

Development of a Tailored Physical Activity Intervention for Middle Age and Older African American Men

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**Presenter Disclosures** 

No relationships to disclose

# Background: racial/ethnic health disparity

• African American (AA) men are more likely than white men to live with:

- Coronary heart disease
- Hypertension
- Stroke
- Cancer
- Diabetes

# Background: Inactivity in older adults

- Older adults are less likely to be active than younger adults even though regular physical activity (PA) can facilitate the aging process.
- Experience indicates far less participation by men in general, and by racial/ethnic minority men in particular, in communitybased PA programs.

# Why physical activity?

- Although PA is not a cure-all, many chronic health conditions can be better managed with regular PA.
- However, AA men in general are less active than their white counterparts.

# Factors influencing physical activity in older African American men

 In 2006, the University of SC Arnold School of Public Health Prevention Research Center embarked on a feasibility study funded by the National Institute on Aging called Factors Influencing Physical Activity in Older African American Men.

# **Study Aims**

- Identify factors that facilitate and deter AA men >45 yrs from participating in regular PA.
- Broaden understanding of how to tailor a PA program for AA men >45 yrs.
- Use the data to design and implement a pilot PA program to test the feasibility of increasing PA in this population.

# Multidisciplinary research team

	Research Team	
Steven Hooker, PhD	PI	Exercise Science
Sara Wilcox, PhD	Co-I	Clinical Psychology
Ericka Burroughs, MA, MPH	Project Coordinator	Anthropology
Carol Rheaume, MSPH	Data Coordinator	Biology
Anna Feeney, MS	Research Specialist	Exercise Science
Mary Ellen Suitt, MPH	Research Specialist	Health Promotion
Community Advisory Board: personal trainer, state health department office of minority health associate director, county health department supervisor, and member of the clergy.		
External consultants: men's health and health promotion to African Americans		

# Methodology



 Key informants were recruited from various sectors of the community to reach men of varying age, physical activity, SES, and education levels.

• Offered a \$30 stipend for their participation.

# Methodology

- 49 in-depth, semi-structured interviews with key informants:
  - 17 active AA men age 45-64 yrs
  - 12 inactive AA men age 45-64 yrs
  - 10 active AA men age <u>>65 yrs</u>
  - 10 inactive AA men age <a>65 yrs</a>

# Methodology

- 14 in-depth, semi-structured interviews with general informants:
  - Healthcare providers
  - Health educators
  - Clergy
  - Personal trainers
  - Spouses

#### Key informant characteristics

- Mean age = 61.5 years
- 71% married
- $74\% \ge 1$  year of college
- 47% retired
- 68% annual income ≥ \$50,000
- 87% reported good to excellent health despite 71% overweight/obese
  - 75% reported at least 1 chronic condition

# Interview topics and questions

- Developed by our multidisciplinary research team in consultation with the external consultants and community advisory board.
- Topics included health, masculine identity, barriers and enablers of PA, and how to make a PA program appealing and effective.

# Data analysis

- Interviews were tape recorded
- Transcribed verbatim
- Coded in pairs into NVivo<sup>™</sup> software
- Coding agreement was achieved at a minimum of 80% before interpretations were made through group consensus.

#### Results

- Themes that emerged from the interviews were related to
  - Cultural appropriateness
  - Access
  - The appeal of competition to men
  - Education
- We also discovered enablers we could incorporate and challenges that we could anticipate.

#### **Cultural appropriateness**

- PA needs to be portrayed as appropriate within the culture of AA men.
  - Being manly and healthy is acceptable and can co-exist.
  - Men are worthy of being healthy and fit.
- When marketing the program, employ the concept of "FUBU" (For Us, By Us).

#### Access

- The program should:
  - be convenient (time, days)
  - be accessible (location, cost)
  - offer suggestions on how to make PA a part of daily life/routine
  - integrate with existing programs or services if possible (e.g., community recreation center, church, gym, or work)

#### Competition

- Healthy competition should be included. This was associated with various concepts related to men such as:
  - ego
  - challenging
  - team spirit
  - fun
  - camaraderie
  - incentives
  - achieving success
  - showing off

#### Education

- Program should:
- Include "ABC's of health, fitness, and nutrition"
- Focus on health problems and their treatment
- Focus on benefits of PA and healthy eating
- Include information about the benefits of specific types of activity/exercise
- Educate men about the aging process and types of chronic conditions they may encounter if they do not take charge of their health

## Specific enablers

- Program should:
  - Include incentives (e.g. prizes and low/no cost PA opportunities)
  - Promote and foster camaraderie and social interaction among men; build social time into the program
  - Create program identity and a sense of ownership
  - Be sure men have fun

# Challenges to anticipate

- Changing men's "mindset" that PA does not have to include competitive sports. Many of the men were physically unfit or unable to participate in competitive sports so they chose to be inactive.
- "Men are great starters, but poor finishers." Maintaining momentum was going to be a challenge.

# Testing themes

- We tested our interpretation of these emergent themes with a focus group prior to the final development the PA intervention.
- We also solicited ideas for an appropriate program name and logo.

