of participants or their families (TENK, 2019).

Before beginning the research or recruiting the participants, all parties within the research project or team (the employer, the principal investigator, and the team members) agreed on the researchers' rights, responsibilities, and obligations, principles concerning authorship, and questions concerning archiving and accessing the data as stipulated by TENK (2012) in its responsible conduct of research guidelines. These agreements and other related details are found in the appendix of this proposal.

9. PROFESSIONAL DEVELOPMENT EXPERTISE

This thesis work provided insights into perceptions of the outreach intervention conducted by Moniheli via the Terkku project. In order to permeate the immigrant society of every society including Finland, it is important to understand the dynamics of that society and go through the right channels for better results.

The thesis process was eye-opening and humbling to me because I have not actually done any school project this demanding. In the early stages of the process, I had so many ambitions and short deadlines because I just wanted to hurry over it. Then I realized it was a demanding process with permit applications to be made, proposals approved, interview dates fixed, my family situation delays, and many other things. It is important to start the thesis process at the very beginning of studies because it is a process that can not be rushed.

This thesis is a qualitative research that was well imagined in the beginning but has some challenges related to the method of studies; online. Everything about the thesis from start to end was arranged online including work-life partner arrangements, seminar participation, interview sessions, thesis seminars, and meetings. I am not sure the process would have been different if it were physical.

In all, it was a huge learning process and every step was enjoyable. As a professional in this sector, the biggest lesson I am taking home is the ability to plan and execute, giving room for alterations. Every professional should possess the skill to come up with contingency plans when the original ones do not seem to work. A good example in my thesis process would be the situation when I sent interview invitations out and hoped all member organizations would love to participate. Even with reminders, I could not get them all to participate and there was nothing I could do about it but work with the available resources at that time.

The Terkku intervention project is just one of many projects that happen in collaboration with immigrant organizations. I am not sure if all these projects are properly evaluated at the end of them. If there are, then it is a way to ensure resources are put in the right places. At this juncture, I feel the objectives of the thesis have been met and hope it serve Moniheli rightly. Going forward, the knowledge gained from these studies will go a long way in helping my professional capabilities in working life.

For the future, I would recommend research based on the overall evaluation of Moniheli's projects. With feedback from participants and basic evaluation from the researcher, it is safe to say Moniheli might want to evaluate its projects to see which are beneficial or not. This will help with the distribution of funds to where it is actually needed. The services of a project evaluator or researcher will be best suited for this purpose.

10. DISCUSSION

The purpose of this thesis was to find out the effects of culturally sensitive outreach work on immigrants from the perspective of immigrant organizations that participated. It aimed to find out what perceptions these immigrant organizations have about the outreach interventions that happened. The second objective was to find out recommendations for improvements for future purposes. Conclusively, it is clear promoting cultural sensitivity in outreach work amongst immigrants in Finland through this outreach intervention was eye-opening. Certain results were expected while others came as a surprise about the whole process. Because the outreach interventions are long over, we hope these results help Moniheli in organizing similar future interventions. It will also help other organizations aiming to carry out outreach interventions or similar interventions of this kind

After a thorough read and reflection, I see the Purnell model (Purnell 2000) for cultural competence come into play. Purnell suggests with the illustrations of rims that, every individual can be accessed if the caregiver understands his cultural competence. The caregiver must in a holistic approach develop an awareness of the client's global society, community, family, his/her personal and personality traits. In this same way, the Terkku Project targeted the community in which participants live in a culturally competent aspect. There was a breakage at some point in the outreach process inhibiting the full success of the project.

Results have been presented in three sub-categories: successes recorded, points of improvement, and recommendations for future similar interventions. In my opinion, the successes recorded are all tied to the original goal of the intervention. Due to the fact that this intervention happened during the COVID-19 era which was not taken into consideration in the planning process, something interesting happened. Organizers and some participants got to partake in online sessions which was surprisingly enjoyed by many.

The points to improve and recommendations for future events were closely linked as one (recommendations) is mostly the aftermath of another (points to improve). Well-constructed criticisms were outlined as to why the intervention did not achieve all its goals (organizational perspective) with most reasons blamed on low turnout. So many factors were blamed for this including low advertisement, COVID-19 setbacks, and poor collaboration between stakeholders. To that effect, these organizations also recommended better adverts for next time's purpose with factors to take into consideration when trying to get people to partake in interventions. Similarly, a better collaboration was proposed to similar events more successful in the future.

 Moniheli in my opinion organized a very-needed intervention that was beneficial to many organizations and target populations. The results of this research helped strengthen the bond between the mother association (Moniheli) and member organization the needs of their members were met to a greater extent. The project process also fostered and improved collaboration between organizations. Members belonging to these member organizations learned a lot from these interventions thereby keeping members up-to-date with results from this research. It is no doubt that this intervention positively impacted the lives of individuals who partook. To this effect and to do better, Moniheli should carefully look into the recommendations proposed by participants because I see them as relevant and very instrumental. Even though the Terkku project did not get further funding, Moniheli will surely get funding for other projects. They might be benefiting in the future and these recommendations will come in handy or better still help in similar projects of Moiheli or other organizations.

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Appendix I: Interview Questions

The standardized open-ended questions will be used for interviews. This method allows for identical questions to all participants and an open-ended response method. Questions are formed as neutral as possible allowing respondents to freely respond without directing them towards a particular reply. The responses will help the purpose of answering the research question thereby fulfilling the purpose of the thesis.

What organization do you represent?

How did your organization participate in the outreach program?

What culturally sensitive outreach work models were planned?

How were culturally sensitive models represented during outreach sessions?

How were the planned outreach models implemented in your organization?

How in your opinion were cultural factors taken into account during outreach sessions?

What are your perceptions of the culturally sensitive outreach models?

How would you access the implementation of the models?

What did you achieve during the implementation phase and after?

What would you say are some of the current effects of this outreach work on the immigrant population?

How easy was it to get members of your organization to participate in the outreach project?

With regards to outcomes, in your opinion what long-term outcomes do you hope to achieve?

How would you wish to develop the outreach models for future purposes?

I am aware that some outreach work happened remotely. How would you comment on the differences between remote and face-to-face outreach work? How does this impact the results of the outreach work practice?

APPENDIX 2: Information letter to participants

Study title: Perceptions of culturally sensitive outreach work on the Terkku Project-Immigrant Third Sector perspective-A Qualitative Study

Invitation to participate in a research study

I would to invite you to participate in this research focusing on finding out what perceptions of culturally sensitive outreach models are beneficial to immigrants via representing organizations based on the outcome of the outreach work. The results will further help in the planning of future similar projects. You have been chosen because you as a representative of the Moniheli member organization have experience with the outreach project.

This information sheet describes the study and Your role in it. Before you decide, it is important that You understand why the research is being done and what it would involve for You. Please take time to read this information and discuss it with others if You wish. If there is anything that is not clear, or if You would like more information, please ask us. After that, we will ask You to sign a consent form to participate in the study.

Voluntary nature of participation

Participation in this study is voluntary. You can withdraw from the study at any time without giving any reason and without there being any negative consequences. If You withdraw from the study or withdraw Your consent, any data collected from You before the withdrawal can be included as part of the research data.

Purpose of the study

This research aims to describe the perceptions of culturally sensitive outreach work on immigrants from the perspective of Non-Governmental Organizations (NGOs) representing these immigrant communities. Due to the fact, it is a new concept in Finland and has hardly been evaluated, the results will reveal how successful it was and work on encountered challenges for similar future projects.

Who is organizing and funding the research?

The project is funded by the Funding Centre for Social Welfare and Health Organisations (STEA) under the supervision of Moniheli Ry. As a master's student of Diaconia University of Applied Sciences, the researcher (Colette Zeyeum Nyonga) is carrying out this research supervised by the Moniheli ry Project coordinator and responsible teachers of Diak.

What will the participation involve?

Should you accept to participate in this research, you would be required to partake in an interview session with the researcher. Interview sessions following a qualitative research method will be scheduled using Zoom/teams. The interview session will be recorded for transcription and data collection purposes only and then discarded thereafter. Interview sessions are estimated to last an hour. In case of any omitted point during the interview, the interviewee and interviewer can further communicate via established contacts for clarifications.

Possible benefits of taking part

Accepting to participate in this research will mean results to know how successful the project has been. This therefore means there is a high chance that similar projects will be conducted in the future. If this happens, members of the organization you represent, and other similar organizations will have the opportunity to benefit once again.

Financial information

Participation in this study will involve no cost to You. You will receive no payment for Your participation.

Informing about the research results

This is a Master's Thesis of Colette Nyonga Zeyeum and results will be published on the Moniheli ry website and Open Thesaus. fi website Finland after approval. You are hereby assured that readers of the product will, in no way be able to identify you when reading.

Termination of the study

The researcher conducting the study can also terminate the study in the situation when the organization (Moniheli ry) thinks it is no longer required. It can also be terminated if the school (Diaconia University of Applied Sciences) sees it as non-conforming.

Further information

Further information related to the study can be requested from the researcher/person in charge of the study.

Contact information:

Researcher: Colette Nyonga Zeyeum

                             Masters in Global Change and Community Development

                                   colette.nyongazeyeum@student.diak.fi

Best regards
Colette Nyonga Zeyeum

Appendix 3: PARTICIPANT CONSENT FORM

Title of the study: Perceptions of culturally sensitive outreach work on the Terkku Project-Immigrant Third Sector perspective-A Qualitative Study

Organization: Moniheli ry
 Researcher: Colette Nyonga Zeyeum
                       Masters in Global Change and Community Development
                       colette.nyongazeyeum@student.diak.fi

I ……………………………………………… have been invited to participate in the above research study.

 The purpose of the research is to find out what perceptions of culturally sensitive outreach models are beneficial to immigrants living in Finland via representing organizations based on the outcome of the outreach work. The results will further influence the planification of future similar projects.

I have read and understood the written participant information sheet. The information sheet has provided me with sufficient information about the above study, the purpose and execution of the study, my rights as well as about the benefits and risks involved in it. I have had the opportunity to ask questions about the study and have had these answered satisfactorily.

I have had sufficient information on the collection, processing, and transfer/disclosure of my data during the study and the Privacy Notice has been available.

I voluntarily consent to participate in this study. I have not been pressured or persuaded into participation.

I have had enough time to consider my participation in the study.

I understand that my participation is entirely voluntary and that I am free to withdraw my consent at any time, without giving any reason. I am aware that if I

withdraw from the study or withdraw my consent, any data collected from me before my withdrawal can be included as part of the research data.

By signing this form, I confirm that I voluntarily consent to participate in this study. If the legal basis of processing personal data within this study is the consent granted by the data subject, by signing I grant the consent to process my data. I have the right to withdraw the consent regarding the processing of personal data as described in the Privacy Notice.

Date

_____

Signature of Participant

APPENDIX 4: Privacy Notice

I am a master's student at the Diaconia University of Applied Sciences in the program of Global Change and Community Development. I understand your organization participated in the outreach project on culturally sensitive outreach work on non-communicable diseases among immigrants. The research seeks to find out the impact of sensitive outreach work on immigrants carried out by Moniheli ry. This is a privacy notice by the EU General Data Protection Regulation (GDPR) to explain how data collected from you will be managed.

Data collected from you will not contain personal information including name and email address but through direct contact using the organization you represent. Data for this research will be collected via interviews and data recorded. As required, data will also be obtained from the organizational website. In the situation where more data is required, the researcher will make direct contact with you.

Data collected for the research will be processed to ascertain how successful the outreach project was. If you agree, the researcher will share your data with Moniheli Ry to help improve their services. Data collected during the interview will be recorded and stored for analysis purposes. This data will only be stored before and during the analysis period and deleted thereafter.

The participant is entitled to the following rights if willing to participate in this research. You have the right to request a copy of your data. You also have the right to correct any information you see as inaccurate or request the researcher complete any information you see incomplete. The participant also has the right to request restriction or objection to the processing of personal data. Lastly, the participant has the right to request a transfer of collected data to another organization or directly from you. The participant should make a request in case they want to exercise any of the above-mentioned rights or have any questions via email via

Organization: Moniheli ry

 Researcher: Colette Nyonga Zeyeum

Masters in Global Change and Community Development

colette.nyongazeyeum@student.diak.fi

Yours faithfully
Colette Nyonga Zeyeum