



# Research Findings March 14, 2017

Instructor: Juliet Stantz

Luis Agostini | Rhett Ahlander | Arquillia Burks | Sarah Leas

Jessica Lutchen | Samantha Perlman | Imani Shabazz

## **Executive Summary**

The Hispanic population in the United States has more than doubled in size in the past 15 years and is now estimated to have reached 45 million (Livingston.)

According to the Pew Hispanic Center (PHC) survey of Latino adults, more than one-fourth of Hispanic adults in the United States lack a regular healthcare provider, and a similar proportion of Hispanic adults report obtaining no health care information from medical personnel in the past year.

From the same sample, eight in 10 Hispanics report receiving health information from alternative sources, such as television, online news sources or non-profits like Universidad Popular (UP). A sizeable proportion (79 percent) say they are acting on this information found across various media sources, that may or may not have any credible, research foundation to the information or recommendations.

With this information and background, it's important for hispanic organizations to take healthcare education seriously, especially among hispanic males. When PRAD 585 began working with UP, the class set goals to collect information to help the class and executives at UP better understand why many males at UP aren't attending any health literacy programming and what it would take to ultimately increase participation in these health-based initiatives offered at UP.

In order to get these answers, we took a lot of different factors into account and evaluated existing data owned by UP. PRAD 585 also developed a survey to collect fresh data to evaluate new insights and opportunities, and conducted in-person interviews with volunteers at UP in order to gain a better understanding of how to entice males to participate in more health-focused initiatives at UP.

Through our research, the class found various ways to help UP gain higher male attendance rates in their health-focused classes, which you can find within the following in-depth research report, which includes suggested actionable recommendations for UP.

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# Introduction

The Research Methods class at DePaul University has been developing a report to help Universidad Popular (UP) gain insight on its populations and community members. Research conducted for this report describes the impact of UP programs, initiatives and community involvement.

The goal of this research is to understand how to increase participation and commitment within the health programs offered at UP, especially for male community members. This report will provide UP with sufficient information to reach its goals.

# **Situational Analysis**

### **Background**

Universidad Popular (UP) was founded in 1970 and started in Lakeview, a neighborhood on the north side of Chicago. Today, the community center is located in Little Village, serving many the people of Little Village and many surrounding neighborhoods.

UP is a non-profit organization where community residents can go to learn together and, in turn, make the surrounding communities better. Its current focus is on engaging community residents. It has many programs in place. These include adult literacy (ESL), health literacy (nutrition, healthy cooking and physical activity) and family literacy (for at-risk youth, and after-school employment and computer classes). UP also has programs to assist in job placement and to provide support in overcoming and treating physical and mental disabilities.

People visit UP for multiple reasons besides the programs it provides. One focus UP has right now is on healthy literacy. There are more than 70,000 residents in South Lawndale. Many of these residents, if not most, currently do not have health insurance.

UP's most significant achievement has been its ability to get neighborhood residents to take responsibility for their lives and the quality of life in their community. Instead of expecting others to come in and fix whatever is wrong with the community, UP motivates its participants to take charge. Recently, UP saw success as it found a new home, and transformed a former tavern/banquet hall in Little Village into a thriving community center.

UP began offering adult literacy classes to Latin American immigrants in Lakeview in the early 1970s, and has since followed the Latino immigrant community as it has been pushed south by gentrification. UP also worked many years in Humboldt Park and Pilsen. Many program participants began moving to Little Village-—which is now the largest Mexican-American community in the Midwest. This population soon began requesting that UP provide services in the Little Village as well. These people were also tired of moving, due to the rising rent prices that gentrification demands. This caused UP to seek out a new building.

UP's current 12,000-plus square foot space used to be an old tavern/banquet hall until it was purchased by the organization in 2002. At the time, the building was in disrepair and would need nearly \$1 million dollars in renovations and restoration, which wasn't possible. However, the residents urged UP to buy it, insisting that they would take care of the rest. Community residents – including carpenters, plumbers, painters, construction workers, and housecleaners – volunteered their time and services to fix the building.

Eventually, the building was transformed into a brand-new community center. This was a convincing demonstration of how powerful a community can be when it comes together. 15 years later, more than 500 community residents visit UP's new center every day for classes, programs and community activities.

In June of 2014, after a long search, UP found another place in which to build a center. It acquired a corner property in West Lawn/Chicago Lawn. Many residents in Chicago Lawn were excited about the announcement, which took place during the "Sharing Our Laurels" (SOL) Celebration

Soon after this announcement, residents and UP participants in Chicago Lawn visited the new site and found that the newly-purchased property had been neglected, like the first building before it was fixed up. Again, UP participants organized themselves to make the building a proper place to call a UP center. Parents and their children joined every Tuesday and Wednesday to clean the space. Participants donated their time and brought different materials to be used during the cleanup – including bags, mops, buckets, gloves and gardening tools.

### Situation

Today, many women and children participate in the programs offered at UP, however, not very many men participate – especially when it comes to health. In general, it is part of Hispanic culture for men to neglect their health – this being called "machismo" (Caballero,) These types of men will try to be tough, and avoid wanting to find out about something serious with their health.

UP is working to help more men become concerned with their health and participate in the health literacy programs offered at the center.

Overall, UP is doing well. The center offers numerous programs to educate, support and assist many people from a variety of backgrounds. However, when it comes to program participation and commitment, there is room for improvement – which will be the primary focus.

### **SWOT**

Strengths	Weaknesses
<ul> <li>Tight-knit community</li> <li>Large Latino population in Chicago</li> <li>Relationships with community organizations, nonprofits, social services and other private organizations</li> </ul>	<ul> <li>Language barrier</li> <li>Access to health care coverage</li> <li>Neighborhood reputation for crime and violence</li> <li>Cultural norms of Hispanic male behavior/disposition toward preventative health</li> </ul>
Opportunities	Threats
<ul> <li>Increasing support from community organizations, nonprofits, social services and other private organizations</li> <li>Tapping community leaders and influencers</li> </ul>	<ul> <li>Current political environment related to health care coverage and immigration</li> <li>Reduced/delayed funding from public sources (government)</li> </ul>

### **Strengths**

The large Latino population in Chicago comprises several tight-knit communities in several neighborhoods, particularly the West and South sides.

The large roster of community organizations, nonprofit organizations, social services and other private organizations also strengthen Universidad Popular's cooperation and engagement efforts.

### Weaknesses

With Spanish being the first, or in many cases the primary language of the majority of Hispanic-dominant Chicago neighborhood residents, language barriers present difficulty in effectively communicating and accessing health care.

Access to health care presents another weakness for Universidad Popular's target audience. Many rely on public assistance, but only if qualified/eligible.

Chicago's Hispanic neighborhoods in the South and West sides also suffer from reputations of high crime and gang violence, which may pose additional challenges for Little Village residents to seek access to health care and other social services. Additionally, community organizations and private donors may be hesitant to invest in communities riddled with crime.

As mentioned earlier, the existing sentiment from Hispanic men toward preventative health care, attributed to strong cultural norms related to gender roles, present roadblocks.

### **Opportunities**

Universidad Popular may take advantage of the opportunity to leverage the increasing support from community organizations to provide supporting channels of health care access. In the same vein, they may also tap community influencers to help raise awareness through a variety of channels, including social media.

### **Threats**

The current political climate around immigration and healthcare threaten Universidad Popular's health literacy efforts from both implementation and perception perspectives. With Congressional efforts to eliminate the Affordable Care Act and potentially other methods of health care access, combined with stricter immigration and deportation efforts, UP participants may be hesitant to proactively seek assistance for access to preventative health care, whether through public or private providers.

Additionally, Universidad Popular will increasingly rely on private funding and donations, as state-provided funding will continue to be diminished or delayed.

### **Insights From Third-Party Sources**

Through our secondary research, we found several impactful insights that explain the Latin American culture and how it affects their health through the decision-making process. There are three important insights we gained from the following sources: Men are less likely to consider health as a priority, due to the stigma of masculinity; and low family income, within this targeted group, can prevent families from seeking medical treatment; and many immigrants are reluctant to see a U.S. doctor because of cultural differences.

Findings from, "Is parenting style related to children's healthy eating and physical activity in Latino families?", written by Elva M. Arredondo, John P. Elder, Guadalupe X. Ayala, Nadia Campbell, Barbara Baquero and Susan Duerksen, suggest that the children of parents who monitored and reinforced healthy behaviors ate healthier foods and less unhealthy foods, and were more physically active, compared with the children of parents who did not use these parenting styles (Arredondo). The research found that parents who monitored their children's fat intake were less likely to have children who were overweight two years later than parents who did not monitor their children's diet. Parental monitoring of children's sedentary activities, such as television viewing, may help protect children from becoming overweight, given the relationships between television watching, inactivity and increased calorie consumption. It was also found that parent reinforcement of healthy snack intake played a huge role in their health

(Nieri). Additionally, the more involved parents are, the better chance a kid had of having a healthy lifestyle.

Looking further into the article "Understanding the Hispanic/Latino Patient", written by A. Enrique Caballero, MD, Hispanics have several factors holding them back when it comes to healthcare. Through a research study of what is considered the largest majority of Hispanics in the Midwest, researchers found that Hispanic families seek encouragement, direction and advice from a large number of family members, and are more concerned about their needs as a group rather than individuals. This concept is known as "familismo," meaning they have a loyalty to extended family that is considered a highly important way of life within their culture. Although this concept can help motivate healthy behavior, it can also make it difficult for patients to make independent decisions. For example, patients may feel the need to discuss treatment options with their family first before giving a physician the consent to do so, making certain medications or lifestyle modifications a difficult decision.

The role of the household is also a huge indicator of how the importance of health is divided up among genders. In many Hispanic families, women are the primary caretakers, and being a wife, they are considered to have motherly duties. This means that women hold the most knowledge about personal health and other information about the household. Along with this comes the roles of the men, which is often called "machismo," as previously discussed, which is a cultural term for a set of identities associated with the concept of masculinity (Caballero). In this culture, men are expected to behave in ways which are considered masculine. If a man is considered machismo, this means he has a strong work ethic and can protect his family. There are also several behaviors that come with proving one's "manhood," which can include activities such as heavy drinking and risk taking. Because of this concept, this act is considered necessary and visiting a physician would be a sign of weakness (Caballero). Therefore, Hispanic men avoid seeking any type of medical attention or help for as long as possible – or at all.

In the article "Health Disparities in the Latino Population", written by William A. Vega, Michael A. Rodriguez and Elisabeth Gruskin, it was found that hispanic immigrants may gain some health advantage because they are generally healthy when they arrive in the United States, and U.S. society provides a general improvement, albeit inconsistently, in standards of living, nutrition and public health conditions. Researchers also concluded that selection effects also contribute to this resilient immigrant profile. There is self-report evidence that the most recent immigrant generation is healthier than previous generations of immigrants. Although this may be true when coming into the United States, it is found that when they return, the death rate of those individuals is higher and essentially they are less healthy (Vega). This was due to a lack of Hispanic men and women attending U.S.-based physicians. There were several factors leading to this finding, including the lack of knowledge, the feeling of unimportance, and the fear of possible deportation under certain circumstances.

Also found in the article, "Las penas con pan duelen menos": The role of food and culture in Latinas with disordered eating behaviors", that many health issues within their community stemmed from low-income families and the lack of health insurance being provided through employment services. The author, Rodriguez Reyes, shed light on the importance and "forgotten" factor that most families within these communities may wish to seek help, but do not seek it out further when cut short of financial assistance. It is also an issue when low income plays a factor. Many families would rather use the finances they receive for what they consider to be more important, such as education and providing meals. With the lack of financial support, their health has suffered and it is not being prioritized as it should.

### **Information Needs & Preliminary Plan for Research**

#### What We Know

Universidad Popular offers many programs to the Little Village community, but the program that could benefit directly from our research is their Health Literacy Program. Health Literacy is an incumbent issue for this community because most of the residents are uninsured and many have health concerns, such as diabetes. UP currently has active participation in their health initiatives such as Zumba, healthy cooking classes and yoga. The concern lies in the makeup of many of the Health Literacy classes. Many of the programs are attended by women. Universidad Popular identified the possible reasons for low-male attendance in their Health Literacy initiatives. These included scheduling, availability, as well as programming that aligned with women's interests.

From our secondary research we gathered some reasons why men in this community may not take advantage of the health programming that UP offers. The articles we found provided insight into the Latino community and some of the reasons men in this community may not prioritize health. Some root causes discovered in our secondary research were the culture of "machismo", the lack of resources for low-income families, specifically for the immigration population, as well as the language and cultural barriers they face when navigating the U.S. healthcare system.

### What We Don't Know

Although we have some ideas of what may be causing the lack of interest in Universidad Popular's Health Literacy programming by Hispanic males in the community, we have not conducted any primary research to understand the specific concerns of Hispanic men in Little Village, their beliefs surrounding health, and how to best reach them in terms of health literacy. We also don't know who these men and women are that are attending the Health Literacy programs and how they feel about the lack of male representation in these classes. Every community is different and has its own set of ideas, beliefs and challenges, so we'll need to conduct specific research about the residents of Little Village in order to help UP increase its male participation with health literacy efforts.

### What We Are Going to Need

We are going to use a combination of interviews and surveys to determine the best way to increase male participation in UP's health initiatives. In order to gain insight into this specific population we will ask questions about preventative health and ways to engage with the male population of Little Village, such as reaching out to them via social media. We will have a short health assessment for participants in order to understand how Little Village residents view and understand their own health.

We are trying to figure out the following:

- How to increase participation in health literacy programming
- Obstacles for men and recommend solutions
- Specific cultural and socio-economic obstacles
- Basic health assessment (short and rate your own health) social media and health (Crimson Hexagon)
- What is the social media impact in terms of health literacy? Who is responding?

### Preliminary Plan and Timeline: What we did

•	
Week of 1/31	Confirm Problem Statement
Week of 2/7	Class visit to Universidad Popular
Week of 2/7	Identify candidates for primary research (surveys, focus groups,
	interviews)
Week of 2/14-3/7	Conduct primary/secondary research
Week of 3/7	Complete Research Proposal
Week of 3/14	Research Proposal delivered to UP

# **Report on UP Health Initiative Surveys**

### **Content of the Survey**

Universidad Popular distributed a comprehensive survey to gage Hispanic/Latino health literacy amongst their male and female Health Literacy Initiative (HEALIN) participants. The results were accumulated over the course of the year 2015. In the pursuit to start the conversation on "how to live a healthier lifestyle" they disseminated a series of questions to gather qualitative research to better implement their overall health initiative goals at Universidad Popular--a non for profit organization in the Little Village community. Below, you will find the content of the survey, specifically the four categories of questions: physical activity, day-to-day, nutritional and demographic.

### Physical Activity Questions

- How often do you exercise for at least 20 minutes a week?
- What kind of exercises do you do?
- How much time do you need to recover to normal breathing after physical activity?
- What motivates you to exercise?
- What is your goal regarding your weight?

### Day-to-Day Health Questions

- In a usual week, how many days do you do moderate activities for at least 20 minutes at a time, such as walking, cleaning at home, gardening, or anything else that causes some increase in breathing or heart rate?
- In a usual week, how many days do you do vigorous activities for at least 20 minutes at a time, such as Zumba, running, dancing, bicycling, or anything else that causes large increases in breathing or heart rate?
- In the past 7 days how many times did you eat fast food?
- On average, how many servings of fruit do you eat?
- On average, how many servings of vegetables do you eat?
- How difficult or easy is it for you to eat healthy and balanced meals?

### Nutritional Questions

- When you're eating a meal or snack how often do you control the amount of food you eat?
- How often do you make healthy food choices when you're with your friends or in a social setting?
- How often do you read the nutrition fact labels?
- How many calories are in one serving?

- How many servings are in one container?
- How many grams of total fat are in one container?

### Demographic Questions

- Age
- Race
- Birthplace
- Current Community Residence

### **Individualized Files**

DePaul University students (PRAD 585) traveled to Universidad Popular on February 7th, 2017. During our visit we had the pleasure of speaking with four leaders at (UP) who educated us on the history of the organization while providing some additional insights to help us address their current health initiatives. In their pursuit to advance the way they currently document the information, we had the task of digitally recording approximately 65 health survey responses. There were a few important indicators that our research and insights were accurate. The first being, majority of the surveys were taken by women. Additionally, most of the survey takers reside in Little Village.

- As a class, we entered the most recent survey responses for 65 UP program participants.
- 11% males participated in this survey
- 89% females participated in this survey
- Most of the health program participants live in Little Village, Chicago Lawn and West Lawn

### Timing: Why did we choose the most recent survey in the individual file folders?

Throughout our entire class, timing has been a constant factor in the planning process of our research. All of the files we received from Universidad Popular, had two health initiative surveys. HEALIN, a two month program that distributes a "pre" and "post" health literacy survey. Most of which were taken in June and September. As a class, we had a dialogue about whether or not we should input the "pre survey" or the "post survey" responses to record in Qualtrics. Although there were pros and cons to both choices, we decided to use the most recent surveys in the UP participant file folders. Using the most recent responses will help the leaders of UP know the current health state of each individual. Additionally, it would be interesting to compare the responses of the pre and post surveys.

### **Qualtrics Survey: Data Entry**

Professor Stantz divided the files amongst the 7 students in the PRAD 585 class. We each entered the data during our scheduled class time and at home. At the start of the quarter, Professor Stantz introduced us to the Qualtrics Software. Because this research class had a specific emphasis on evaluating research through survey responses, we utilized Qualtrics to

record the existing UP Survey responses. Qualtrics provides the survey data through a variety of numeric methods. This system gives the following options to review the survey data-percentages, pie charts, bar graphs and line graphs. Since we were paying close attention to gender and race, the bar graphs and pie charts were very helpful to gage, compare/contrast and implement our results to have the best recommendation for our client, Universidad Popular.

### **Qualtrics Survey Results**

What is being measured?	Results	
Age		20-68
Demographic	Hispanic/Latino White Other	96.88% 1.56% 1.56%
Gender	Male Female	10.77% 89.23%
How difficult/easy is it for you to buy fresh fruits and vegetables in your market?	Extremely difficult Somewhat difficult Neither easy or difficult Somewhat easy Extremely easy	3.77% 45.28% 32.08% 7.55% 11.32%
How do you feel about exercising outside?	Very unsafe More or less unsafe Somewhat sae Very safe	52.94% 29.41% 15.69% 1.96%
How much time do you need to recover to normal breathing after you are physically active? (exercising, walking up stairs, carrying heavy items, or anything else that causes some increase in breathing or heart rate)	0-2 minutes 3-5 minutes More than 5 minutes	90.32% 8.06% 1.61%

# **Male vs Female Survey Responses**

# Young Male

Question	Survey Response
In a usual week, how many days do you do moderate activities for at least 20 minutes at a time, such as walking, cleaning at home, gardening, or anything else that causes some increase in breathing or heart rate? (Physical Question)	5
How difficult or easy is it for you to eat healthy and balanced meals? (Day to Day Question)	Undecided
How often do you read nutritional health facts? (Nutritional Question)	Always
Age	28

# Middle Age Male

Question	Survey Response
In a usual week, how many days do you do moderate activities for at least 20 minutes at a time, such as walking, cleaning at home, gardening, or anything else that causes some increase in breathing or heart rate? (Physical Question)	4
How difficult or easy is it for you to eat healthy and balanced meals? (Day to Day Question)	Somewhat easy
How often do you read nutritional health facts? (Nutritional Question)	Always
Demographic	43

### **Older Male "The Healthy Type"**

A prime example of the "Healthy Type" is displayed through the survey responses below. He is someone is very health conscious. As it relates to physicality and nutritious meals, he has mastered the concepts of living healthy and being healthy.

Question	Survey Response
In a usual week, how many days do you do moderate activities for at least 20 minutes at a time, such as walking, cleaning at home, gardening, or anything else that causes some increase in breathing or heart rate? (Physical Question)	7
How difficult or easy is it for you to eat healthy and balanced meals? (Day to Day Question)	Very Easy
How often do you read nutritional health facts? (Nutritional Question)	Always
Demographic	61

# **Young Female**

Question	Response
In a usual week, how many days do you do moderate activities for at least 20 minutes at a time, such as walking, cleaning at home, gardening, or anything else that causes some increase in breathing or heart rate? (Physical Question)	4
How difficult or easy is it for you to eat healthy and balanced meals? (Day to Day Question)	Very Difficult
How often do you read nutritional health facts? (Nutritional Question)	Never
Demographic	30

### Middle Age Female "The Transitioner"

The "transitioner" is someone who is aware that they are not living a healthy life; However, they are starting the process of being healthier individuals. The idea is that Leticia is transitioning from one lifestyle to another. Although change is difficult, the first step to being better is becoming conscious of her current health habits.

Question	Response
In a usual week, how many days do you do moderate activities for at least 20 minutes at a time, such as walking, cleaning at home, gardening, or anything else that causes some increase in breathing or heart rate? (Physical Question)	2
How difficult or easy is it for you to eat healthy and balanced meals? (Day to Day Question)	Somewhat Easy
How often do you read nutritional health facts? (Nutritional Question)	Sometimes
Demographic	46

### **Older Female**

Question	Response
In a usual week, how many days do you do moderate activities for at least 20 minutes at a time, such as walking, cleaning at home, gardening, or anything else that causes some increase in breathing or heart rate? (Physical Question)	1
How difficult or easy is it for you to eat healthy and balanced meals? (Day to Day Question)	Very Difficult
How often do you read nutritional health facts? (Nutritional Question)	Never
Demographic	61

# **Qualitative Research Report**

### Goal

The goal of the data collection in the UP survey is to gain insight from staff and UP participants in order to increase male participation in UP-offered health literacy activities. At the end of the class, we want to be able to provide valuable insight and opportunities for UP to act on in order to increase participation.

### **Effectiveness**

By conducting in-person interviews and surveys, we're able to collect opinions and thoughts from the people who shape the programs and keep the lights on. We are gaining an understanding of underlying reasons, motivations and other insights to shed light into areas of development and improvement at UP. By conducting in-person methods, we keep the opinions and answers more authentic and can pick up on senses that don't necessarily come across through online or phone surveys.

### **Execution**

We disbursed health-related surveys to 13 people in the computer lab. This took place during a computer class, and the surveys were taken on the computers. Participants included an almost equal ratio of men and women. Later on in the visit, there were seven hard copies handed out. Most of the participants who took the hard copy surveys were male.

We first conducted interviews and used a sample set of four UP facilitators and staff volunteers. They ranged from a 16-year veteran program facilitators, to a high school senior who volunteers their time to help facilitate programming. Three were female, one was male. The programs they are involved in include adult literacy, health literacy, job development and English learning. The interviews were conducted inside of a classroom at UP, and ranged from 13-18 minutes in length.

We developed a personal interview discussion guide that assisted the interview process. We informed the interviewee that the interview would be recorded, to preserve the integrity of the quality research. The guided questions in the next section demonstrates the plan we followed during the interviews with the UP facilitators.

### **Interview Discussion Guide**

- 1. Getting to know the participant
  - What is your name?
  - How long have you been a facilitator at UP?
- 2. More focused questions
  - What types of programs does UP offer involving health and wellness topics?
  - Which programs do you think are most effective?
- 3. Detailed questions
  - What types of programs are you most familiar with at UP that involve health and wellness?
  - What types of programs does UP offer involving health and wellness topics?
  - Which programs do you think are most effective?
  - What are the attitudes and feelings toward the health initiatives here at UP in general?
- 4. Explain taping/recording
- 5. Consent Form (Optional)

### Getting to know your participant (~3-5 minutes)

Start broad, ask them about their life, job, hobbies and family. Get them used to the process of being asked and answering questions. You don't need to move toward your design challenge too quickly—aim to build up a rapport. Listen for interesting facts in this early stage as they may guide later questions.

A great opening question is to ask your participant to describe a typical weekday and weekend day.

- Name
- Age
- Generation
- Gender
- How long have you worked at UP?

### More focused questions (~4 minutes)

Crucial: Don't jump straight to detailed questions around your brief. You should move toward the detailed area gradually; ask more specific questions but still keep things open. For example, talk about the health programing at UP, and how you experience UP from a facilitator standpoint.

- What types of programs are you most familiar with at UP that involve health and wellness?
- What types of programs does UP offer involving health and wellness topics?
- Which programs do you think are most effective?
- What are the attitudes and feelings toward the health initiatives here at UP in general?

### **Detailed questions (~10 minutes)**

Now, it's time to get into the detailed questions around your brief. This time should be divided into smaller sections to keep the conversation varied and interesting.

The individual nature of your brief will guide how best to use this time, a simple way to break it down would be to cover four main areas, giving each 10 minutes.

- What do you think are some of the reasons men are not as interested in the health initiatives here at UP?
- How could UP improve its programs to include more health topics? Why?
- What are ways UP could incorporate health initiatives in other programs offered?

### Wrap up (~2 minutes)

Tell the participant that the interview is over, and give them a chance to ask any questions. Thank them for their time and explain what happens next. Leave your contact details with them in case they have questions once you've left.

# **Survey Report**

### **Objectives for Health & Wellness Survey**

To determine the best way to increase male participation in UP's health literacy initiatives, we conducted a short health assessment in the form of a survey. Our questions measure how Universidad Popular members view and understand their own health. We have compiled the following survey objectives to gain insight into how we can improve male health awareness and boost their participation in UP's health-related programs.

We are trying to accomplish the following:

- To better understand why members of Universidad Popular, specifically males, are reluctant to attend the health literacy programming and what can be done to increase participation
- Discover the obstacles Hispanic males face when dealing with health-related issues and offer solutions
- Uncover what cultural and socio-economic obstacles prevent Hispanic families at Universidad Popular from participating in healthy activities
- Understand how different generations and age groups perceive the importance of health

### Methodology

The survey, conducted at Universidad Popular, involved both qualitative and quantitative questions giving us a broader understanding of the underlying issue. To keep participants engaged and motivate them to complete the survey, it was kept short with fifteen questions. To avoid language barriers, the survey was provided in both Spanish and English languages. The idea behind this survey was to receive current data from the members of UP and how they view the health initiative program. Nearly all questions were quantitative, but we incorporated a qualitative "open-ended" question to provide us with more in-depth answers, allowing us to gain deeper understanding of what would make UP members more interested or willing to participate in health-related programs. The survey was the best method because it provides us measurable data that can be used to describe the entirety of UP members' behaviors.

The questions fell under 4 categories:

- 1. Personal Health and Wellness Behaviors
- 2. Cultural Attitudes in the Hispanic Community Toward Health and Wellness
- 3. Boosting Male Participation in UP's Health Initiative Program
- 4. Participant Demographics

The survey was specifically geared toward males, but available to women as well. The survey was administered to participants of all ages and across all generations. We used a convenience sample, and the survey was distributed both digitally and on paper from February 25<sup>th</sup> - March 7<sup>th</sup>. The survey was distributed to a computer class of 12 students as part of their lesson. This gave us time to get feedback from them on some translation issues that led to confusion on a couple of questions. The survey was then distributed to 7 people as a paper survey in an online radio class. UP's program coordinator, Abe Celio continued to distribute the survey by personally administering it to UP classes throughout the week. This allowed him to answer questions as needed and resolve any language-barriers.

### **Key Findings**

- Age group for majority of males (43%) is 36-45; females (67%) is 46-55
- Over 50% of participants have lived in the U.S. for 11 to 20 years
- Over 50% of participants are involved in LETO and DILIPRO programs
- 64% of males engage in moderate or vigorous activity versus 36% of females
- 80% of males visit the doctor once every few months versus 20% of females
- Male participants are very likely to participate in:
  - o Nutrition program (43%)
  - o Health Workshops (43%)
  - o Cultivating Positive Mind program (57%)
- 89% of males state spouse/partner does majority of cooking in the household
- 56% of males say they are very satisfied with their current eating habits
- 88% of males would like to improve their mental health (stress, anxiety, etc.)

### **Analysis of Data**

There are five significant insights related to men's personal health and wellness behaviors.

- 1. Members of Universidad, specifically males, are reluctant to attend the health literacy programming for several reasons: lack of time, financial cost and lack of energy (Figure 1
  - a. An overwhelming majority of men are "definitely" or "probably" interested in learning more about health and wellness, but cite "lack of time" as the most significant barrier to participation
- 2. Male members of UP show a strong interest in learning more about health and wellness, but are already generally satisfied with their physical health (Figure 2)
  - a. Men are mostly interested in controlling existing health problems (diabetes, high blood pressure, chronic illness, etc.), improving habits (healthier eating, stop smoking, life balance, etc.), and improving mental health (lower stress and anxiety, increase relaxation, etc.)
  - b. Men are notably concerned with improving mental health, almost more so than maintaining physical health
- 3. Male members of UP are greatly involved in their health and wellness habits. Surprisingly, men were shown to visit the doctor more frequently than women (Figure 3)
  - a. Majority of men say they engage in light or vigorous activity weekly
  - b. Male survey participants were much more likely than females to visit a doctor monthly
  - c. Male survey participants were also more likely than females to visit a doctor annually
- 4. Men display considerable interest in UP's health and wellness programs (Figure 4)
  - a. Compared to women, men are more interested in "Dance Classes," "Martial Arts," "Smoking Cessation," "Sports," and "Weight Lifting"
- 5. There is some contradicting data in the survey results:
  - a. Though they express strong interest in the aforementioned programs, men are more likely to participate in UP's "Nutrition," "Health Workshops," and "Cultivating a Positive Mind" programs (Figure 5)

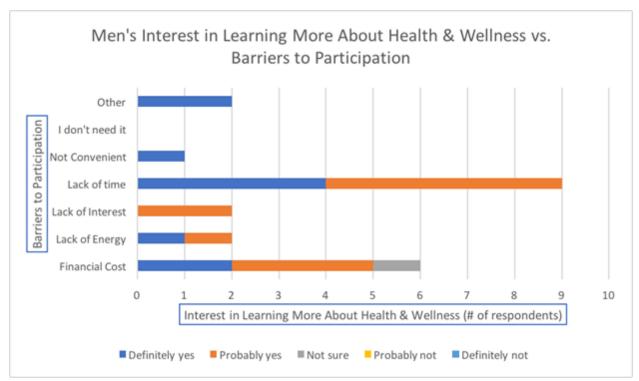


Figure 1

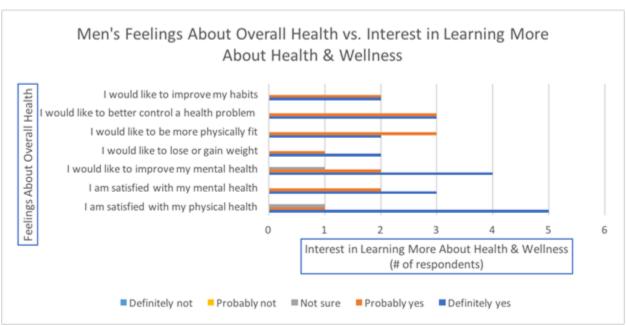


Figure 2

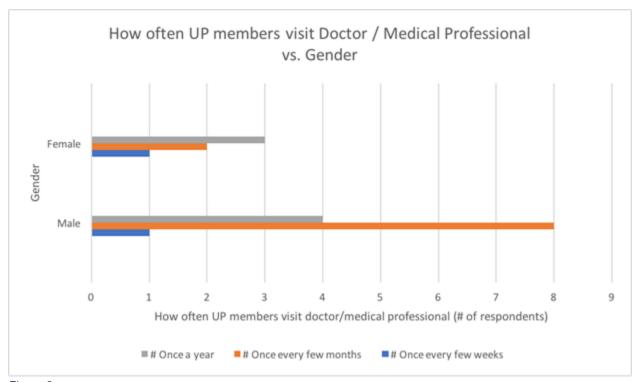


Figure 3

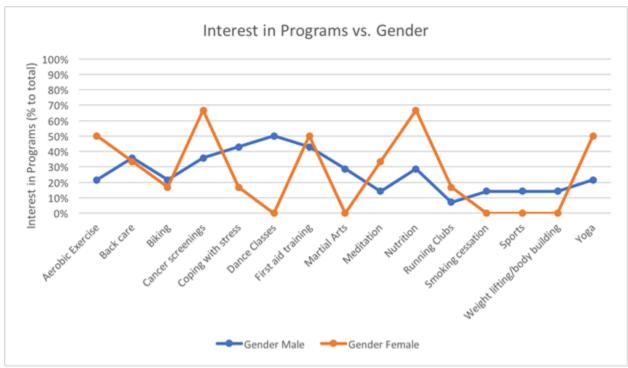


Figure 4

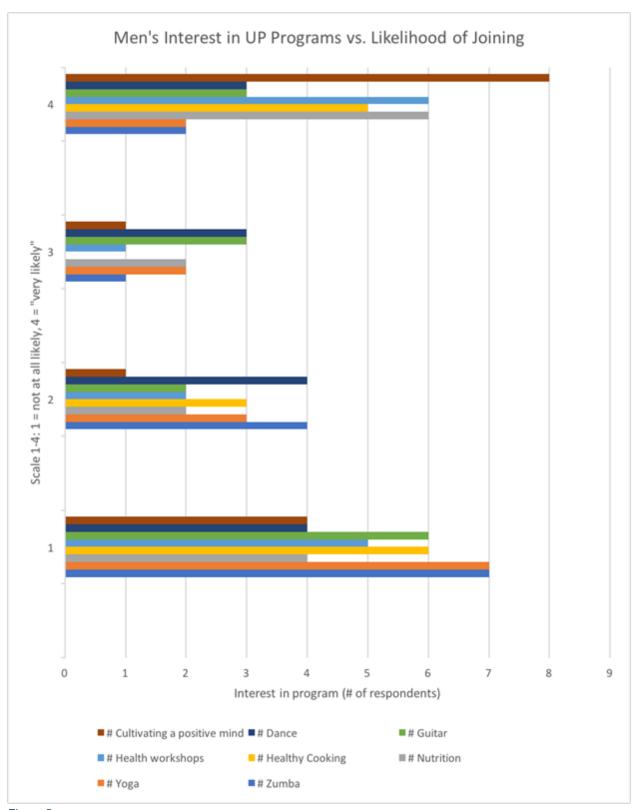


Figure 5

# **Recommendations**

Based on the findings and research from PRAD 585, there are a number of recommendations that the class recommends UP implement in order to increase participation among males in health-focused activities.

Our recommendations are broken up into two categories:

- 1. Long-term recommendations: Ideas that can be implemented over a long (more than 6 months) period of time and may require additional resources.
- 2. Short-term recommendations: Ideas that can be implemented in a short (less than 6 months) period of time and can be put in place with minimal, additional resources.

### Long-term recommendations

- 1. Bring in doctors to implement on-site physicals various times of day and days of the week to ensure all classes are offered with a doctor is on-site.
- 2. Introduce mental health wellness classes to encourage mindfulness and overall well-being among men who work long, physical jobs.
- 3. Offer couples cooking classes to encourage husband and wife to learn and teach each other to cook healthy together.

### Short-term recommendations

- 1. Offer a weekly summer soccer league for men; this encourages physical exercise and offers a sense of comradery among the males at UP.
- 2. Create a weight-loss challenge for male participants at UP with a nominal cash or gift card prize.
- 3. Incorporate 10-minutes of a physical or mental wellness activity/education activity in every male-focused class offered at UP.

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# **Appendix**

### **Universidad Popular Health & Wellness Survey**

Thank you for taking our survey. Your answers will help Universidad Popular better meet the health and wellness needs of our community. All your answers will remain anonymous. This survey should take about 5 minutes. If you have questions about this survey, please contact Abraham Celio, at Universidad Popular: abecelio@gmail.com.

What programs are you involved in at Universidad Popular? (Check all that apply, or check none.)

Learning to Succeed (LETOS)

Digital Literacy Program (DILIPRO)

Youth Program (UPRISING)

Health Literacy Initiative (HEALIN)

Overcoming Barriers to Success (OBS)

None of these

Which, if any, of the following classes have you taken at U.P.? (Check all that apply.)

Nutrition

Exercise (Zumba, Yoga, etc.)

Massage

Computers

Electricity

Plumbing

Guitar

**Knitting** 

English

**GED** 

Other \_\_\_\_

In general, about how physically active would you say you are in a typical week? Choose the answer that comes closest to describing your typical week.

I do not get much activity at all -- I spend most of my days sitting

I only get light activity on most days (for example, easy walking, light household or work activities)

I engage in moderate or vigorous activity (for example, physical labor, brisk walking, heavy cleaning, exercise class) 2-3 days a week

I engage in moderate or vigorous activity 4-5 days a week

I engage in moderate or vigorous activity 6-7 days a week

In general, are you satisfied with your eating habits? That is, do you feel they are reasonably healthy in terms of what and when you eat? Pick the statement that best describes how you feel.

I am very satisfied with my current eating habits

I am mostly satisfied with my current eating habits

I have mixed feelings -- my eating habits are somewhat good and somewhat bad

I am mostly unhappy with my eating habits

My eating habits are terrible

Who does most of the cooking in your household?

Yourself

Spouse/Partner

Roommate

Children

Other

Do you feel rested when you get up in the morning?

Yes, most of the time

Some of the time

Not very often

Never

Overall, how do you feel about your health? Check all that apply to you.

I am satisfied with my physical health.

I am satisfied with my mental health (such as anxiety level, stress level, amount of relaxation or social time)

I would like to improve my mental health (stress, anxiety, relaxation, etc.)

I would like to lose or gain weight.

I would like to be more physically fit (such as increase stamina or get stronger)

I would like to better control a health problem (such as diabetes, high blood pressure, chronic illness)

I would like to improve my habits (such as eating, stop smoking, life balance, etc.)

Other comments?	

Are you interested in learning more about health and wellness?

Definitely yes

Probably yes

Not sure

Probably not

Definitely not

About how often do you, personally, see the doctor or a medical professional for checkups, physicals, illness, etc.? Choose the answer that best describes your usual pattern.  Once every few weeks Once every few months Once a year Once every few years Almost never
Now think about what you (or someone in your household) usually does when someone in your
family is sick and needs a doctor. Pick the statement below that best describes what you typically
do in that situation:
Immediately take them to a doctor
Immediately take them to a clinic
Immediately take them to the Emergency Room
Wait and try to treat them at home first, only taking them to see someone if it gets much worse
I do something else (please write it here)
Display This Question:
If "Now think about what you (or someone in your household) usually does when someone in your family
is sick and needs a doctor. Pick the statement below that best describes what you typically do in that
situation" "Wait and try to treat them at home first, only taking them to see someone if it gets much
worse" Is Selected  If you decide to take them to the doctor eventually, where are you most likely to take them?
Doctor's office
Clinic
Emergency Room
Other

Below are some programs that Universidad Popular offers. On a scale of 1 to 4, with one being not at all likely and 4 being Very Likely, how likely are you to join each of these programs at UP?

1 2 3 4

Nutrition

Yoga

Dance

Zumba

Guitar

Health workshops

Healthy Cooking

Cultivating a positive mind

Below are various types of wellness programs. If these programs were offered in your
community (at little or no cost), which of them would you be interested in trying? (Check as
many as you wish, or none at all.)

Below are various types of wellness programs. If these programs were offered in your
community (at little or no cost), which of them would you be interested in trying? (Check as
many as you wish, or none at all.)
Aerobic Exercise
Back care
Biking
Cancer screenings
Coping with stress
Dance Classes
First aid training
Martial Arts
Meditation
Nutrition
Running Clubs
Smoking cessation
Sports
Weight lifting/body building
Yoga
People report various reasons for not trying out wellness or health programs. In your experience, what factors have prevented you from participating in wellness programs in the past? (Check all that apply.)
that apply.) Financial Cost
Lack of Energy
Lack of Interest
Lack of time  Lack of time
Not Convenient
I don't need it
Other
Thinking about the health classes and programs at U.P., what would make you more interested or
willing to participate in some of them?
mining to participate in some of them:

\*Open-ended answer:

Now we just have a few more questions for categorical purposes. Remember that all your answers are anonymous.

```
What is your age?
      <18
       18-25
      26-35
      36-45
      46-55
      56-65
      Over 65
How long have you lived in the U.S.?
       1 to 5 years
      6-10 years
       11-20 years
      21-30 years
      31-40 years
      41 years or more
What is your gender?
      Male
      Female
```

### **In-person Interview Transcripts**

### Transcript 1 of 5

Luis: What is your name?

Alejandra: Alejandra Marques

Luis: Age? Alejandra: 32

Luis: Birthplace?

Alejandra: Guadalajara, Mexico

Luis: What is your role, your title here?

Alejandra: Volunteer

Luis: What programs do you volunteer for?

Alejandra: "inaudiable @ 1:59"

Luis: How long have you been volunteering here for?

Alejandra: A month and a half

Luis: So the focus of our research is around Hispanic men and their attitude toward health. So from what we heard from Abe and what we heard last week, we found that men don't prioritize their health as much as women or others. So a lot of our questions will be focused around that. What are some of the programs here that you're familiar with that involve health and wellness?

Alejandra: Just the nutrition class

Luis: Have you attended a nutrition class before?

Alejandra: Not here

Luis: As a regular person and volunteer, what is your attitude toward the health programming here?

Alejandra: It's important because we're not as educated in nutrition

Luis: Why do you think that is?

Alejandra: Mostly the Hispanic culture is into proteins, meat, pork and that stuff.

Luis: Do you think the Latino community here is aware of some of the health issues that can be caused by bad nutrition?

Alejandra: We do know, but we don't really care

Luis: Why do you think that is?

Alejandra: Because of lack of time

Luis: Do you think there is one group that's more likely to care about nutrition for example, men vs. women, mothers vs. fathers, or anything like that?

Alejandra: Think moms, but they don't really have time to cook a good, healthy meal

Luis: Do you think if there was a hands-on program that helped them develop healthy cooking choices or an accessible free program, would they be likely to engage in those type of programs?

Alejandra: I think so

Luis: For men, what do you think some of the reasons are why they're not as interested in the health classes at UP?

Alejandra: They're not interested until they get some sort of disease or health issue or pain, that's when they'll be interested

Luis: How do you think we breakthrough that or communicate the importance of it?

Alejandra: We do have the plumbing class and there's a bunch of guys there so maybe we can take advantage of that

Luis: What are the ways that UP can incorporate health initiatives into some of the other health programs offered?

Alejandra: Maybe just getting them informed to see what they can eat, like a diet, just let them know how much protein, veggies they need to eat, like a cheat sheet

Luis: From your own personal experience with men in general, have you had any feedback from them on their attitude from health?

Alejandra: I have 4 younger brothers and the oldest of those he doesn't eat well, he will get a coke and lots of salt in his food and maybe when he can't see his own feet, he'll be able to catch it and get on the healthy side

Luis: I hear about nutrition, but what about physical fitness. Do you think there's enough fitness classes catered toward men here?

Alejandra: I don't have an idea, but maybe there's a soccer team that could be a good idea.

###

### Transcript 2 of 5

Interviewer: Introduction/What is your name?

Respondent: Maria Carrillo

Interviewer: How old are you?

Respondent: 29

Interviewer: Where were you born?

Respondent: Mexico

Interviewer: How long have you been working for UP?

Respondent: I have been working for UP for a full year.

Interviewer: What is you role?

Respondent: My role is Job Developer. I work with two programs. My main focus is on OBS (Overcoming Barriers to Success), which focuses on helping people with disabilities. What we do is we have job trainings and all of that.

Interviewer: How did you hear about getting involved with UP?

Respondent: With UP, it was funny because I came for volunteering back in 2015. They have a program every September and I came to volunteer. I was interested in the program, but at that time I was in school for Graphic design. So I grabbed a brochure and saw they had computer programs. That was my interest. I called, but at the time they didn't have the program be of the font pads so I came for the ..... I then started with the youth program in 2016 and started working with the OBS program as well.

Interviewer: Do you have any experience before with any other types of community organizations?

Respondent: I was part of the Youth Program with a church for about eight to nine years so I had the experience with the youth. That's how I decided to apply. Then I was hired.

Interviewer: That's great, can you walk me through a typical day?

Respondent: Okay yeah. My experience here, since the OBS is focused on finding placement for those with disabilities, is on any regular day what I do is I go to different places to find job openings. I basically visit different stores and business and then I come back to UP. That is like my mornings, but then I come here. One or two days out of the week I meet with the participants which we do jeopardy nights and different activities that are good for them. This helps them if they are called for a job. That's basically what I do in the mornings. Then at one we start program with the youth which is every day.

Interviewer: How many days a week are you here?

Respondent: Every day

Interviewer: And the weekend too?

Respondent: Sometimes. Sometimes I only come on Saturdays.

Interviewer: Is there any difference between the weekday and weekend with the way your day

is or no?

Respondent: Not necessarily for me no.

Interviewer: Jumping into more along the lines of men's health, what are some of the programs you are familiar with the health literacy? Even if you are not involved, then overseeing it what are some of the programs or classes that you are familiar with that are related to health?

Respondent: Well I guess that the OBS program is a part of it. What I do is I, um, last semester I had mostly guys in the program who weren't really involved in activities that involve healthy stuff. What I do with my participants is I try to get them involved into being a part of any of the programs. I have been a part of the Yoga and Zumba classes as well. So if I had to recommend the participants of my program I would tell them about that.

Interviewer: What types of programs does UP offer that involve health and wellness?

Respondent: They have nutrition, yoga, and Zumba classes. We offer, um, the health fairs which we are going to have on the 25th. We are always looking into like, for instance, during the ESL classes that's once a week they have a nutrition class to everything that's involved.

Interviewer: Which programs do think are most effective as far as reaching the most people or getting the most interest?

Respondent: For health, um, I would say during class. Like health classes. I think it is when more men are reached like the nutrition classes.

Interviewer: What do you think are the feelings and or attitudes of the initiatives here? How do you think the participants feel about the health literacy programs? How do you feel the staff feels about the health programs?

Respondent: Okay, so for the first question, I think that as we had mentioned I think it's a culture thing for us. It's different for me. I agree that we have to be educated as to what's healthy because, for instance, I am a vegetarian. For me to transition from being a Mexican then going to vegetarian I worried that I cannot eat tacos anymore. It's not necessarily that, but there are different ways of reading it. So I think it's um when we come into if we are new to UP then we have to introduce a program. I believe that participants need to see that staff is really involved in health and wellness and they will start following. Otherwise, if I am preaching health and I'm trying to teach them you have to drink at least three bottles of water...If they see I am doing the opposite and I am drinking a coke that's when I think that participants are not really into that. So I believe that staff really needs to embrace it first for participants to be able to do it as well. There are so many ways if the person who's talking doesn't do it why would I do it? Why would

I follow if you aren't even following? So that's what I do with the kids. So with the youth program it's all boys. So they're teenagers and are so used to eating chips so what we do are fun activities. Like we are going to have an activity this week on Wednesday where we are going to carve a water melon into a figure. They are carving but they are eating as well. I think that's what we need to do more of and during class.

Interviewer: Now from the staff perspective what's the staff's attitude or feeling about the health program?

Respondent: I guess it's the same, but since we believe in respect, I mean, I can only speak for myself. Because like I said I rather eat a banana then chips. That's because I decided to become vegetarian and eat healthy. I guess we all believe in that but obviously the coordinator as well.

Interviewer: What are ways UP can incorporate health initiatives and the programs offered? How can they combine health programming in other programs?

Respondent: Okay, so like I said, I think that once a week the ESL classes, but that would be like once a week they offered class. If it was continually we would think about it more rather then once in a while. I think I can speak for others the programs I am involved with the kids is harder than the adults, but once you start telling them the good about being healthy. Just for us to have a healthy activity they start eat different and start taking more water. That's something we have to nurture. That would be better if we start plugging the healthy part into their classes once a week rather then once a month.

Interviewer: What do you think are some of the reasons men are not as interested in the health programs?

Respondent: I believe that they are not really into that because they are the head of the house and it's a macho thing. It's mostly women. Something cultural, so basically most of them have been raised that they have to take care of your family and there is no room for you to be healthy. If there is, they are already tired. It's an occasional part for them to be involved. Like last year during June we had an advanced program called . Since I like to run I came out with a 5K which was too late to have a lot of people. It was a good turnout so I came to all the classes to ask them and the first question I got was "Am I going to pay for running?" It was from a guy. I said, "It's necessary you help the programs and you get a free shirt and then you get to know your community and neighbors better or in a different way and help you help spread the word." We need safer neighbors. For example, someone your age sees you running. If someone you know sees your running then they might be like, "I saw them running." Around here this neighborhood does not really. You don't see that. It's a cultural thing. If you go more to the north you see them. You are like, "oh that's them. They have money." I think that's something that has to be educated and, um, to find places because sometimes we believe we do not have enough resources like parks or something like that. We are like, "Where will we run?" We are not running at a park we are running out around the neighborhood. This had more men, but because

we tried to tell them we need you to get out there. I guess it's something that needs to be informed or find ways to get them involved.

Interviewer: That's all the questions I have. Do you have any questions? Anything I may have missed or left out?

Respondent: No.

Interviewer: Just to let you know what's next, I am going to transcribe the interviews and will incorporate them into the research. We might do a focus group next week. If we have time, a short survey. Once we are done we will share our findings with Abe.

Respondent: Okay. That's good. It was nice to meet you.

## Transcript 3 of 5

Interviewer: Your name? Respondent: Victoria Nava

Interviewer: Age?

Respondent: 41 years old

Interviewer: Were you born here or Mexico?

Respondent: Mexico

Interviewer: And your role here at UP?

Respondent: My role here..um...I started as a participant of the English classes and I started part time at the front desk. And I have been helping with the English classes, the basic class and also with the health program. I'd say help promote it.

Interviewer: Ok. Oh, great. Ok good.

Respondent: And volunteer.

Interviewer: Umm Can you walk me through a typical day? What is a typical day like here for yourself?

Respondent: For me? Okay..I start at 9:00 helping with the English classes, from 9-12. I have a group of 24 people and they are basic in the english language. And then from 12 to 1p.m. I make phone calls to the people who doesn't come and I guess to let them know that we are here waiting for them and then I return here well I go to my house at 1p.m. and I return at 4p.m. at the front desk area. And I stay there from 4p.m. to 9p.m. and it's more work in the front desk area because it's a lot of people that came in. A lot of questions...

Interviewer: Okay. You said you were a health facilitator. So tell me a little bit more about that?

Respondent: Okay. I took some trainings about mental health and umm nutrition class also. We help Olivia with the nutrition classes, here also. And uh, it's basically. We tell the people, we teach them how to convert the recipes in a nutritious way.

Interviewer: How do the staff feel about the health program at UP?

Respondent: We can see a lot of change in the people. And they...I always talk to the people at the front desk. A lot of people came to talk to me, especially the women. They can express like how they lives have been changing and because its very important our health. The people who are in the nutrition class...they are doing a lot of changes and they share with us and we saw because I have to make sure their body changes and like every two week I measure them on the waist also. We can see the changes..not just the physical changes but their self esteem is good.

Interviewer: Do you see more women than men attending the health classes?

Respondent: Mhmm (agreeing)

Interviewer: Why do you think that is?

Respondent: mmm, because our culture. Maybe. Idk. I think some of the men think that their wife are in charge of taking care of them. Idk.

Interviewer: Any feedback you receive from the women who participate in the health about maybe why men don't show up? (Maybe it's their husbands, friends or whoever. Maybe there's a discussion from the women about why men aren't involved in health?)

Respondent: Because they have a job and also we create a class in the evening time for this reason. I think its better because in the evening we have more men.

Interviewer: What can UP do to improve the health topics that will attract more men?

Respondent: Ummm maybe activities like sports. Because in the past years, like 2 or 3 years ago we had a football team and yea...

Interviewer: Were physicals required?

Respondent: No

Interviewer: Are there ways that UP can include health programs into other programs? (like computers, or English or plumbing or whatever? Do you think theres ways to include health in the other classes for men?)

Respondent: It could be mental, physical. I think they really..it could be more like...Idk how to explain it..

Interviewer: Can you respond in Spanish?

Interviewer: Okay so those are all of the questions I have. Do you have any questions for me or anything that you were thinking about and didn't get a chance to say?

Respondent: No

Interviewer: Okay. Great, so that the end of the interview. So I'm going to take the interviews and were going to go back, transcribe them. I think were coming back next weekend for a focus group. A group to speak to more people, like in one setting. So maybe here you'll have like 10 people here and just go around. Were taking all of our research, combining it, and then we'll give Abe a recommendation and based on the research and our thoughts a recommendation on maybe how he can change a few things or do new things to attract more men for health. Thank you very much.

## Transcript 4 of 5

Luis: My name is Luis Agostini, I'm a student... a graduate student at DePaul University. I'm in a Public Relations research class. So what our class has done - our professor has worked with Abe in the past, just so our class can have a real world scenario to work on, and Abe came to our class explained Universidad popular, explained all the programs, and the community and the different initiatives. So from him speaking, one of the things we took away from Abe was the disconnect between Hispanic men's attitudes towards health and the importance of it. So basically-with the yoga, and nutrition, and other classes offered here- there's way more women interested in those kinds of classes than men. There's research out there that men are more likely to suffer from health issues like diabetes. So for today, we're interviewing UP staff and volunteers- people who help lead programs and interact with participants- to get their perspective. We'll speak to the men and women who attend classes but it'd be helpful to get feedback and perspectives from people like Maria and yourself. There are no right or wrong answers, I'll try to be as objective as possible......

Luis: So with that we'll start with just a few questions...

Luis: Your full name?

Ricardo: Ricardo Silva

Luis: Your age?

Ricardo: 18

Luis: Were you born here-or elsewhere?

**Ricardo:** Here, in the United States

Luis: In Chicago or...

Ricardo: California.

Luis: Cali?

Ricardo: Yes

Luis: Where in Cali?

Ricardo: Los Angeles

Luis: What's your occupation?

Ricardo: Student at Hubbard High School

**Luis:** Which neighborhood is that in?

Ricardo: Chicago Lawn

**Luis:** For how long and what's your role here at UP?

**Ricardo:** I used to be a volunteer here for 2 years, and now I'm in the process of working here

again

Luis: Okay, what programs did you volunteer for?

Ricardo: The LEDOS program

Luis: What's that?

Ricardo: They offer English classes to Spanish speaking adults

Luis: Okay, and what are you working toward now?

Ricardo: Now teaching a class by myself

Luis: Can you describe a typical day here?

**Ricardo:** A typical day here, you enter a class with your students, you start off with a bell-ringer, the objective is to start off fresh and have the bell-ringer and the students interact with each other, practice English-verbs, pronouns- when to use them and how to use them. And yeah, from there that's a full day [for 3 hours]

**Luis:** Now focusing on health... What are some of the programs here that you are familiar with that relate to health and wellness?

**Ricardo:** There's a program called the healing program. And that program teaching you nutritional stuff. There's different departments for the nutritional stuff. Then there comes exercising- Zumba, yoga, things of that nature. The problem with men is to get the students more involved and care about their health, but also as a stress reliever with all these exercises like yoga to help them...

**Luis:** Any of the other programs that you're familiar with? The ones that deal with health?

**Ricardo:** No, that's the only one I know

**Luis:** Which do you feel are the most effective in terms of attendance and what the participants are taking away?

**Ricardo:** The LEDOS program. Our students are willing to learn. They're motivated for their job and daily life.

**Luis:** And what about the health programs? Are they effective?

**Ricardo:** I think they are.

**Luis:** Which ones?

**Ricardo:** The more exercising types. Zumba is a really big one.

**Luis:** What are the attitudes from facilitators in general toward the health initiatives? Do the facilitators feel like they're really breaking through and connecting with participants? Or do they feel like there's a lot to improve on.

**Ricardo:** In particular health?

Luis: Yes health.

**Ricardo:** We do get in detail with our students. Some of our students are into [them] but the majority of the women are and the men are not. They're more into the arts programs here.

Luis: What are some of the sports offered here?

Ricardo: Soccer, exercising

**Luis:** What do you think are some of the reasons men are not as interested in the health initiatives here as some of the women are?

**Ricardo:** The men are more conservative... and I believe they become more tired. I teach some classes where the males are tired from work and they really don't seem motivated...and they do have tough jobs like in construction or jobs of that nature. I believe it's hard for them to do more and go the extra mile of more exercising. Their jobs are pretty hard on them.

**Luis:** Is there anything UP can do to improve their programming to make it geared toward menmaybe through their scheduling or the types of classes being offered?

**Ricardo:** Yeah I think scheduling a specific hour because usually around the evening most males tend to rest and relax in their house... they're really not in the mood. Maybe in the night or in the early morning could get more males in the program

**Luis:** Do you think there are ways that they can incorporate health into some of the other programs that are already being offered here- like plumbing or...?

**Ricardo:** One way would be to make it a requirement in part of the teaching English department. I think that would help. Another thing is in the sports, they can explain to them healthy lifestyles because I believe if you only have a health class, most men are not going to want to go. I think if you hook them in their hobby- in soccer or English learning- if you include that in part of their class, I think it will give more motivation for them to attend.

**Luis:** Okay those are all the questions that I have. Do you have any questions? Or anything you think I might have left out? Or anything you have a thought on related to this topic?

**Ricardo:** As you said, it's really hard for males. I do agree that they do lack in health. The only thing I can tell you is that their job has a big thing to do with it. And sometimes they barely have time to even come in and learn English- so yeah, that plays a big factor in it. Just having a class of health, we aren't going to get a lot of males... we'd have a lot of females but males are much harder to get. I think the best way would be to have it part of their job or hobby... include it in there.

**Luis:** Great, that's the end of the interview.

## Transcript 5 of 5

LUIS: OK, I'm Luis Agostini. I'm from DePaul University, and I'm in a research class and we've been working with Abe, our professor has been working with Abe, to provide our class a real-world scenario to work on for research.

So, what we're doing when Abe came to our class, he spoke about the different types of programs that are available

and the community that's involved, and one thing that we heard from Abe is that for the health programming, they

have a challenge reaching man, Hispanic men. Not enough Hispanic men are interested and you know, like the

classes related to health that are offered here are predominantly women, that attend and are interested in health

instead of men. Did you get all that?

So, that's what we're trying to do you know to maybe do a bit more research with the facilitators and the volunteers and the participants, along with our own research, through interviews, like one-on-one to use focus groups and

surveys. We'll take all that and make a recommendation, and give it to Abe.

There are no right or wrong answers. I'm not going to agree or disagree with you. So, I'm going to ask you these

questions and I'm recording this to make sure that I get your feedback correctly and accurately, and so I don't put it

into my own words or anything like that.

LILIA: Okay. Hello, my name is Lilia.

LUIS: Could you say your full name and spell it?

LILIA: Lilia Segovino. S-E-G-O-V-I-N-O.

LUIS: Again, one more time?

LILIA: S-E-G-O-V-I-N-O.

LUIS: Okay, and your age?

LILIA: 50.

LUIS: 50, okay. And generations, so were you born here or...?

LILIA: I was born in Mexico City.

LUIS: Okay, Mexico City. And what's your title or role here?

LILIA: I'm Coordinator of the Adult Literacy Program in Chicago Lawn.

LUIS: Okay. How long have you been doing that here?

LILIA: I have been working at Universidad Popular for about 16 years.

LUIS: 16, wow. Great. Can you describe a typical day for me here at Universidad Popular?

LILIA: Here or ...?

LUIS: Or, just here in general, yeah.

LILIA: Well, we meet with the participants at nine in the morning. We discuss how things were the day before. And what are they...things they would like to share during the classes. And we can continue with our classes. So, we talk about each other, learning about their experiences...experiences and our experiences. And we finish the class. We have a break. And after that we finish the class at twelve. And after that we some meetings with the other facilitators to see how it was that day and what we need to work with, and what we need in the classrooms, and in the community, what we are expecting of all the participants. What lessons plans and topics we need to develop. After that I have to, in my own life, I have a break (laughs). I have to pick up my granddaughters from the school, and drop them with her mom, their mom. Then I have to go back to...evening we have another program, so I have to go back and see if everything is running, uh, well and help out with the facilitators if there's anything. So that is everything that day. There is reports and anything we have to submit.

LUIS: What are some of the programs, that you're familiar with here, that involve health and wellness?

LILIA: Well, I think that we, we work with different topics here in the class. And, we, we have health, we have education, and we have community. And we generate them. For example, we ask, "What are you eating that for?" "How healthy is what you are doing?" "When you are with your family, what type of food do you eat everyday, or what type of...maybe you have to work a lot, or maybe you have to buy fast food. We make a research about nutrition, how they are doing, how they can join a class... what type of food the kids receive from the school. If this is healthy or not. Those health issues, we cover different topics.

LUIS: Which health programs do you think are the most effective?

LILIA: I think when we talk about nutrition this is the something that all the participants would like to know... what to eat, what is the best way of eating. And, they ask for nutrition classes, because they want to change in their houses their way of eating, not healthy. Or other, because they have different illness. How they can consume products about diabetes. What they can eat. How much times they eat during the day.

LUIS: What's the general feeling from the UP facilitators, the staff, and the coordinators about the health programs and how they're received, by those who participate, both men and women?

LILIA: At Universidad Popular we have here, Yoga, we have Zumba classes. We invite the participants and how they are going to, what benefits they will have by coming to those classes. For Yoga, there are some men, that they came because, there is one person that maybe told them if they go to Yoga, you're going to feel better. You are going to walk or run, and do what you were not doing before. Come to Yoga, you will feel better. And we hear from the participants all the time, "I feel pain in my knee, on my back." Because we are in the South Side, we don't have the possibility of being here in Universidad Popular (we have this space). Over there, we send the participants and some of them just come here for the Yoga classes or computer. In certain ways, health, is like, if you are good at what you want. For example, by doing Yoga, or doing something else, you're going to be healthy.... whether mental or physical. That's the way that we approach with the participants. We don't say, "You have to...You should try. It will make you healthy, for women and men."

LUIS: Okay. What do you think are some of the reasons men are not as interested in some of the health programs as women?

LILIA: I think... they don't like shots (laughs).

LUIS: They don't what?

LILIA: They don't like to go to the doctor (laughs). They don't want to be like sick, or they don't like to say, "I have pain," or "I feel bad." Because maybe it's something in our culture. We say, "No, that is a man. He is strong." And sometimes he says, "No, I am the man. I am fine. I'm not sick. I don't have any illness. I have to go work." See, this is hard for them. I think it's a little hard. What we have done in one of the classes is to make a questionnaire about different things at home. And, the participants take these questions to their houses, and they ask their family. So, sometimes they say I didn't know you have this program. So you were sick, or no "how you feel today?" Ask them a question. (Spanish).

LUIS: Uh huh. Uh huh.

LILIA: How are you doing today? They will say, "Fine," or you will ask them when was the last time they went to the doctor. They will say, "Why?" or "Why, why.." or "What happened?" or "What is happening?" Something to remind the house they are not taking care of health issues. Go to the doctor at least once a year. And more when you are over your forties. That is something that is different, and changes in the body...for men and women. And we don't want to know. And I think that the men....my husband, whenever he is sick, "Can I give you a pill?" He'll say, "No, I don't want anything. I want to be fine tomorrow."

LUIS: Right.

LILIA: He says, "I'm fine, I'm fine."

LUIS: Okay.

LILIA: And I think it's like the culture. I think that is the culture. "I am strong, I am the man, I am not sick." But we need to create in the wife, how to approach the husband. To say, "How are you doing today?"

LUIS: How can UP improve its programs to include more health topics?

LILIA: At Universidad Popular, we need to be conscience with the population. Sometimes I provide health literacy seminars. With the children. "Oh, I didn't know my child is acting like that." When they get the seminars they say, "I didn't know that, but I have noticed in my house." So we figure out how everyone is doing, and how they can be aware of the behaviors in the people, the children, the adults in your house. We talk about those illnesses, like diabetes. We are creating conscience in the participants. Like something can happen if we don't take care of it.

LUIS: Do you feel you're reaching men with the seminars or, if not, how do you think you can reach men more effectively with the health programming?

LILIA: More effective?

LUIS: Yeah, like how can you do a better job of reaching the men with the programming, with the health programming here?

LILIA: For example, in the morning, I have 22 women in the class. In the other class, a man has to work....money is a problem. So he has been working right now. The other two or three are 62 years old. But we can create, I don't know. Maybe the same, maybe the same. Maybe showing them that we need to be careful with the age, first of all. To see what is going on. Invite them to different seminars. And develop the class, that they don't believe in doctors, that they are fine. It's just age, it's just the age. But they don't know something about a real chronic illness. I can't say, "Oh, you are sick." I can say, "We have this seminar. Would you come to this seminar and try to see...learn more about something.

LUIS: Okay. Are there ways that you all can incorporate some of those health programs into programs that already exist. Like, plumbing or computer literacy. If so, what are the ways you can incorporate health into the other classes?

LILIA: For example, how to use a computer, to get into websites about health issues. We need to get insurance. If we don't pay insurance on a monthly basis, we are going to have a fine. So, maybe during one of the other classes say, "What is that?" First of all, what do you have to pay? How much do you have to pay? What are the options they are showing? What kind of hospitals? What type of organizations provide seminars about health? Everything related to health. Doctor, insurance, everything. Hospitals around the community. What are public, what are private? We talk about upstairs. This is for men, right?

LUIS: Mmhm.

LILIA: Maybe, I will invite some of them to see how..... This is hard... (laughs)

LUIS: (laughs) That's why we're doing this.

LILIA: What they love sometimes is football. You're going to be fine. So before you make any kind of exercise, you need to make a physical. How healthy you are to run, to make some exercise. Then you can be, if you like it, be part of this team.

LUIS: That's all the questions I have for you. Do you have any questions for me or, anything you were thinking about, that you didn't get the chance to say.

LILIA: Um, no. That's all, because I was thinking about an example of my husband. It is really hard for me. (laughs)

LUIS: So, just to let you know, what's next. I think I'm going to interview Abe. And, after that, take all the

feedback, go back. I think we're coming back next weekend to do a focus group, survey. We're going to get all

the research together, package it, and give Abe a recommendation on like what we think could be some good

steps, based on the research to reach more men here. Thank you again.