

**Health Care Attitudes
& Service Utilization
Among African-Americans
in Waterloo, Iowa**

Prepared by the
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Purpose & Methodology

Purpose

Health status is not distributed uniformly across racial and ethnic groups; African Americans, Hispanics, and other “not White” groups are usually at a disadvantage. In Black Hawk County, Iowa, African American adults have higher rates than Whites for many disease categories such as 149% higher for deaths from all cancers, 208% higher for male lung/bronchus cancers, 177% higher for diabetes hospitalization, 152% higher for diabetes death, and 173% higher for cerebrovascular disease deaths (Meisinger, 2004). Although these health disparities are well-documented, the reasons for these differences are less well-understood. The present study examined cultural factors of health attitudes and beliefs, preventive health practices, and health care utilization among African American adults within the county. The study, sponsored by the Black Hawk County Health Department (BHCH), was conducted by the Center for Social and Behavioral Research (CSBR) at the University of Northern Iowa (UNI) as an activity of the UNI EXPORT Center of Excellence on Health Disparities.

Research Context

The present study was focused on assessing health status indicators, health-related attitudes and behaviors, and health care service utilization among African Americans in Waterloo, Iowa. Previous research has shown significant differences in the health status of African Americans and Whites (see Thomas, 1992, for a brief review). Recently, there has been considerable interest into investigations of the extent and causes of health disparities among minority groups. One area of interest is health promotion behaviors among African Americans (e.g., Ahijevych & Bernhard, 1994; Pettaway & Frank, 1999). Another area of interest is the relationship between spirituality and health. In general, there is considerable research demonstrating the positive relationship between religiosity and physical and emotional health (Koenig, 1997). Minority respondents are more likely than White respondents to attribute physical illness to supernatural causes (Landrine & Klonoff, 1994); therefore, religion or spirituality is particularly important when studying the health status and health care service utilization among African Americans. For example, among African American males, Brown and Gary (1994) found that higher levels of religiosity were associated with lower levels of depressive symptoms, smoking levels, and alcohol use. Also, religion and spirituality have been shown to be related to help-seeking behaviors among African Americans (Aaron, Levine, & Burstin, 2003; Dessio, Wade, Chao, Kronenberg, Cushman, & Kalmuss, 2004). Importantly, the present study was not designed to determine the level of health disparities between African American and White residents in Waterloo, but rather this study was designed to gather information about the health status, health-related attitudes, health promoting behaviors, and health care service utilization exclusively among African Americans in Waterloo, Iowa.

Methodology

Questionnaire. The format of the questionnaire was a 12-page booklet. The questionnaire contents included published scales, standard survey items, and items created specifically for this study. The published scales were the Health-Promoting Lifestyle Profile II (e.g., Walker, Sechrist, & Pender, 1987), Multidimensional Health Locus of Control Scales (Wallston, Wallston, & DeVellis, 1978), and the God Control Scale (Welton, Adkins, Ingle, & Dixon, 1996). In addition to these complete scales, other questionnaire items were adapted from other sources including: Brown, 2002; Neighbors, 1996; and Pender, 1987.

Data Collection. A nonrandom sample of 137 Black Hawk county residents was achieved through face-to-face interviews in residences *and* community settings in areas of Waterloo with a high concentration of African American adults (see Appendix B for list of locations) between April 12, 2004 and July 9, 2004. The vast majority of the face-to-face interviews were conducted by two minority interviewers working through UNI Global Health Corps and a few interviews were conducted by CSBR research staff members on the University of Northern Iowa campus. The interviewers were trained to follow the research protocol, provide informed consent and collect data for the project. Interviewers aided the respondents in completing the questionnaire by reading and recording responses as appropriate. When data were collected in community settings, the selected community sites gave approval to serve as data collection sites and notices were provided to site attendees announcing the project. On site, a brief verbal invitation to participate in the research was made by the interviewer to any prospective participant. Interested people were provided informed consent information and invited to participate in the interview. When recruiting in community spaces, the interview was arranged to take place in a private space, and many of the face-to-face interviews were conducted in private residences in Waterloo.

In addition to this individualized sampling technique, 18 groups in the community including churches (see Appendix B for the list) were mailed an invitation letter, approximately 5 questionnaires, informed consent information, and postage-paid return address envelopes. These packets were mailed on June 25, 2004, and each group was responsible for timely distribution to group members. The deadline for receipt of completed questionnaires to the Center for Social and Behavioral Research was July 9, 2004. A total of 92 questionnaires were distributed in this manner with 5 completed questionnaires being returned.

In summary, face-to-face interviewing yielded 132 completed questionnaires of which approximately two-thirds were completed in private residences. An additional 5 completed questionnaires were received through the neighborhood and community groups. In total, 137 questionnaires were completed and returned to CSBR. The data from one respondent were not analyzed because she reported that she did not consider herself to be even partially Black or African American. Race and ethnicity data were not reported by four respondents from the face-to-face interviews but these data were included in the analysis under the assumption that the respondent was at least partially Black or African American. Thus, data from 136 respondents were analyzed for this report.

Data Analysis. The data analysis and reporting approach used in this report focuses mainly on descriptive statistics rather than to relying on inferential statistics to assess sub-group differences in their health needs and experiences. The rationale for this approach is based on several considerations including the nonrandom sampling technique necessitated with this study design, the small sample size within some subgroups, and the objectives of the study. The use of inferential statistical tests was not precluded but was limited to some comparisons of gender differences and to the focused analysis section. Reference in this report to statistically significant sub-group differences were based on pairwise comparisons of percentages or means using the conventional 95% confidence level.

Tables and Figures. The percentages shown in tables and figures may appear to add to more than 100% due to rounding. Unless otherwise noted, the percentages correspond to fractions where the denominator excludes those individuals who did not provide information for the item.

Glossary. Terms or phrases that may be unfamiliar to readers and some technical terms are defined in the glossary. The glossary is located after the Reference section.

Description of the Sample

Various demographic characteristics of the sample are shown in Table 1. The entire sample was Black or African American, and predominately consisted of Protestant Christians who reported frequently attending church. As part of the research design, approximately an equal number of men and women were interviewed. For comparison purposes, the percentage of women in the sample (58%) was approximately equal to the percentage of women in Waterloo's African American population (53%) based on the 2002 Census information. Respondents ranged in age from 18 to 90 years; the average (i.e., mean) age was 46 years. Two-thirds (66%) of the respondents traced their family heritage to Mississippi. Nearly two-thirds (62%) of the respondents had at least some college or technical schooling beyond high school. Almost two-thirds (61%) were employed for wages full- or part-time and 2% were self-employed; however, 7% of the respondents were out of work and an additional 13% were unable to work. The annual household gross income was less than \$15,000 for the majority (53%) of the respondents. There were children under the age of 18 living in less than one-half (42%) of the respondents' households. About as many of the respondents were married (24%) as were divorced or separated (25%). More than one-third (39%) were single who had never been married and an additional 5% were single but living as married.

| Table 1 | |
|--|----|
| Demographic Characteristics | |
| Gender (n = 136) | % |
| Men | 42 |
| Women | 58 |
| Age (n = 136) | |
| Under 40 | 50 |
| 40-50 | 23 |
| 51 and Older | 27 |
| Family Heritage (n = 130) | |
| Mississippi | 66 |
| Some Other Place | 34 |
| Level of Education (n = 136) | |
| Never Attended School or Only Attended Kindergarten | 0 |
| Elementary School | 7 |
| Some High School | 5 |
| High School Graduate or GED | 24 |
| Some College or Technical School | 46 |
| College Graduate with a 4-year Degree | 10 |
| Graduate/Professional School with Advance Degree Completed | 6 |
| Religious Preference (n = 135) | |
| Christian-Protestant | 95 |
| Christian-Catholic | 2 |
| Muslim | 1 |
| Jewish | 1 |
| Atheist/Agnostic | 0 |
| No Religious Preference | 2 |

Table 1 (continued)
Demographic Characteristics

| | |
|--|----|
| Number of Times Attended a Religious Service in the Past 30 Days (n = 133) | % |
| None | 21 |
| One | 7 |
| Two | 8 |
| Three | 12 |
| Four | 11 |
| Five or More | 41 |
| How Religious (n = 134) | |
| Very Religious | 26 |
| Moderately Religious | 47 |
| Slightly Religious | 25 |
| Not at All Religious | 2 |
| Employment Status (n = 134) | |
| Work Full-time | 46 |
| Work Part-time | 15 |
| Retired | 9 |
| Homemaker | 2 |
| Self-employed | 2 |
| Student | 7 |
| Out of Work for Less than 1 Year | 5 |
| Out of Work for More than 1 Year | 2 |
| Unable to Work | 13 |
| Annual Gross Income (n = 124) | |
| Less than \$10,000 | 39 |
| \$10,000 to \$15,000 | 14 |
| \$15,000 to \$20,000 | 7 |
| \$20,000 to \$25,000 | 15 |
| \$25,000 to \$35,000 | 11 |
| \$35,000 to \$50,000 | 10 |
| \$50,000 to \$75,000 | 4 |
| \$75,000 or More | 1 |
| Marital Status (n = 132) | |
| Married | 24 |
| Divorced or Separated | 25 |
| Widowed | 7 |
| Living as Married | 5 |
| Single, Never Married | 39 |
| Number of Children Under 18 Living with You All or Most of the Past 12 Months (n = 131) | |
| None | 58 |
| One | 26 |
| Two | 9 |
| Three or More | 9 |

Note. Sum may appear to exceed 100% due to rounding.

Main Findings

Part 1: Current Health Status

Nearly 40% of the respondents rated their current level of physical health during the past 12 months as either *very good* (25%) or *excellent* (14%). Slightly less than one-third of the respondents rated their physical health as *fair* (23%) or *poor* (5%).

In contrast to physical health, 40% of the respondents rated their emotional health during that same 12 month period as either *fair* (29%) or *poor* (6%). Slightly more than one-fourth rated their emotional health as *very good* (16%) or *excellent* (10%).

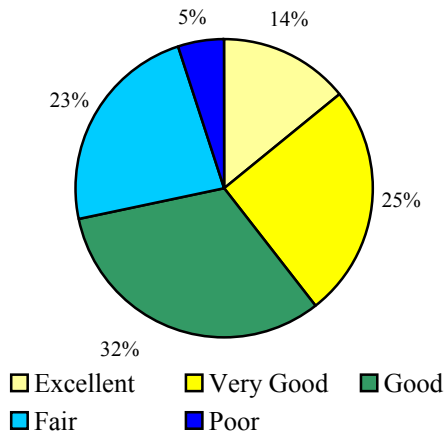


Figure 1. Physical Health.

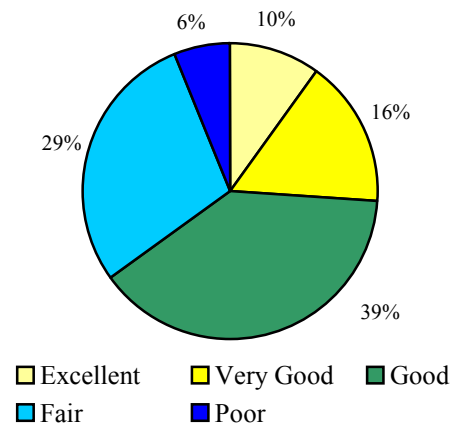


Figure 2. Emotional Health.

There were no statistically significant differences in the distribution of physical health ratings between men and women, but there was a gender difference with respect to emotional health as women tended to have more positive ratings.

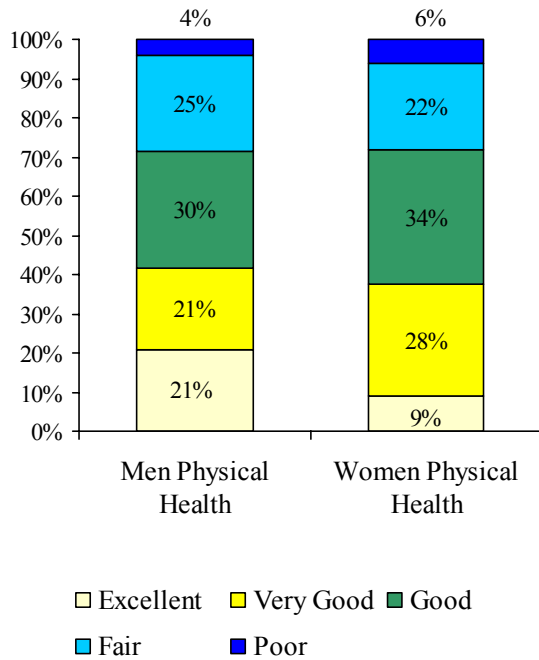


Figure 3. Physical Health by Gender.

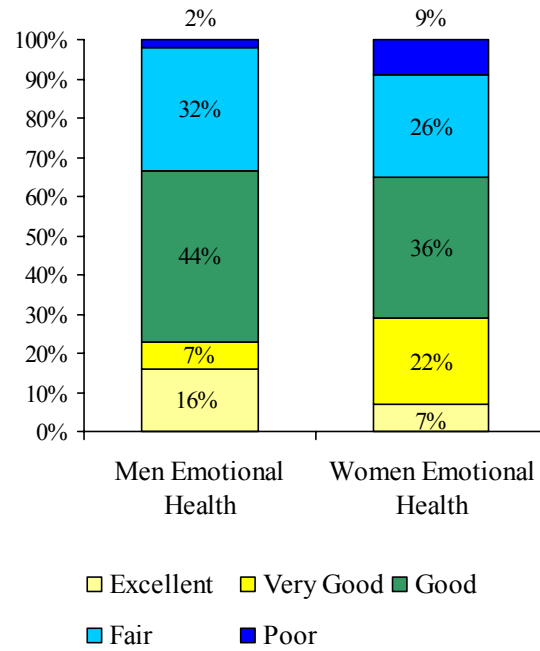


Figure 4. Emotional Health by Gender.

Ratings of physical health were positively associated with ratings of emotional health. About one-fifth of the respondents (18%) reported that both their physical and emotional health were *very good* or *excellent*; in contrast, 21% of the respondents reported that both their physical and emotional health were either *fair* or *poor*.

| | | Emotional Health | | | | |
|-----------------|-------------|------------------|-------------|--------|--------|--------|
| | | Excellent % | Very Good % | Good % | Fair % | Poor % |
| Physical Health | Excellent % | 7 | 1 | 4 | 2 | 0 |
| | Very Good % | 2 | 8 | 12 | 2 | 2 |
| | Good % | 2 | 7 | 16 | 8 | 0 |
| | Fair % | 0 | 1 | 5 | 15 | 2 |
| | Poor % | 0 | 0 | 1 | 2 | 2 |

Part 2: Information and Programming

Sources Used. Of the various informational sources about health issues that were assessed in this survey, the five most often consulted sources of information were medical providers (96%), friends/family (92%), brochures/pamphlets (90%), TV (88%), and newspaper/magazines (83%). Health-food store clerks (28%) were the only information source consulted by less than 50% of respondents.

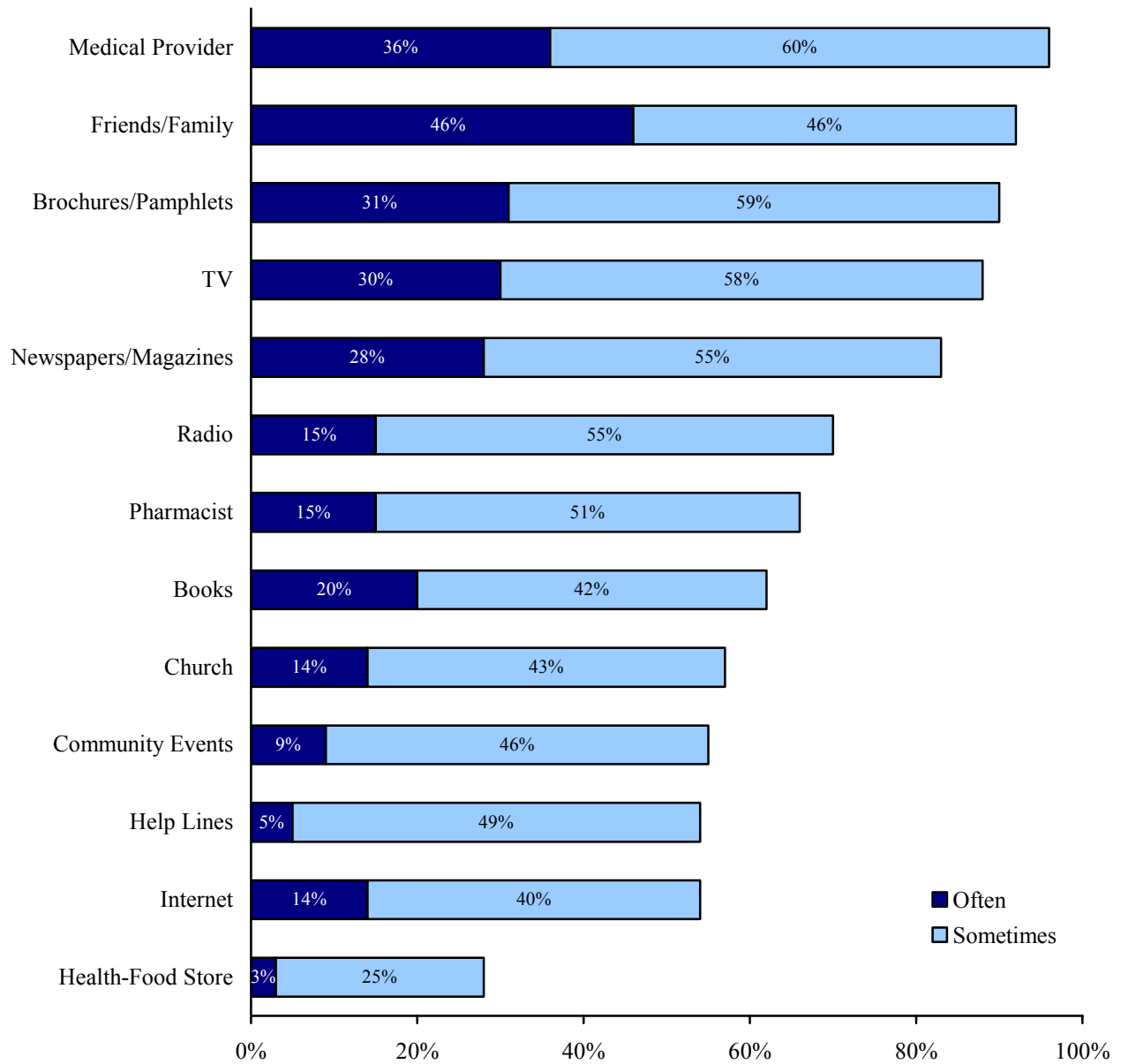


Figure 5. Sources of Information about health issues, illness, injuries, and disease prevention.

Appropriate Health Education Locations. All of the health topics listed in Table 3 were rated as appropriate to be discussed in each of the possible places assessed by at least 70% of the respondents. Respondents rated schools as the appropriate places for instruction regarding topics of nutrition (98%) and exercise (97%). General health education (97%), substance abuse treatment (94%), and topics of violence and aggression (92%) were rated to be appropriately taught in schools. Not surprisingly, medical clinics were highly rated as appropriate places for instruction in doctor-patient relations (90%), and churches were highly rated as appropriate places for healing and prayer services (96%).

Table 3
Appropriate Locations for Programming, Classes, or Instruction

| Where would it be appropriate to have programs, classes, or instruction on these topics? | Schools (For Youth) % | Community Centers/ Libraries/ Meeting Halls % | Churches/ Synagogues/ Mosques/ Place of Worship % | Neighbor- hood/ Home Meetings % | Clinics/ Hospitals % | Workplace % |
|---|--------------------------------------|--|--|--|-------------------------------------|------------------------|
| Nutrition | 98 | 90 | 86 | 78 | 93 | 86 |
| Exercise | 97 | 90 | 84 | 84 | 92 | 86 |
| Doctor-Patient Relations | 78 | 75 | 72 | 75 | 90 | 72 |
| Healing/Prayer Services | 75 | 72 | 96 | 80 | 79 | 72 |
| General Health Education | 97 | 90 | 84 | 84 | 92 | 86 |
| Substance Abuse | 94 | 92 | 89 | 90 | 93 | 90 |
| Violence/Aggression | 92 | 92 | 86 | 90 | 89 | 88 |
| Emotional Health | 94 | 93 | 93 | 90 | 96 | 92 |

Part 3:
Health Care Service Utilization

Insurance Coverage. During the past 12 months, 25% of the respondents were without health insurance and 29% were without prescription drug coverage for at least some period of time.

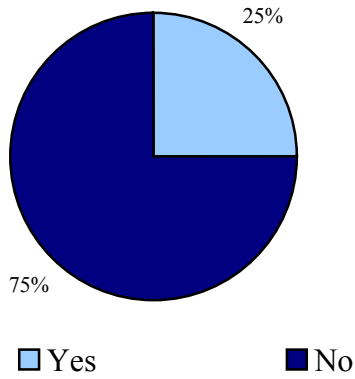


Figure 6. Without Health Insurance for Any Part of the Past 12 Months.

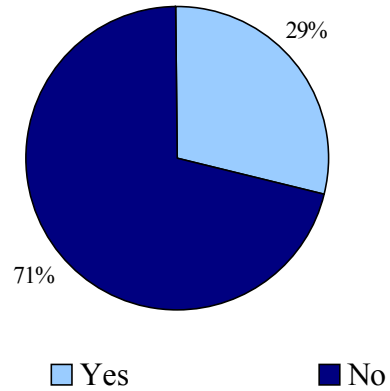


Figure 7. Without Prescription Drug Coverage for Any Part of the Past 12 Months.

Health Care Providers Recently Used. The respondents were asked to check the variety of health care providers that they may have personally used to deal with illness and stay healthy during the past 12 months. Medical doctor was the most often used health care provider (96%) followed by dentist (58%). Pastoral care (17%) was the third most reported type of contact for dealing with illness and staying healthy. In Figure 8, the providers followed by “(Other)” indicates that these were not categories included in the questionnaire but were provided by respondents specifying some “other health provider.”

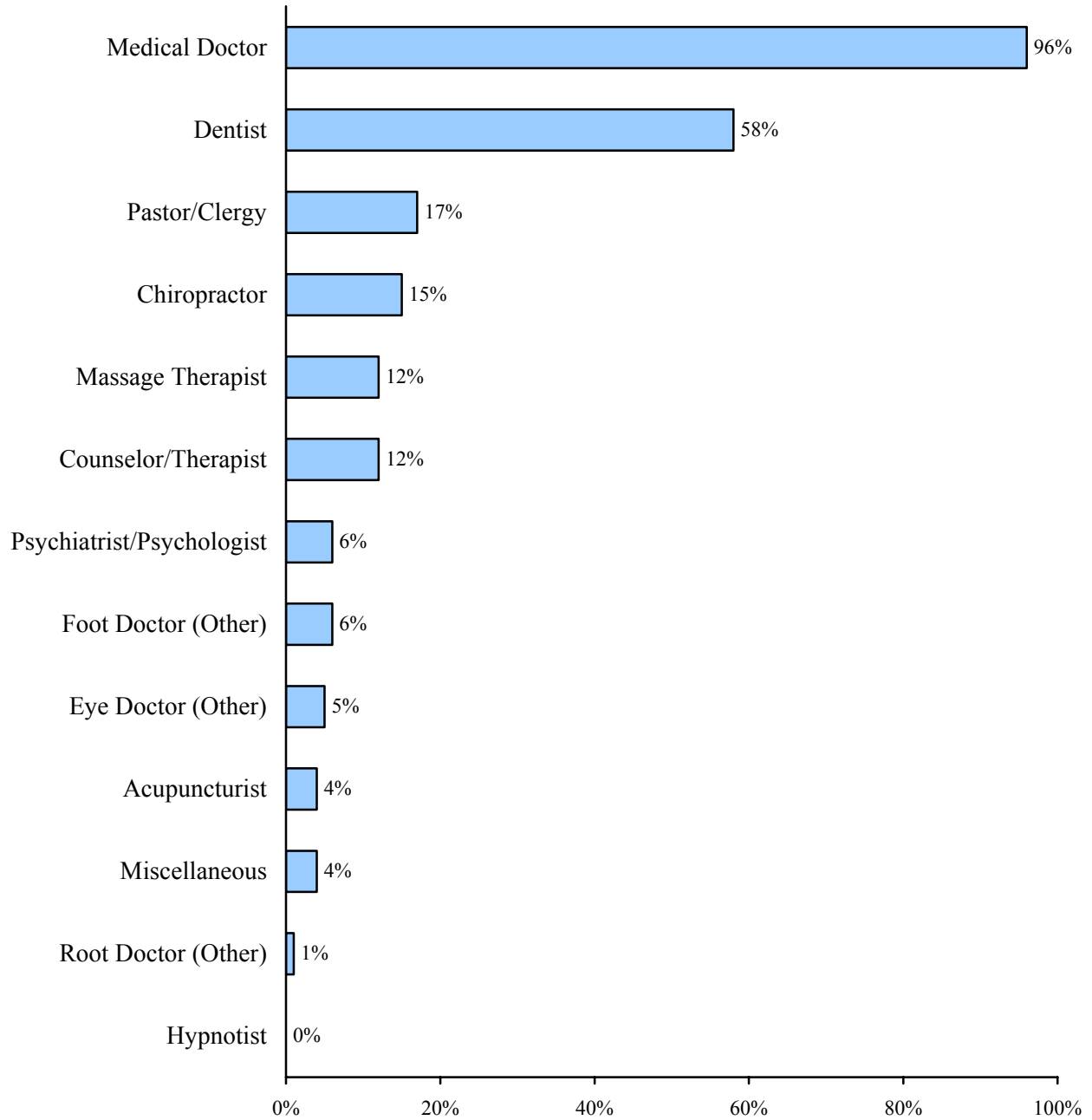


Figure 8. Use of Health Care Providers During the Past 12 Months.

Advice. The respondents were asked to think about times when they thought they might have a serious (but not life threatening) physical illness or injury such as persistent pain, cough, discomfort, fatigue, trouble sleeping, deep cut, or hard lump. They were then asked about the people or places they most often turn to for advice and treatment in these situations.

Physical health advice was most often sought from doctor's offices (87%), family members (84%), friends and neighbors (75%), and God (73%). Least often consulted for physical health advice were the Internet and self-help resources (26%) and religious authorities (26%).

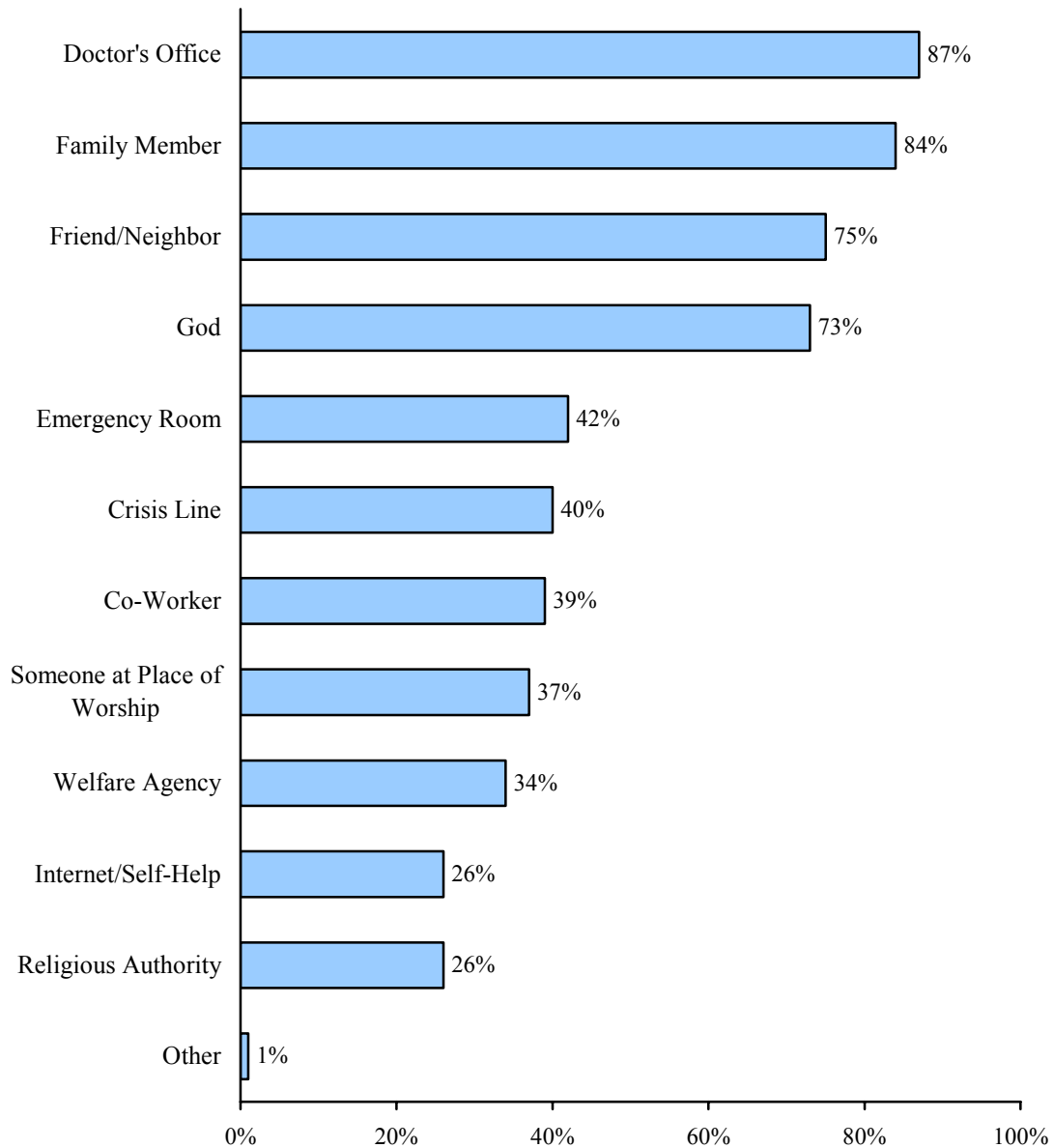


Figure 9. Serious Physical Illnesses and Injuries: Advice Seeking.

Treatment. In those situations where one thinks they might have a serious physical illness or injury, treatment was typically sought at the doctor's office (79%). About one-third of the respondents reported often relying on family members (37%) and emergency rooms (36%).

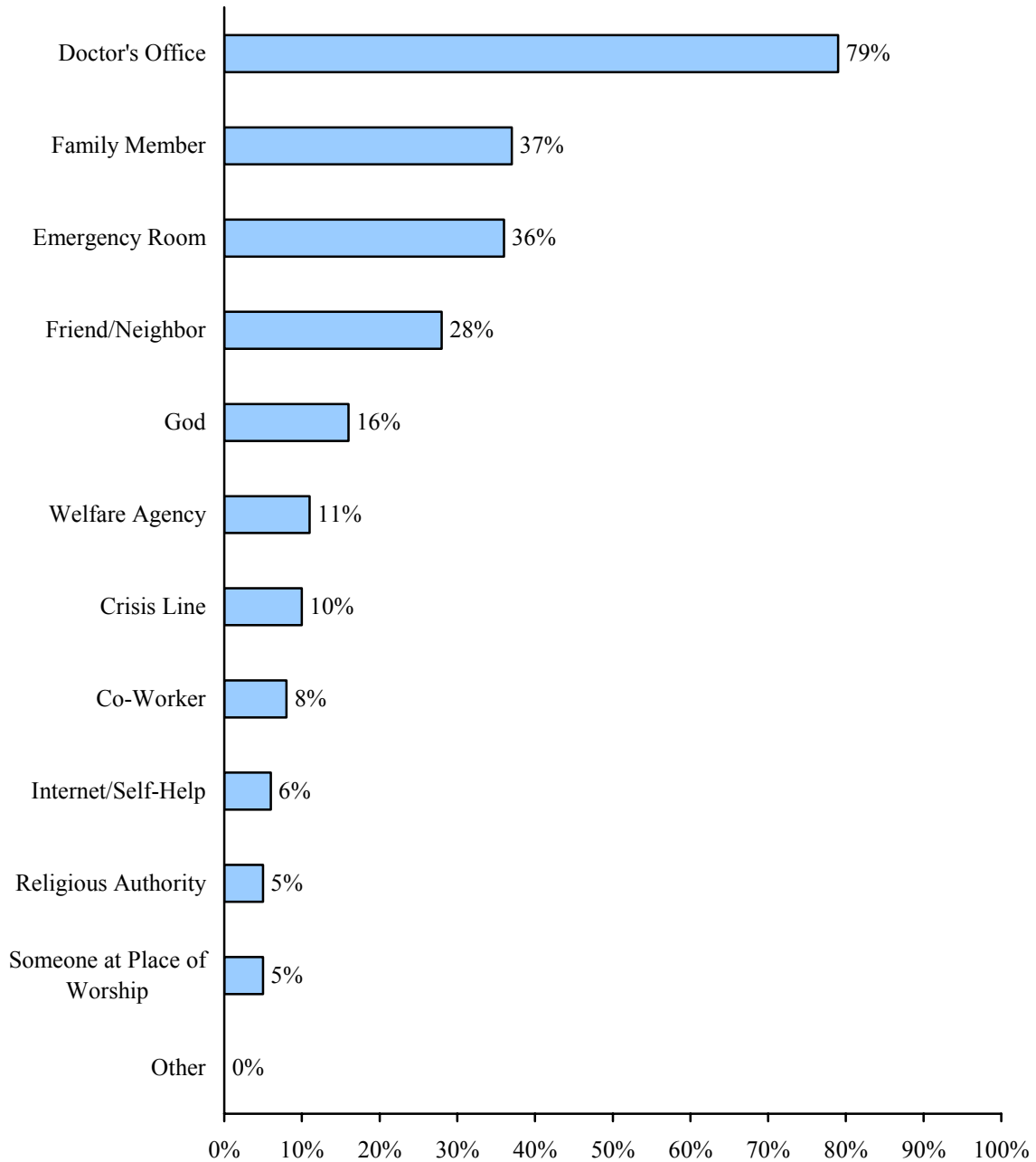


Figure 10. Serious Physical Illnesses and Injuries: Treatment.

Treatment Delay. Of those respondents who had ever experienced a serious physical illness or injury, 30% reported usually waiting one day or less before seeking medical attention. About one-third (34%) usually waited 2 or 3 days before seeking medical attention for a serious physical injury. A usual delay of a week or longer was reported by 24% of the respondents.

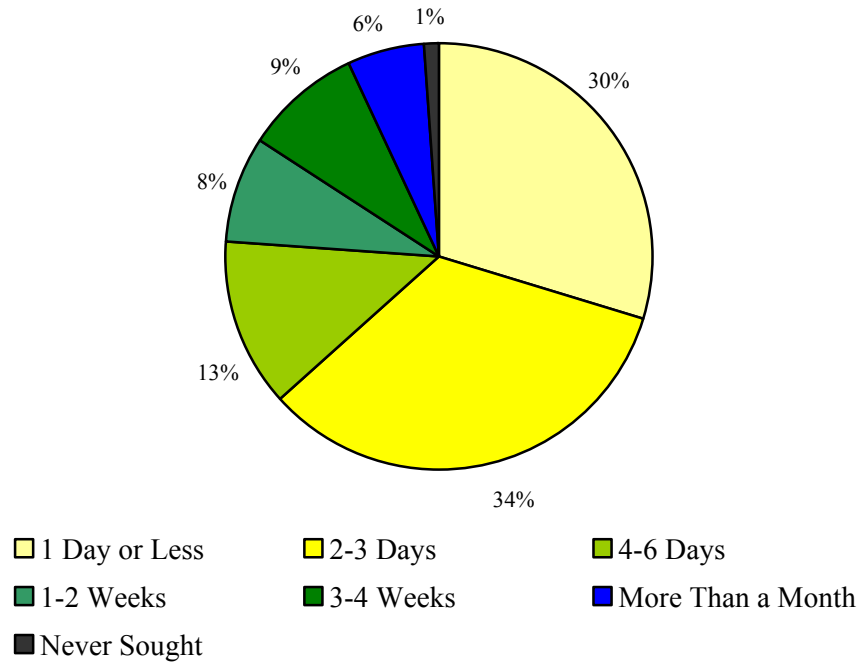


Figure 11. Serious Physical Illnesses and Injuries: Usual Treatment Delay.

Physical and Emotional Problems: Any. Respondents were asked which (if any) of 12 physical and emotional symptoms or problems they had experienced during the past 12 months. For each symptom or problem experience, respondents were asked who (if anyone) they went to for advice or treatment (see page 67 in Appendix A to see this questionnaire item). During the past 12 months, 80% of the respondents experienced at least one of these symptoms or problems and went to someone for advice or treatment. Only 12% of the respondents experienced one or more of these symptoms or problems but did not go to anyone for advice or treatment. The remaining 8% did not report experiencing any of these symptoms or problems.

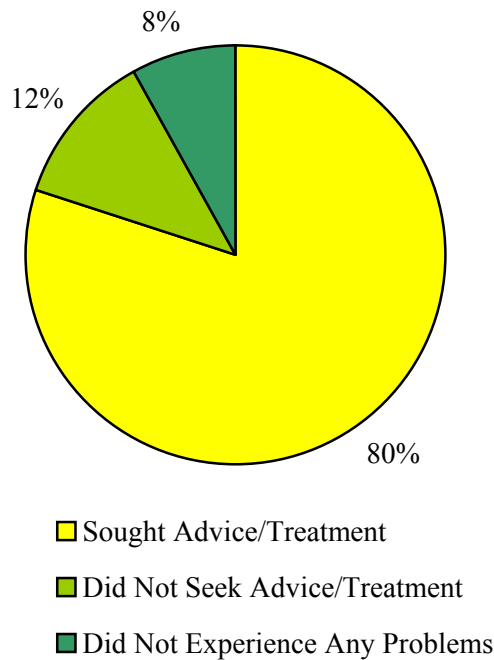


Figure 12. Respondents Experiencing Illness and Seeking Advice/Treatment During the Past 12 Months.

Physical and Emotional Problems: Specific. The most frequently reported symptom or problem was stress (81%). In addition, more than one-half of the respondents reported experiencing problems with over or under eating (56%), depression (54%), loneliness (53%), and anger/short temper (53%). The overall pattern was that women were more likely than men to report having experienced these types of problems. Specifically, women reported significantly higher occurrences than did men in the areas of stress, problem eating, trouble sleeping, and family problems.

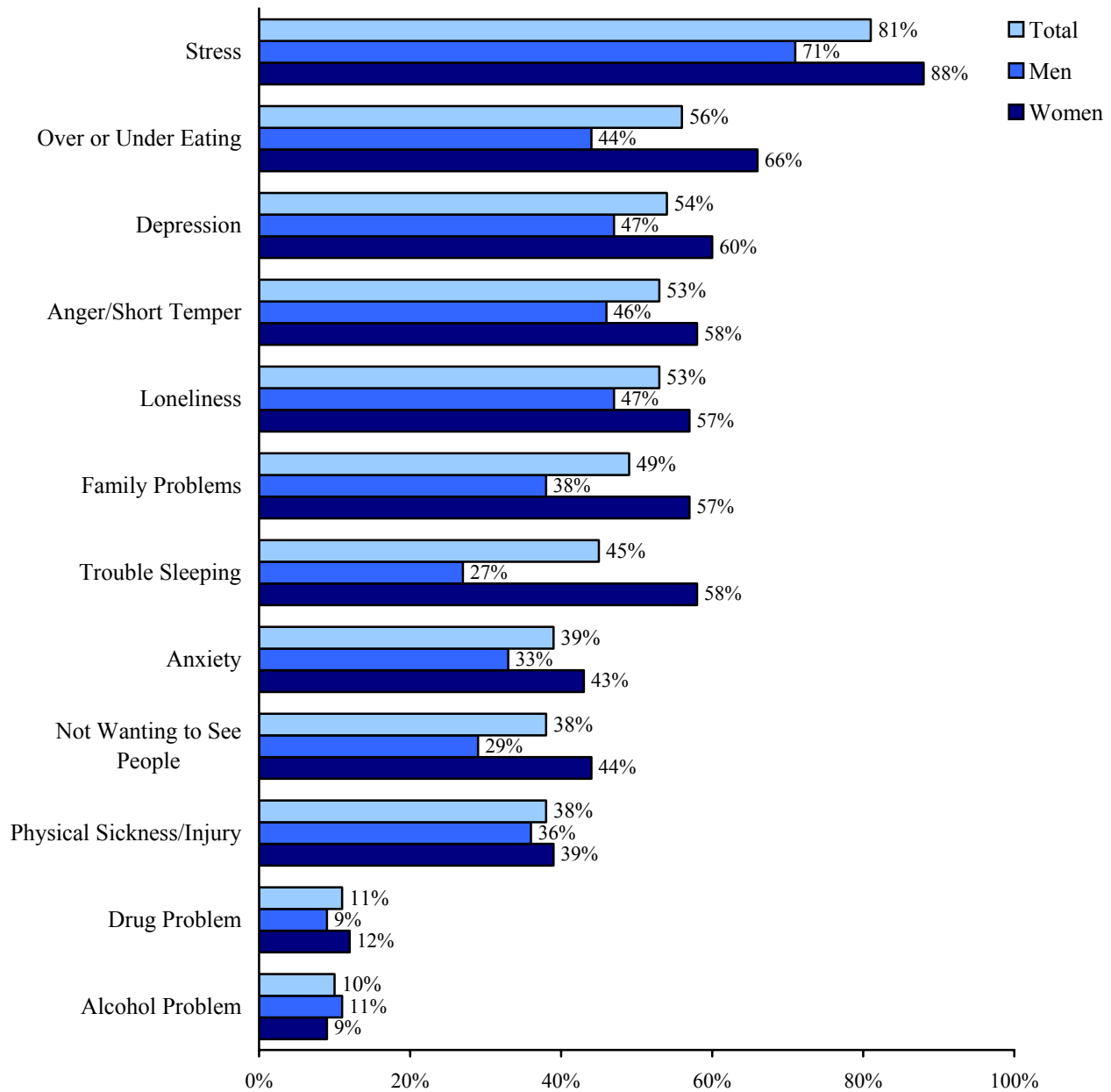


Figure 13. Respondents Experiencing Symptom or Problem During Past 12 Months.

Physical and Emotional Problems: Help Seeking Behavior. Of those who went to someone for advice or treatment for one of these 12 problems or symptoms, 95% sought advice or treatment from informal sources and 60% sought advice or treatment from formal sources. More than one-half of men (52%) and almost two-thirds of women (65%) who sought advice or treatment used a formal source. Although this difference appears large, there was no statistically significant difference between men and women in regard to what types of treatment they utilized.

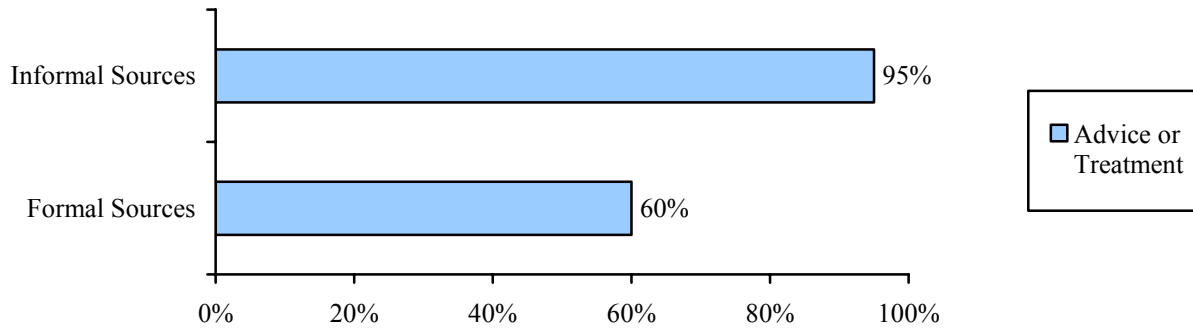


Figure 14. Formal versus Informal Help Seeking (Advice or Treatment).

| Table 4 Formal and Informal Advice and Treatment Seeking Behavior (% of Entire Sample) | | | | | | |
|---|--------------------------------|-------------------|-------------|---------------|---------------------|------------------------------------|
| | Experienced Symptom or Problem | Formal & Informal | Formal Only | Informal Only | Problem But No Help | Treatment Information Not Provided |
| Loneliness | 53 | 8 | 2 | 25 | 14 | 5 |
| Depression | 54 | 14 | 3 | 23 | 14 | 2 |
| Stress | 81 | 16 | 3 | 37 | 21 | 4 |
| Anxiety | 39 | 8 | 4 | 15 | 9 | 2 |
| Over/Under Eating | 56 | 10 | 2 | 13 | 28 | 3 |
| Trouble Sleeping | 45 | 8 | 9 | 13 | 14 | 1 |
| Anger/Short Temper | 53 | 1 | 2 | 17 | 28 | 5 |
| Alcohol Problem | 10 | 0 | 0 | 1 | 8 | 2 |
| Drug Problem | 11 | 0 | 1 | 3 | 7 | 0 |
| Not Wanting to See People | 38 | 0 | 1 | 14 | 17 | 6 |
| Family Problems | 49 | 2 | 1 | 38 | 5 | 4 |
| Physical Sickness/Injury | 38 | 21 | 11 | 2 | 2 | 2 |

Note. Due to rounding, row percentages for help seeking behaviors may appear to exceed the percentage who reported experiencing the problem or symptom.

Physical and Emotional Problems: Help Seeking Behavior by Gender. The help seeking behaviors of men and women are shown in Table 5 for each of the 12 physical and emotional symptoms or problems assessed in this study. The purpose of this table is to provide descriptive data organized by gender rather than to attempt to determine whether there were statistically significant differences in help seeking for specific problems based on gender.

| Table 5 Formal and Informal Advice and Treatment Seeking Behavior (% of Entire Sample) | | | | | | | | | | | | |
|---|--------------------------------|----|-------------------|----|-------------|----|---------------|----|---------------------|----|------------------------------------|---|
| | Experienced Symptom or Problem | | Formal & Informal | | Formal Only | | Informal Only | | Problem But No Help | | Treatment Information Not Provided | |
| | M | F | M | F | M | F | M | F | M | F | M | F |
| Loneliness | 47 | 57 | 4 | 10 | 0 | 3 | 22 | 27 | 18 | 10 | 4 | 6 |
| Depression | 47 | 60 | 9 | 17 | 2 | 4 | 24 | 22 | 11 | 16 | 2 | 1 |
| Stress | 71 | 88 | 9 | 22 | 2 | 4 | 34 | 38 | 22 | 20 | 4 | 4 |
| Anxiety | 33 | 43 | 0 | 13 | 2 | 6 | 20 | 12 | 11 | 8 | 0 | 4 |
| Over/Under Eating | 44 | 66 | 4 | 14 | 4 | 1 | 9 | 16 | 26 | 30 | 2 | 4 |
| Trouble Sleeping | 27 | 58 | 4 | 12 | 7 | 10 | 4 | 20 | 13 | 14 | 0 | 1 |
| Anger/Short Temper | 46 | 58 | 0 | 1 | 0 | 3 | 18 | 16 | 24 | 32 | 4 | 7 |
| Alcohol Problem | 11 | 9 | 0 | 0 | 0 | 0 | 0 | 1 | 9 | 7 | 2 | 1 |
| Drug Problem | 9 | 12 | 0 | 0 | 0 | 1 | 4 | 3 | 6 | 8 | 0 | 0 |
| Not Wanting to See People | 29 | 44 | 0 | 0 | 0 | 1 | 9 | 17 | 13 | 21 | 7 | 5 |
| Family Problems | 38 | 57 | 0 | 3 | 2 | 0 | 29 | 43 | 7 | 4 | 0 | 7 |
| Physical Sickness/Injury | 35 | 39 | 20 | 22 | 9 | 12 | 4 | 1 | 2 | 1 | 0 | 3 |

Note. Due to rounding, row percentages for help seeking behaviors may appear to exceed the percentage who reported experiencing the problem or symptom.

Physical and Emotional Problems: Sources of Help. Table 6 shows the number of respondents who reported experiencing each type of symptom or problem (e.g., 70 people reported experiencing loneliness), and this number is the denominator for the percentages reported. Friends/neighbors, parents, other relatives, and a doctor's office were commonly used sources of advice or treatment.

| Table 6 | | | | | | | | | | | | |
|---|-------------------|-------------------|----------------|----------------|-----------------------------|-------------------------|---------------------------|------------------------|---------------------|----------------------------------|------------------------|---------------------------------|
| Sources of Advice or Treatment: | | | | | | | | | | | | |
| Of Those Experiencing the Symptom or Problem (%) | | | | | | | | | | | | |
| | Loneliness (n=70) | Depression (n=72) | Stress (n=108) | Anxiety (n=51) | Over or Under Eating (n=74) | Trouble Sleeping (n=59) | Anger/Short Temper (n=69) | Alcohol Problem (n=13) | Drug Problem (n=14) | Not Wanting to See People (n=50) | Family Problems (n=64) | Physical Sickness/Injury (n=49) |
| Spouse | 3 | 7 | 15 | 6 | 4 | 9 | 8 | 9 | 14 | 10 | 24 | 6 |
| Parent | 13 | 16 | 19 | 12 | 6 | 9 | 8 | 0 | 0 | 7 | 41 | 13 |
| Other Relative | 22 | 23 | 26 | 12 | 11 | 14 | 3 | 0 | 0 | 7 | 59 | 8 |
| Friend or Neighbor | 41 | 40 | 42 | 25 | 17 | 17 | 5 | 0 | 7 | 12 | 37 | 15 |
| Someone at Work (e.g., Coworker, Supervisor, Employer) | 2 | 9 | 12 | 6 | 3 | 3 | 2 | 0 | 0 | 0 | 5 | 4 |
| Emergency Room | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 19 |
| Doctor's Office/Clinic | 14 | 26 | 19 | 23 | 23 | 40 | 3 | 0 | 0 | 0 | 0 | 85 |
| Ask-A-Nurse or a Crisis Line | 3 | 0 | 1 | 0 | 1 | 2 | 0 | 0 | 0 | 0 | 0 | 6 |
| Internet or Self-Help Materials | 2 | 1 | 5 | 4 | 0 | 2 | 0 | 0 | 0 | 0 | 2 | 4 |
| Mental Health Center/ Mental Health Institute in Independence | 5 | 6 | 2 | 6 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Psychiatrist/Psychologist | 2 | 3 | 4 | 6 | 0 | 2 | 2 | 0 | 0 | 0 | 2 | 0 |
| Social Services/ Welfare Agency | 2 | 3 | 3 | 0 | 0 | 2 | 0 | 0 | 7 | 0 | 3 | 4 |
| Religious Authority (Pastor, Priest, Rabbi, Imam, etc.) | 5 | 4 | 7 | 6 | 3 | 3 | 3 | 9 | 7 | 2 | 10 | 8 |
| Person Who Attends Your Place of Worship (e.g., Church) | 5 | 1 | 5 | 2 | 0 | 0 | 2 | 9 | 7 | 0 | 3 | 2 |
| God (Prayer) | 49 | 46 | 48 | 46 | 26 | 24 | 27 | 9 | 21 | 21 | 42 | 55 |
| Somebody or Someplace Else (e.g., Pastor's Wife, AA Group). | 5 | 3 | 3 | 2 | 1 | 0 | 2 | 0 | 0 | 2 | 3 | 2 |

Table 7 shows the number of respondents who reported seeking advice or treatment for each type of symptom or problem (e.g., 45 people reported experiencing loneliness and sought help from at least one source), and this number is the denominator for the percentages reported. For example, of the 51 respondents who reported experiencing depression in the past 12 months and who sought advice or treatment, 35% went to a doctor’s office or a clinic for advice or treatment.

| Table 7 Sources of Advice or Treatment: Of Those Who Sought Help (%) | | | | | | | | | | | | |
|---|-------------------|-------------------|---------------|----------------|-----------------------------|-------------------------|---------------------------|-----------------------|--------------------|----------------------------------|------------------------|----------------------------------|
| | Loneliness (n=45) | Depression (n=51) | Stress (n=75) | Anxiety (n=36) | Over or Under Eating (n=33) | Trouble Sleeping (n=40) | Anger/Short Temper (n=24) | Alcohol Problem (n=1) | Drug Problem (n=4) | Not Wanting to See People (n=19) | Family Problems (n=52) | Physical Sickness/ Injury (n=45) |
| Spouse | 4 | 10 | 20 | 8 | 9 | 12 | 21 | 0 | 50 | 21 | 27 | 7 |
| Parent | 18 | 22 | 27 | 17 | 12 | 12 | 21 | 0 | 0 | 16 | 46 | 13 |
| Other Relative | 31 | 31 | 36 | 17 | 24 | 20 | 8 | 0 | 0 | 16 | 67 | 9 |
| Friend or Neighbor | 58 | 55 | 57 | 33 | 36 | 25 | 12 | 0 | 25 | 26 | 42 | 16 |
| Someone at Work (e.g., Coworker, Supervisor, Employer) | 2 | 12 | 16 | 8 | 6 | 5 | 4 | 0 | 0 | 0 | 6 | 4 |
| Emergency Room | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 20 |
| Doctor’s Office/Clinic | 20 | 35 | 27 | 31 | 48 | 58 | 4 | 0 | 0 | 0 | 0 | 89 |
| Ask-A-Nurse or a Crisis Line | 4 | 0 | 1 | 0 | 3 | 2 | 0 | 0 | 0 | 0 | 0 | 7 |
| Internet or Self-Help Materials | 2 | 2 | 7 | 6 | 0 | 2 | 0 | 0 | 0 | 0 | 2 | 4 |
| Mental Health Center/ Mental Health Institute in Independence | 7 | 8 | 3 | 8 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Psychiatrist/Psychologist | 2 | 4 | 5 | 8 | 0 | 2 | 4 | 0 | 0 | 0 | 2 | 0 |
| Social Services/ Welfare Agency | 2 | 4 | 4 | 0 | 0 | 2 | 0 | 0 | 25 | 0 | 4 | 4 |
| Religious Authority (Pastor, Priest, Rabbi, Imam, etc.) | 7 | 6 | 9 | 8 | 6 | 5 | 8 | 0 | 25 | 5 | 12 | 9 |
| Person Who Attends Your Place of Worship (e.g., Church) | 7 | 2 | 7 | 3 | 0 | 0 | 4 | 0 | 25 | 0 | 4 | 2 |
| God (Prayer) | 69 | 61 | 65 | 61 | 54 | 35 | 71 | 0 | 50 | 47 | 48 | 59 |
| Somebody or Someplace Else (e.g., Pastor’s Wife, AA Group). | 7 | 4 | 4 | 3 | 3 | 0 | 4 | 0 | 0 | 5 | 4 | 2 |

Part 4: ***Lifestyle Factors***

Positive Health-Promoting Behaviors: Overview. The respondents completed the Health Promoting Lifestyle Profile II (Walker, Sechrist, & Pender, 1987) which assessed the frequency of 52 health promoting behaviors. This profile was used to assess positive health-related behaviors in the areas of health responsibility, physical activity, nutrition, spiritual growth, interpersonal relations, and stress management. Participants rated the frequency in which they engaged in each behavior from *never* to *routinely*. The mean and distribution of these individual behaviors are shown in Tables 8 – 13 and composite scores for the six dimensions are shown in Figure 15.

Positive Health-Promoting Behaviors: Other Studies. Previous studies evaluating the health-promoting behaviors of African Americans (e.g., Brady & Nies, 1999 and Frank, Stephens, & Lee, 1998) used an older version of the Health-Promoting Lifestyles Profile (HPLP) that is not directly comparable to the current and revised version of the scale (i.e., HPLP-II which was used in the present study). In terms of findings with the HPLP-II, there are a few comparison studies. For instance, among older rural women the subscale means for Nutrition and Stress Management exceeded 3.0 (Pullen, Walker, & Finadt, 2001). Also, Felton, Parsons, and Hassell (1998) reported HPLP-II subscale mean scores among rural adolescents and young women as follows: Nutrition (2.1), Physical Activity (2.1), Health Responsibility (2.0), Stress Management (2.4), Interpersonal Relations (2.9), and Spiritual Growth (3.0). Salyer, Sneed, and Corley (2001) found subscale scores ranged from 2.3 (Physical Activity) to 3.0 (Spiritual Growth) among a sample of cardiac transplant patients.

Positive Health-Promoting Behaviors: Composites. The scores for items within each category were averaged to allow for relative comparisons to be made between scales comprised of different numbers of items. Spiritual growth had the highest average composite ($M = 3.0$) and the physical activity had the lowest average composite ($M = 1.9$). Men had significantly higher scores than did women in the areas of stress management and physical activity.

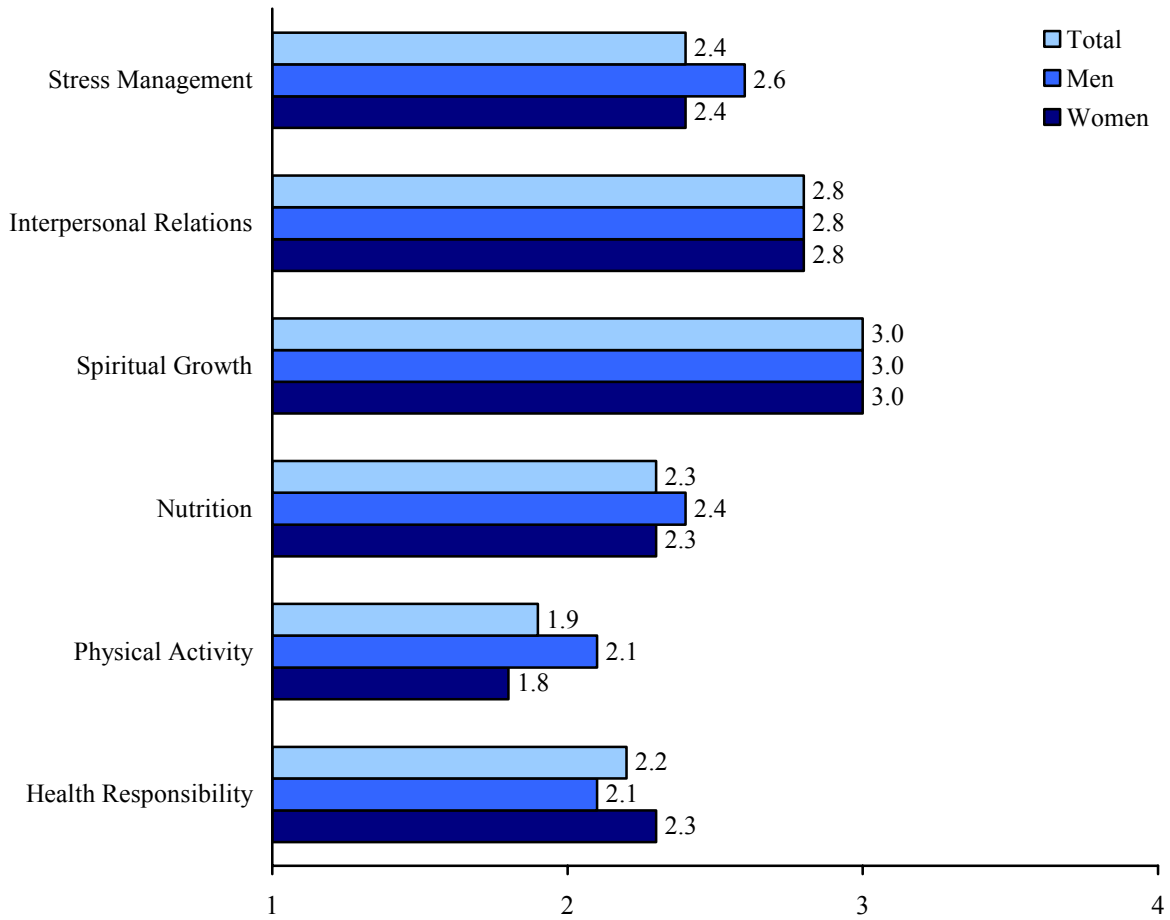


Figure 15. Health Promoting Lifestyle Subscale (Means).

Positive Health-Promoting Behaviors: Health Responsibility. None of the health responsibility behaviors were reported to be occurring *routinely* by more than one-fourth of the respondents. The two most routine behaviors were inspecting one's body at least monthly for changes or danger signs (23%) and questioning health professional about instructions (20%). Importantly, 48% of respondents reported that they *never* attend educational programs on personal health care, and 38% *never* seek guidance or counseling.

| Table 8 | | | | | |
|--|-------------|------------------|----------------------|------------------|----------------------|
| Health Responsibility | | | | | |
| | Mean | Never (1) | Sometimes (2) | Often (3) | Routinely (4) |
| | | % | % | % | % |
| Report any unusual signs or symptoms to a physician or other health professional* | | | | | |
| Entire Sample | 2.4 | 11 | 47 | 29 | 12 |
| Men | 2.2 | 25 | 41 | 25 | 9 |
| Women | 2.6 | 1 | 52 | 32 | 14 |
| Read or watch TV programs about improving health | | | | | |
| Entire Sample | 2.4 | 11 | 49 | 31 | 9 |
| Men | 2.4 | 14 | 40 | 38 | 9 |
| Women | 2.4 | 9 | 56 | 26 | 9 |
| Question health professionals in order to understand their instructions | | | | | |
| Entire Sample | 2.5 | 11 | 48 | 22 | 20 |
| Men | 2.4 | 15 | 50 | 17 | 17 |
| Women | 2.6 | 8 | 46 | 25 | 21 |
| Get a second opinion when I question my health care provider's advice | | | | | |
| Entire Sample | 2.1 | 21 | 54 | 14 | 10 |
| Men | 2.0 | 30 | 43 | 18 | 9 |
| Women | 2.2 | 14 | 62 | 12 | 12 |
| Discuss my health concerns with health professionals | | | | | |
| Entire Sample | 2.5 | 8 | 53 | 25 | 14 |
| Men | 2.3 | 16 | 44 | 31 | 9 |
| Women | 2.6 | 1 | 59 | 21 | 18 |
| Inspect my body at least monthly for physical changes/danger signs | | | | | |
| Entire Sample | 2.7 | 8 | 40 | 29 | 23 |
| Men | 2.6 | 15 | 30 | 32 | 24 |
| Women | 2.7 | 4 | 47 | 27 | 22 |
| Ask for information from health professionals about how to take good care of myself | | | | | |
| Entire Sample | 2.2 | 22 | 51 | 17 | 11 |
| Men | 2.0 | 33 | 42 | 20 | 6 |
| Women | 2.3 | 14 | 57 | 14 | 14 |
| Attend educational programs on personal health care | | | | | |
| Entire Sample | 1.7 | 48 | 37 | 11 | 3 |
| Men | 1.6 | 56 | 31 | 11 | 2 |
| Women | 1.8 | 43 | 42 | 12 | 4 |
| Seek guidance or counseling when necessary | | | | | |
| Entire Sample | 1.9 | 38 | 42 | 17 | 4 |
| Men | 1.8 | 38 | 46 | 16 | 0 |
| Women | 1.9 | 38 | 39 | 17 | 6 |

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Positive Health-Promoting Behaviors: Physical Activity. Among the respondents, only 7% reported *routinely* following a planned exercise program and just 10% reported *routinely* taking part in light to moderate physical activity 30-40 minutes 5 or more times a week. The majority of respondents reported that they *never* check their pulse (70%) or reach their target heart rate (52%) when exercising.

| Table 9 | | | | | |
|--|------|----------------|--------------------|----------------|--------------------|
| Physical Activity | | | | | |
| | Mean | Never (1) % | Sometimes (2) % | Often (3) % | Routinely (4) % |
| Follow a planned exercise program | | | | | |
| Entire Sample | 1.9 | 38 | 40 | 15 | 7 |
| Men | 2.0 | 41 | 29 | 18 | 12 |
| Women | 1.8 | 36 | 48 | 13 | 3 |
| Exercise vigorously for 20 or more minutes at least three times a week (such as brisk walking, bicycling, aerobic dancing, using a stair climber) | | | | | |
| Entire Sample | 2.0 | 32 | 44 | 12 | 12 |
| Men | 2.2 | 32 | 36 | 16 | 16 |
| Women | 2.0 | 32 | 50 | 9 | 9 |
| Take part in light to moderate physical activity (such as sustained walking 30-40 minutes 5 or more times a week)* | | | | | |
| Entire Sample | 1.8 | 50 | 30 | 9 | 10 |
| Men | 2.1 | 41 | 27 | 14 | 18 |
| Women | 1.6 | 57 | 32 | 5 | 5 |
| Take part in leisure-time (recreational) physical activities (such as swimming, dancing, bicycling) | | | | | |
| Entire Sample | 2.2 | 28 | 34 | 24 | 14 |
| Men | 2.4 | 27 | 27 | 23 | 23 |
| Women | 2.1 | 29 | 39 | 25 | 8 |
| Do stretching exercises at least 3 times per week* | | | | | |
| Entire Sample | 2.1 | 30 | 45 | 12 | 14 |
| Men | 2.3 | 26 | 37 | 15 | 22 |
| Women | 2.0 | 32 | 51 | 9 | 8 |
| Get exercise during usual daily activities (such as walking during lunch, using stairs instead of elevators, parking car away from destination and walking) | | | | | |
| Entire Sample | 2.4 | 20 | 36 | 30 | 14 |
| Men | 2.5 | 20 | 27 | 33 | 20 |
| Women | 2.3 | 21 | 42 | 29 | 9 |
| Check my pulse rate when exercising | | | | | |
| Entire Sample | 1.4 | 70 | 23 | 4 | 3 |
| Men | 1.4 | 71 | 22 | 4 | 4 |
| Women | 1.4 | 69 | 23 | 5 | 3 |
| Reach my target heart rate when exercising | | | | | |
| Entire Sample | 1.7 | 52 | 33 | 8 | 6 |
| Men | 1.8 | 52 | 30 | 9 | 9 |
| Women | 1.6 | 53 | 36 | 8 | 4 |

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Positive Health-Promoting Behaviors: Nutrition. Over 60% of respondents either *sometimes* or *often* engage in many of these positive nutrition behaviors. Only 7% *routinely* choose a diet low in fat and cholesterol, whereas 27% report *never* doing so and 30% *never* limit use of sugars and sweets. About one-fourth (24%) of the respondents reported that they *never* read labels for packaged food.

| Table 10 Nutrition | | | | | |
|---|-------------|------------------------|----------------------------|------------------------|----------------------------|
| | Mean | Never (1) % | Sometimes (2) % | Often (3) % | Routinely (4) % |
| Choose a diet low in fat, saturated fat, and cholesterol | | | | | |
| Entire Sample | 2.1 | 27 | 44 | 22 | 7 |
| Men | 2.0 | 39 | 29 | 23 | 9 |
| Women | 2.1 | 18 | 55 | 22 | 5 |
| Limit use of sugars and food containing sugar (sweets) | | | | | |
| Entire Sample | 2.0 | 30 | 46 | 17 | 8 |
| Men | 2.1 | 30 | 41 | 20 | 9 |
| Women | 2.0 | 29 | 49 | 16 | 7 |
| Eat 6-11 servings of bread, cereal, rice, and pasta each day | | | | | |
| Entire Sample | 2.2 | 24 | 47 | 19 | 10 |
| Men | 2.2 | 30 | 37 | 20 | 13 |
| Women | 2.1 | 20 | 55 | 17 | 8 |
| Eat 2-4 servings of fruit each day | | | | | |
| Entire Sample | 2.4 | 13 | 44 | 31 | 12 |
| Men | 2.4 | 16 | 33 | 42 | 9 |
| Women | 2.4 | 10 | 52 | 23 | 14 |
| Eat 3-5 servings of vegetables each day | | | | | |
| Entire Sample | 2.4 | 18 | 41 | 25 | 16 |
| Men | 2.4 | 22 | 33 | 26 | 18 |
| Women | 2.4 | 14 | 47 | 25 | 14 |
| Eat 2-3 servings of milk, yogurt or cheese each day | | | | | |
| Entire Sample | 2.3 | 20 | 42 | 26 | 12 |
| Men | 2.3 | 27 | 29 | 29 | 14 |
| Women | 2.3 | 14 | 51 | 25 | 10 |
| Eat only 2-3 servings from the meat, poultry, fish, dried beans, eggs, and nuts group each day* | | | | | |
| Entire Sample | 2.8 | 8 | 30 | 38 | 24 |
| Men | 3.0 | 7 | 20 | 40 | 33 |
| Women | 2.7 | 8 | 37 | 37 | 18 |
| Read labels to identify nutrients, fats, and sodium content in packaged food | | | | | |
| Entire Sample | 2.2 | 24 | 44 | 18 | 14 |
| Men | 2.2 | 27 | 38 | 22 | 13 |
| Women | 2.2 | 21 | 49 | 16 | 14 |
| Eat breakfast | | | | | |
| Entire Sample | 2.4 | 13 | 51 | 19 | 17 |
| Men | 2.5 | 9 | 51 | 22 | 18 |
| Women | 2.3 | 16 | 51 | 17 | 16 |

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Positive Health-Promoting Behaviors: Spiritual Growth. All of the spiritual growth items were reported by the majority of respondents as either *often* or *routinely* describing their life experiences. Importantly, almost one-fifth of the respondents indicated that they *never* (4%) or only *sometimes* (14%) believe that their life has purpose.

| Table 11 | | | | | |
|--|-------------|------------------|----------------------|------------------|----------------------|
| Spiritual Growth | | | | | |
| | Mean | Never (1) | Sometimes (2) | Often (3) | Routinely (4) |
| | | % | % | % | % |
| Feel I am growing and changing in positive ways | | | | | |
| Entire Sample | 2.8 | 4 | 31 | 48 | 17 |
| Men | 2.8 | 5 | 27 | 47 | 21 |
| Women | 2.8 | 3 | 34 | 49 | 14 |
| Believe that my life has purpose | | | | | |
| Entire Sample | 3.1 | 4 | 14 | 44 | 37 |
| Men | 3.0 | 7 | 14 | 45 | 34 |
| Women | 3.2 | 3 | 14 | 43 | 40 |
| Look forward to the future | | | | | |
| Entire Sample | 3.2 | 1 | 22 | 39 | 39 |
| Men | 3.1 | 2 | 23 | 41 | 34 |
| Women | 3.2 | 0 | 21 | 37 | 42 |
| Feel content and at peace with myself | | | | | |
| Entire Sample | 2.8 | 4 | 34 | 38 | 24 |
| Men | 2.9 | 4 | 27 | 44 | 26 |
| Women | 2.8 | 4 | 38 | 34 | 24 |
| Work toward long-term goals in my life | | | | | |
| Entire Sample | 2.9 | 6 | 30 | 33 | 31 |
| Men | 3.0 | 6 | 18 | 42 | 34 |
| Women | 2.8 | 6 | 39 | 26 | 29 |
| Find each day interesting and challenging | | | | | |
| Entire Sample | 2.8 | 5 | 34 | 41 | 20 |
| Men | 2.8 | 9 | 24 | 44 | 24 |
| Women | 2.7 | 3 | 42 | 39 | 17 |
| Am aware of what is important to me in life | | | | | |
| Entire Sample | 3.1 | 3 | 18 | 40 | 38 |
| Men | 3.1 | 4 | 19 | 38 | 40 |
| Women | 3.1 | 3 | 18 | 42 | 38 |
| Feel connected with some force greater than myself | | | | | |
| Entire Sample | 3.3 | 2 | 16 | 32 | 49 |
| Men | 3.2 | 2 | 23 | 28 | 47 |
| Women | 3.3 | 3 | 12 | 35 | 51 |
| Expose myself to new experiences and challenges | | | | | |
| Entire Sample | 2.8 | 5 | 38 | 33 | 25 |
| Men | 2.8 | 11 | 24 | 39 | 26 |
| Women | 2.8 | 0 | 48 | 28 | 24 |

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Positive Health-Promoting Behaviors: Interpersonal Relationships. Among respondents, only 9% reported routinely discussing their problems and concerns with people close to them. Yet, around two-thirds reported that they either *often* or *routinely* spend time with close friends (63%) or get support from a network of caring people (68%).

| Table 12 | | | | | |
|---|-------------|------------------|----------------------|------------------|----------------------|
| Interpersonal Relationships | | | | | |
| | Mean | Never (1) | Sometimes (2) | Often (3) | Routinely (4) |
| | | % | % | % | % |
| Discuss my problems and concerns with people close to me | | | | | |
| Entire Sample | 2.5 | 5 | 47 | 39 | 9 |
| Men | 2.5 | 9 | 46 | 30 | 14 |
| Women | 2.5 | 3 | 47 | 45 | 5 |
| Praise other people easily for their achievements | | | | | |
| Entire Sample | 2.9 | 3 | 30 | 44 | 23 |
| Men | 2.9 | 7 | 25 | 41 | 27 |
| Women | 2.9 | 0 | 34 | 46 | 21 |
| Maintain meaningful and fulfilling relationships with others | | | | | |
| Entire Sample | 3.0 | 2 | 24 | 43 | 31 |
| Men | 3.1 | 5 | 20 | 36 | 39 |
| Women | 3.0 | 0 | 26 | 49 | 25 |
| Spend time with close friends | | | | | |
| Entire Sample | 2.9 | 4 | 33 | 34 | 29 |
| Men | 2.9 | 4 | 32 | 32 | 32 |
| Women | 2.8 | 4 | 33 | 36 | 27 |
| Find it easy to show concern, love and warmth to others | | | | | |
| Entire Sample | 3.0 | 2 | 30 | 32 | 35 |
| Men | 3.0 | 6 | 26 | 36 | 33 |
| Women | 3.0 | 0 | 34 | 29 | 37 |
| Touch and am touched by people I care about | | | | | |
| Entire Sample | 3.1 | 2 | 23 | 42 | 33 |
| Men | 3.2 | 4 | 14 | 46 | 36 |
| Women | 3.0 | 0 | 29 | 40 | 31 |
| Find ways to meet my needs for intimacy* | | | | | |
| Entire Sample | 2.5 | 13 | 40 | 31 | 17 |
| Men | 2.7 | 6 | 38 | 36 | 21 |
| Women | 2.4 | 18 | 41 | 27 | 14 |
| Get support from a network of caring people | | | | | |
| Entire Sample | 2.8 | 6 | 27 | 44 | 24 |
| Men | 2.8 | 9 | 24 | 44 | 22 |
| Women | 2.9 | 4 | 29 | 43 | 25 |
| Settle conflicts with others through discussion and compromise | | | | | |
| Entire Sample | 2.8 | 3 | 39 | 33 | 25 |
| Men | 2.7 | 6 | 42 | 32 | 21 |
| Women | 2.9 | 1 | 38 | 34 | 27 |

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Positive Health-Promoting Behaviors: Stress Management. Only 14% of the respondents reported that they *routinely* get enough sleep, only 10% *routinely* balance time between work and play, and only 8% *routinely* pace themselves to prevent tiredness. In comparison, 13% reported that they *never* get enough sleep, 13% *never* balance time between work and play, and 24% *never* pace themselves to prevent tiredness. More than 70% reported that they *often* (48%) or *routinely* (23%) accept those things in their lives that they cannot change.

| Table 13 | | | | | |
|---|-------------|------------------------|----------------------------|------------------------|----------------------------|
| Stress Management | | | | | |
| | Mean | Never (1) % | Sometimes (2) % | Often (3) % | Routinely (4) % |
| Get enough sleep | | | | | |
| Entire Sample | 2.4 | 13 | 44 | 29 | 14 |
| Men | 2.6 | 11 | 43 | 23 | 23 |
| Women | 2.3 | 14 | 46 | 32 | 8 |
| Take some time for relaxation each day* | | | | | |
| Entire Sample | 2.6 | 8 | 47 | 25 | 20 |
| Men | 2.8 | 5 | 36 | 34 | 25 |
| Women | 2.4 | 10 | 54 | 18 | 17 |
| Accept those things in my life which I cannot change | | | | | |
| Entire Sample | 2.9 | 2 | 27 | 48 | 23 |
| Men | 3.0 | 2 | 25 | 43 | 30 |
| Women | 2.9 | 1 | 29 | 52 | 18 |
| Concentrate on pleasant thoughts at bedtime | | | | | |
| Entire Sample | 2.7 | 4 | 39 | 41 | 15 |
| Men | 2.7 | 5 | 34 | 43 | 18 |
| Women | 2.6 | 4 | 43 | 40 | 13 |
| Use specific methods to control my stress* | | | | | |
| Entire Sample | 2.4 | 14 | 45 | 33 | 8 |
| Men | 2.6 | 14 | 27 | 46 | 13 |
| Women | 2.2 | 14 | 57 | 23 | 5 |
| Balance time between work and play* | | | | | |
| Entire Sample | 2.5 | 13 | 36 | 41 | 10 |
| Men | 2.7 | 7 | 27 | 51 | 14 |
| Women | 2.3 | 17 | 43 | 34 | 6 |
| Practice relaxation or meditation for 15-20 minutes daily | | | | | |
| Entire Sample | 2.1 | 30 | 40 | 23 | 8 |
| Men | 2.1 | 26 | 42 | 29 | 4 |
| Women | 2.1 | 32 | 39 | 18 | 10 |
| Pace myself to prevent tiredness | | | | | |
| Entire Sample | 2.1 | 24 | 47 | 21 | 8 |
| Men | 2.3 | 20 | 42 | 29 | 9 |
| Women | 2.0 | 28 | 50 | 14 | 8 |

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Meal Preparation. One-third of the respondents said that they *often* (21%) or *routinely* (12%) eat meals prepared in the home that are generally nutritious, low in fat, and healthy. However, about one-half of the respondents reported that they either *often* (35%) or *routinely* (16%) eat meals prepared at home that include fried foods, and an even greater percentage reported that they *often* (50%) or *routinely* (8%) eat out at fast-food or pizza places. (These questions are not part of the HPLP-II, but were included in the survey using the same response format).

| Table 14 | | | | | |
|--|-------------|-----------------------|---------------------------|-----------------------|---------------------------|
| Meal Preparation | | | | | |
| | Mean | Never (1) % | Sometimes (2) % | Often (3) % | Routinely (4) % |
| Meals prepared in the home generally are nutritious, low in fat, and healthy | | | | | |
| Entire Sample | 2.3 | 13 | 55 | 21 | 12 |
| Men | 2.2 | 15 | 57 | 17 | 11 |
| Women | 2.4 | 12 | 53 | 24 | 12 |
| When I eat out, I choose food that is low in fat and cholesterol | | | | | |
| Entire Sample | 2.0 | 33 | 47 | 12 | 7 |
| Men | 1.9 | 41 | 35 | 13 | 11 |
| Women | 2.0 | 28 | 55 | 12 | 5 |
| Meals prepared at home often include fried foods | | | | | |
| Entire Sample | 2.6 | 3 | 45 | 35 | 16 |
| Men | 2.7 | 2 | 41 | 41 | 17 |
| Women | 2.6 | 4 | 49 | 32 | 16 |
| I eat out at fast-food places or pizza places | | | | | |
| Entire Sample | 2.6 | 4 | 38 | 50 | 8 |
| Men | 2.5 | 8 | 38 | 49 | 6 |
| Women | 2.7 | 1 | 38 | 51 | 9 |

Family Influences and Environment: Overview. The respondents were asked about the lifestyle of their family and rated how strongly they disagreed or agreed with statements about their family. For these questions, family members were defined as those who live in the same house, apartment, or dwelling as the respondent. About 57% of the sample reported that they lived with family members.

Family Influences and Environment: Eating Healthfully. About three-fourths of respondents *agreed* (56%) or *strongly agreed* (20%) that their family members encourage one another to eat healthfully.

| Table 15 | | | | | |
|---|-------------|-----------------------------------|--------------------------|-----------------------|--------------------------------|
| Eating Healthfully | | | | | |
| | Mean | Strongly Disagree (1) % | Disagree (2) % | Agree (3) % | Strongly Agree (4) % |
| Family members encourage one another to eat healthfully | | | | | |
| Entire Sample | 2.9 | 8 | 17 | 56 | 20 |
| Men | 3.0 | 4 | 21 | 50 | 25 |
| Women | 2.8 | 10 | 14 | 59 | 16 |

Family Influences and Environment: Health Responsibilities. Generally, respondents reported that their families were positive influences in the area of health behaviors. A majority of respondents said that health behaviors were openly discussed and encouraged (74%), family members were encouraged to seek health care (87%), and personal responsibility for one’s health was encouraged (90%).

| Table 16 | | | | | |
|---|-------------|-----------------------------------|--------------------------|-----------------------|--------------------------------|
| Health Responsibilities | | | | | |
| | Mean | Strongly Disagree (1) % | Disagree (2) % | Agree (3) % | Strongly Agree (4) % |
| Family members are encouraged to seek health care early if a problem develops | | | | | |
| Entire Sample | 3.1 | 1 | 12 | 60 | 27 |
| Men | 3.6 | 0 | 14 | 54 | 32 |
| Women | 3.0 | 2 | 10 | 63 | 24 |
| Protective health behaviors are openly discussed and encouraged | | | | | |
| Entire Sample | 2.9 | 4 | 22 | 54 | 20 |
| Men | 3.3 | 4 | 29 | 46 | 21 |
| Women | 3.1 | 4 | 19 | 58 | 19 |
| Personal responsibility for health is encouraged by the family | | | | | |
| Entire Sample | 3.2 | 0 | 9 | 64 | 26 |
| Men | 3.5 | 0 | 11 | 68 | 21 |
| Women | 3.4 | 0 | 8 | 62 | 29 |

Family Influences and Environment: Family Support, Resilience & Resources. About three-fourths of respondents *agreed* (50%) or *strongly agreed* (22%) that their family models health habits for each other. Family relationships were based on love and forgiveness according to 93% of the respondents. With respect to conflict resolution, about one-third (36%) of the respondents indicated that disagreements are *not* settled by talking but rather are settled by verbal abuse or physical violence. In times of trouble, about 90% indicated that the family has friends to call on for help.

Table 17
Family Support, Resilience, and Resources

| | Mean | Strongly Disagree (1) % | Disagree (2) % | Agree (3) % | Strongly Agree (4) % |
|--|------|----------------------------|-------------------|----------------|-------------------------|
| Family members model health habits for each other | | | | | |
| Entire Sample | 2.9 | 7 | 22 | 50 | 22 |
| Men | 2.8 | 7 | 22 | 48 | 22 |
| Women | 2.9 | 6 | 21 | 51 | 21 |
| Disagreements are settled by talking rather than verbal abuse or physical violence | | | | | |
| Entire Sample | 2.8 | 4 | 32 | 46 | 18 |
| Men | 2.8 | 8 | 27 | 38 | 27 |
| Women | 2.7 | 2 | 35 | 50 | 12 |
| In times of trouble, the family has friends to call on for help | | | | | |
| Entire Sample | 3.4 | 4 | 5 | 38 | 53 |
| Men | 3.4 | 7 | 4 | 29 | 61 |
| Women | 3.4 | 2 | 6 | 44 | 48 |
| Family relationships are based on love and forgiveness of each other | | | | | |
| Entire Sample | 3.4 | 0 | 7 | 43 | 50 |
| Men | 3.6 | 0 | 4 | 36 | 61 |
| Women | 3.4 | 0 | 8 | 48 | 44 |
| Family members encourage each other to “keep going” when life is hard | | | | | |
| Entire Sample | 3.5 | 1 | 1 | 42 | 55 |
| Men | 3.6 | 0 | 4 | 36 | 61 |
| Women | 3.5 | 2 | 0 | 46 | 52 |
| Family members focus on each other’s positive qualities and encourage each other | | | | | |
| Entire Sample | 3.2 | 3 | 16 | 40 | 40 |
| Men | 3.2 | 4 | 22 | 30 | 44 |
| Women | 3.2 | 2 | 13 | 47 | 38 |
| Expressing emotions is encouraged in the family | | | | | |
| Entire Sample | 3.1 | 1 | 10 | 69 | 20 |
| Men | 3.1 | 0 | 11 | 71 | 18 |
| Women | 3.1 | 2 | 10 | 67 | 20 |
| My family often relaxes, talks, and laughs together | | | | | |
| Entire Sample | 3.2 | 0 | 8 | 65 | 27 |
| Men | 3.3 | 0 | 11 | 50 | 39 |
| Women | 3.1 | 0 | 6 | 74 | 20 |
| Family members share their stressful experiences with each other | | | | | |
| Entire Sample | 3.0 | 3 | 14 | 64 | 20 |
| Men | 3.0 | 7 | 7 | 64 | 21 |
| Women | 3.0 | 0 | 17 | 63 | 20 |

Family Influences and Environment: Religion. Family worship and prayer were reported to be regular aspects of family life by 80% and 61% of the respondents, respectively.

| Table 18 | | | | | |
|--|-------------|-----------------------------------|--------------------------|-----------------------|--------------------------------|
| Family Religion | | | | | |
| | Mean | Strongly Disagree (1) % | Disagree (2) % | Agree (3) % | Strongly Agree (4) % |
| Worship or spiritual experiences are a regular part of my family life | | | | | |
| Entire Sample | 3.3 | 5 | 14 | 29 | 51 |
| Men | 3.3 | 7 | 14 | 18 | 61 |
| Women | 3.2 | 4 | 15 | 35 | 46 |
| My family is connected with other families through its involvement with the neighborhood, community, or church | | | | | |
| Entire Sample | 3.3 | 8 | 9 | 28 | 55 |
| Men | 3.4 | 11 | 4 | 25 | 61 |
| Women | 3.3 | 6 | 12 | 29 | 52 |
| My family prays together regularly | | | | | |
| Entire Sample | 2.8 | 12 | 28 | 33 | 28 |
| Men | 2.7 | 18 | 21 | 32 | 29 |
| Women | 2.8 | 8 | 31 | 33 | 27 |

Family Influences and Environment: Physical Activity. Although respondents *agreed* (66%) or *strongly agreed* (13%) that family members expect each other to be physically active, family time often reportedly involves watching television or playing video games in more than 80% of the families.

| Table 19 | | | | | |
|---|-------------|-----------------------------------|--------------------------|-----------------------|--------------------------------|
| Physical Activity | | | | | |
| | Mean | Strongly Disagree (1) % | Disagree (2) % | Agree (3) % | Strongly Agree (4) % |
| Family members expect each other to be physically active | | | | | |
| Entire Sample | 2.9 | 6 | 14 | 66 | 13 |
| Men | 2.9 | 4 | 18 | 68 | 11 |
| Women | 2.9 | 8 | 12 | 65 | 14 |
| Family time often involves watching television or playing video games | | | | | |
| Entire Sample | 3.0 | 8 | 10 | 57 | 25 |
| Men | 3.0 | 10 | 4 | 64 | 21 |
| Women | 3.0 | 6 | 14 | 53 | 26 |

Part 5:
Health Control Beliefs and Beliefs about Diseases and Healing

Health Control Beliefs: Overview. Four aspects of health control beliefs were measured using the Multidimensional Health Locus of Control Scale (Form B) (Wallston, Wallston, & DeVellis, 1978) and the God Control Scale (Welton, Adkins, Ingle, & Dixon, 1996). The tables in this section are organized by the types of approaches people have with respect to attributing the cause of their health status. These approaches are internal (person is responsible for their own health), powerful others (health professionals are responsible for a person’s health), chance (fate or luck determine one’s health), and perceptions that God is in control of one’s health.

Health Control Beliefs: Composites. The scores for the four 6-item scales were summed to create composites. The scores for each scale could range from 6 to 36 with higher scores indicating a stronger propensity within the individual towards understanding one’s health condition. Internal and God control were endorsed to a much greater degree than were powerful others and chance (see Figure 16).

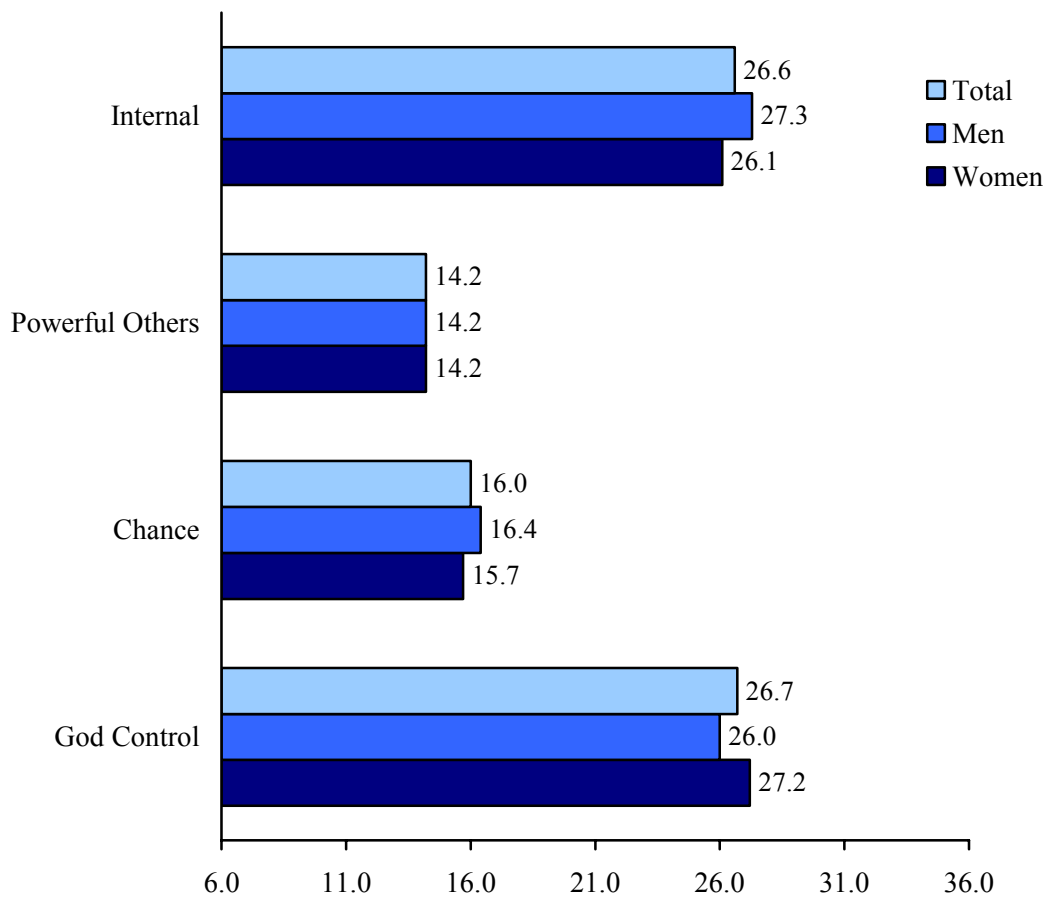


Figure 16. Health Control Beliefs Subscale (Means).

Health Control Beliefs: Internal. There was a high level of agreement among the respondents that their physical well-being depended on how well they take care of themselves (77% *moderately or strongly agreed*), they stay healthy by taking good care of themselves (69% *moderately or strongly agreed*) and they were directly responsible for their own health (78% *moderately or strongly agreed*). Yet, only 30% of the respondents *moderately* (19%) or *strongly agreed* (11%) that they have the power to make themselves well again once they become sick.

Table 20
Internal Locus of Control

| | Mean | Strongly Disagree (1) % | Moderately Disagree (2) % | Slightly Disagree (3) % | Slightly Agree (4) % | Moderately Agree (5) % | Strongly Agree (6) % |
|--|------|-------------------------------|---------------------------------|-------------------------------|----------------------------|------------------------------|----------------------------|
| If I become sick, I have the power to make myself well again | | | | | | | |
| Entire Sample | 3.8 | 11 | 4 | 19 | 35 | 19 | 11 |
| Men | 3.8 | 14 | 4 | 16 | 31 | 24 | 11 |
| Women | 3.8 | 9 | 5 | 21 | 38 | 16 | 12 |
| I am directly responsible for my health | | | | | | | |
| Entire Sample | 5.1 | 3 | 2 | 6 | 12 | 26 | 52 |
| Men | 5.2 | 2 | 4 | 7 | 11 | 18 | 58 |
| Women | 5.1 | 4 | 0 | 5 | 12 | 32 | 47 |
| Whatever goes wrong with my health is my own fault | | | | | | | |
| Entire Sample | 3.8 | 13 | 10 | 20 | 16 | 21 | 21 |
| Men | 3.8 | 18 | 7 | 14 | 18 | 18 | 24 |
| Women | 3.8 | 9 | 12 | 24 | 14 | 22 | 18 |
| My physical well-being depends on how well I take care of myself | | | | | | | |
| Entire Sample | 4.9 | 3 | 5 | 4 | 12 | 40 | 37 |
| Men | 4.9 | 2 | 9 | 2 | 13 | 32 | 43 |
| Women | 4.9 | 4 | 1 | 5 | 12 | 46 | 32 |
| When I feel ill, I know it is because I have not been taking care of myself* | | | | | | | |
| Entire Sample | 4.1 | 5 | 12 | 17 | 20 | 25 | 22 |
| Men | 4.4 | 4 | 14 | 9 | 14 | 22 | 36 |
| Women | 3.9 | 7 | 9 | 23 | 24 | 27 | 11 |
| I can pretty much stay healthy by taking good care of myself* | | | | | | | |
| Entire Sample | 4.8 | 2 | 4 | 9 | 16 | 35 | 34 |
| Men | 5.1 | 0 | 2 | 11 | 6 | 30 | 51 |
| Women | 4.6 | 3 | 5 | 8 | 23 | 39 | 22 |

Note. “**” indicates statistically significant difference in means between men and women.

Health Control Beliefs: Powerful Others. Health care professionals were not generally reported to play a large role in whether respondents become sick or stay healthy. Interestingly, only one-fifth *moderately* (12%) or *strongly agreed* (8%) that following doctor's orders is the best way to stay healthy.

Table 21
Powerful Others Locus of Control

| | Mean | Strongly Disagree (1) % | Moderately Disagree (2) % | Slightly Disagree (3) % | Slightly Agree (4) % | Moderately Agree (5) % | Strongly Agree (6) % |
|--|------|-------------------------------|---------------------------------|-------------------------------|----------------------------|------------------------------|----------------------------|
| If I see an excellent doctor regularly, I am less likely to have health problems | | | | | | | |
| Entire Sample | 2.4 | 41 | 25 | 10 | 10 | 10 | 4 |
| Men | 2.4 | 40 | 27 | 6 | 13 | 13 | 2 |
| Women | 2.4 | 42 | 23 | 13 | 8 | 8 | 6 |
| I can only maintain my health by consulting health professionals | | | | | | | |
| Entire Sample | 2.2 | 47 | 21 | 14 | 8 | 6 | 4 |
| Men | 2.1 | 46 | 24 | 11 | 9 | 7 | 2 |
| Women | 2.2 | 47 | 19 | 17 | 6 | 5 | 5 |
| Other people play a big part in whether I stay healthy or become sick | | | | | | | |
| Entire Sample | 1.9 | 52 | 21 | 14 | 9 | 2 | 2 |
| Men | 1.7 | 61 | 17 | 11 | 9 | 2 | 0 |
| Women | 2.1 | 46 | 25 | 16 | 9 | 1 | 4 |
| Health professionals keep me healthy | | | | | | | |
| Entire Sample | 2.5 | 35 | 16 | 25 | 15 | 3 | 5 |
| Men | 2.5 | 36 | 18 | 24 | 11 | 4 | 7 |
| Women | 2.5 | 35 | 15 | 27 | 19 | 3 | 3 |
| The type of care I receive from other people is what is responsible for how well I recover | | | | | | | |
| Entire Sample | 2.2 | 45 | 19 | 12 | 15 | 5 | 4 |
| Men | 2.2 | 51 | 13 | 14 | 11 | 7 | 4 |
| Women | 2.3 | 41 | 24 | 11 | 17 | 3 | 4 |
| Following doctor's orders to the letter is the best way for me to stay healthy | | | | | | | |
| Entire Sample | 3.1 | 15 | 24 | 24 | 18 | 12 | 8 |
| Men | 3.2 | 18 | 18 | 17 | 22 | 15 | 9 |
| Women | 3.0 | 12 | 28 | 29 | 15 | 9 | 7 |

Health Control Beliefs: Chance. There was a high level of *disagreement* that health and sickness could be explained by luck, accidental happenings, or fate. From a treatment perspective it is important to note that one-fifth of the respondents *moderately* (14%) or *strongly agreed* (6%) that when they get sick they just need to let nature run its course and about 30% of the respondents *moderately* (17%) or *strongly agreed* (11%) that even when they take care of themselves they find it easy to get sick.

| Table 22 | | | | | | | |
|---|------|-------------------------------|---------------------------------|-------------------------------|----------------------------|------------------------------|----------------------------|
| Chance Locus of Control | | | | | | | |
| | Mean | Strongly Disagree (1) % | Moderately Disagree (2) % | Slightly Disagree (3) % | Slightly Agree (4) % | Moderately Agree (5) % | Strongly Agree (6) % |
| Often I feel that no matter what I do, if I am going to get sick, I will get sick | | | | | | | |
| Entire Sample | 2.8 | 29 | 15 | 23 | 17 | 9 | 6 |
| Men | 2.8 | 33 | 11 | 24 | 14 | 9 | 9 |
| Women | 2.8 | 27 | 18 | 23 | 19 | 9 | 4 |
| It seems that my health is greatly influenced by accidental happenings | | | | | | | |
| Entire Sample | 2.2 | 39 | 22 | 21 | 11 | 5 | 1 |
| Men | 2.4 | 40 | 20 | 16 | 13 | 9 | 2 |
| Women | 2.1 | 39 | 23 | 25 | 10 | 3 | 0 |
| When I am sick, I just have to let nature run its course | | | | | | | |
| Entire Sample | 3.1 | 19 | 17 | 27 | 18 | 14 | 6 |
| Men | 3.2 | 19 | 12 | 31 | 15 | 15 | 8 |
| Women | 3.0 | 19 | 2 | 24 | 20 | 12 | 4 |
| When I stay healthy, I'm just plain lucky | | | | | | | |
| Entire Sample | 1.8 | 58 | 20 | 12 | 6 | 2 | 2 |
| Men | 1.8 | 56 | 22 | 9 | 7 | 4 | 2 |
| Women | 1.8 | 59 | 18 | 13 | 5 | 1 | 3 |
| Even when I take care of myself, it's easy to get sick | | | | | | | |
| Entire Sample | 3.4 | 17 | 14 | 23 | 19 | 17 | 11 |
| Men | 3.3 | 24 | 14 | 18 | 11 | 18 | 14 |
| Women | 3.4 | 12 | 13 | 27 | 24 | 16 | 8 |
| When I become ill, it's a matter of fate | | | | | | | |
| Entire Sample | 2.7 | 23 | 23 | 27 | 15 | 7 | 5 |
| Men | 2.8 | 27 | 18 | 24 | 13 | 11 | 7 |
| Women | 2.7 | 20 | 27 | 29 | 17 | 4 | 3 |

Health Control Beliefs: God Control. There was a high level of agreement among the respondents that their health and well-being are due, at least in part, to God’s plan, purpose, or control. Consistent with this belief, more than 80% of the respondents either *moderately* or *strongly agreed* that they should pray when they do not feel well (88%) and they will recover from illness based on God’s provision (83%).

| Table 23 | | | | | | | |
|--|-------------|--|--|--|-------------------------------------|---------------------------------------|-------------------------------------|
| Health God Locus of Control | | | | | | | |
| | Mean | Strongly Disagree (1) % | Moderately Disagree (2) % | Slightly Disagree (3) % | Slightly Agree (4) % | Moderately Agree (5) % | Strongly Agree (6) % |
| My health is determined by God’s purposes | | | | | | | |
| Entire Sample | 4.5 | 7 | 4 | 12 | 18 | 25 | 34 |
| Men | 4.5 | 7 | 4 | 13 | 18 | 26 | 33 |
| Women | 4.5 | 6 | 5 | 12 | 18 | 24 | 35 |
| My health is primarily controlled by God* | | | | | | | |
| Entire Sample | 4.8 | 6 | 4 | 8 | 11 | 24 | 47 |
| Men | 4.5 | 11 | 7 | 7 | 15 | 17 | 43 |
| Women | 5.1 | 2 | 1 | 8 | 8 | 29 | 51 |
| Whether or not I get a particular disease depends on God’s plan | | | | | | | |
| Entire Sample | 3.1 | 29 | 16 | 13 | 12 | 17 | 12 |
| Men | 3.1 | 27 | 13 | 18 | 13 | 13 | 13 |
| Women | 3.1 | 28 | 19 | 9 | 12 | 50 | 11 |
| If I obey God’s commands I am less likely to have health problems | | | | | | | |
| Entire Sample | 3.6 | 14 | 19 | 14 | 19 | 13 | 21 |
| Men | 3.5 | 18 | 22 | 18 | 8 | 8 | 28 |
| Women | 3.7 | 12 | 17 | 11 | 27 | 16 | 17 |
| Whenever I don’t feel well, I should pray | | | | | | | |
| Entire Sample | 5.4 | 1 | 1 | 5 | 5 | 24 | 64 |
| Men | 5.3 | 2 | 2 | 7 | 4 | 24 | 62 |
| Women | 5.5 | 0 | 0 | 4 | 5 | 25 | 66 |
| I recover from an illness because of God’s provision | | | | | | | |
| Entire Sample | 5.2 | 2 | 0 | 5 | 11 | 30 | 53 |
| Men | 5.2 | 4 | 0 | 9 | 7 | 20 | 59 |
| Women | 5.3 | 0 | 0 | 3 | 13 | 36 | 48 |

Note. “*” indicates statistically significant difference in means between men and women.

Beliefs About Disease and Healing: Prayer and Faith. There was a high level of agreement among respondents about the power of prayer and God to heal diseases, illness, and injuries. Specifically, the vast majority of the respondents agreed (i.e., responded with *agree* or *strongly agree*) that diseases can be cured through prayer (93%), God can perform miracles (98%), God can heal people of injuries and disease (97%), and prayer is more important than modern medicine in healing diseases such as cancer (80%).

| Table 24 | | | | | |
|---|-------------|--|-------------------------------|----------------------------|-------------------------------------|
| Prayer and Faith | | | | | |
| | Mean | Strongly Disagree (1) % | Disagree (2) % | Agree (3) % | Strongly Agree (4) % |
| Diseases can be cured through prayer | | | | | |
| Entire Sample | 3.5 | 2 | 5 | 29 | 64 |
| Men | 3.5 | 2 | 6 | 31 | 62 |
| Women | 3.6 | 3 | 5 | 27 | 65 |
| As a result of my confidence in God to perform such things, I believe in miracles | | | | | |
| Entire Sample | 3.7 | 2 | 1 | 22 | 76 |
| Men | 3.7 | 2 | 2 | 20 | 76 |
| Women | 3.7 | 1 | 0 | 22 | 76 |
| God can heal people of their injuries and diseases | | | | | |
| Entire Sample | 3.7 | 2 | 0 | 24 | 73 |
| Men | 3.7 | 2 | 0 | 26 | 72 |
| Women | 3.7 | 3 | 0 | 23 | 74 |
| Prayer is more important than modern medicine in healing people with diseases such as cancer | | | | | |
| Entire Sample | 3.3 | 3 | 16 | 26 | 54 |
| Men | 3.3 | 2 | 17 | 23 | 58 |
| Women | 3.3 | 4 | 16 | 29 | 52 |

Part 6:
Focused Analyses

Focused Analysis: Overview. In this section, the statistically significant differences based on age, marital status, education, insurance coverage, and church attendance are reported. Differences were tested in the following areas: information and programming, health care providers used, advice and treatment seeking behaviors, physical and emotional symptoms and problems, health-promoting behavior (HPLP) composite scores (item-level differences not reported), family influences and environment (not reported for marital status differences), health locus of control composite scores (item-level differences not reported), and faith-based healing beliefs. Only statistically significant differences are discussed in each of the sections. The findings reported in the tables of this section were statistically significant at the 95% confidence level.

Focused Analysis: Age Group. In this section, statistically significant results based on comparisons among adults under 40 ($n = 68$), aged 40-50 ($n = 31$), and 51 and older ($n = 37$) are presented.

Information and Programming: Age Group. The oldest respondents were, overall, most likely to consult a pharmacist (86%) about health issues and less likely to consult print media or community events for such information. Of those aged 50 and younger, over 90% consulted print media and over 60% used community events for information related to health issues. Over 70% of the youngest age group used the Internet for health information compared to only 40% of those 40 or older.

| Table 25 | | | |
|---|--------------|------------------|--------------|
| Information About Health Issues by Age Group (%) | | | |
| | Never | Sometimes | Often |
| Newspaper or Magazine | | | |
| Age 18-39 | 9 | 60 | 31 |
| Age 40-50 | 10 | 60 | 30 |
| Age 51 and up | 39 | 42 | 19 |
| Pharmacist | | | |
| Age 18-39 | 46 | 42 | 12 |
| Age 40-50 | 30 | 47 | 23 |
| Age 51 and up | 14 | 71 | 14 |
| Internet | | | |
| Age 18-39 | 27 | 52 | 21 |
| Age 40-50 | 60 | 37 | 3 |
| Age 51 and up | 71 | 20 | 9 |
| Special Programs or Community Events | | | |
| Age 18-39 | 36 | 55 | 9 |
| Age 40-50 | 40 | 47 | 13 |
| Age 51 and up | 67 | 28 | 6 |

Advice and Treatment: Age Group. Although more than two-thirds of people in all age categories reported that they often turned to family members for advice when they thought they might have a serious illness or injury, those older than 50 were the least likely to do so. The oldest age category was also more than twice as likely *not* to seek advice from people at work or from the Internet or other self-help materials compared to the other age groups.

| Table 26 | | | | |
|--|----------------|-----------------|--------------------|------------------|
| Advice and Treatment by Age Group (%) | | | | |
| | Advice | | | Treatment |
| | Family Members | Someone at Work | Internet/Self Help | Someone at Work |
| Age 18-39 | 91 | 48 | 39 | 15 |
| Age 40-50 | 88 | 45 | 19 | 0 |
| Age 51 and up | 70 | 16 | 8 | 3 |

Physical and Emotional Symptoms and Problems: Age Group. Feeling depressed was most common among those adults under the age of 40.

| Table 27 | | | | | | |
|--|--------------------------------------|----------------------------|----------------------|--------------------|-----------------------------------|---|
| Experiencing Problems and Seeking Behavior by Age Group (%) | | | | | | |
| | Experienced In Past 12 Months | Problem But No Help | Informal Only | Formal Only | Both Formal & Informal | Experienced But Treatment Information Not Provided |
| Depression in the past 12 months | | | | | | |
| Age 18-39 | 64 | 14 | 38 | 0 | 11 | 2 |
| Age 40-50 | 48 | 13 | 13 | 3 | 16 | 3 |
| Age 51 and up | 43 | 14 | 5 | 8 | 16 | 0 |

Note. Due to rounding, row percentages for help seeking behaviors may appear to exceed the percentage who reported experiencing the problem or symptom.

Family Influence and Environment: Age Group. There was greater agreement that expressing emotions is encouraged in the family among the youngest age group as compared with respondents aged 40 or older.

| Table 28 | | | | |
|--|--------------------------|-----------------|--------------|-----------------------|
| Family Influence and Environment by Age Group (%) | | | | |
| | Strongly Disagree | Disagree | Agree | Strongly Agree |
| Expressing emotions is encouraged in the family | | | | |
| Age 18-39 | 2 | 2 | 65 | 30 |
| Age 40-50 | 0 | 19 | 76 | 5 |
| Age 51 and up | 0 | 23 | 69 | 8 |

Disease and Healing: Age Group. The high level of agreement that God can heal people was especially strong among those older than 50.

| Table 29 | | | | |
|--|--------------------------|-----------------|--------------|-----------------------|
| Faith-based Healing by Age Group (%) | | | | |
| | Strongly Disagree | Disagree | Agree | Strongly Agree |
| God can heal people of their injuries and diseases | | | | |
| Age 18-39 | 0 | 0 | 30 | 70 |
| Age 40-50 | 0 | 0 | 27 | 73 |
| Age 51 and up | 9 | 0 | 11 | 80 |

Focused Analysis: Marital Status. In this section, statistically significant results based on comparisons of those who are currently married ($n = 68$) versus those who are currently single and never been married ($n = 31$) are presented. Those who were divorced or separated, widowed, and unmarried but living as married were excluded from these analyses.

Advice and Treatment: Marital Status. Married and single people did not differ in terms of where they turned to for advice, but there were three differences in terms of treatment by someone at work, someone at their place of worship, and God.

| Table 30 | | | |
|--|------------------------|---|------------|
| Treatment by Marital Status (%) | | | |
| | Someone at Work | Someone Who Attends Place of Worship | God |
| Married | 0 | 0 | 29 |
| Single, never married | 16 | 12 | 8 |

Physical and Emotional Symptoms and Problems: Marital Status. People who are single or never married were more than three times as likely as married persons in the sample to have felt lonely in the past 12 months.

| Table 31 | | | | | | |
|---|--------------------------------------|----------------------------|----------------------|--------------------|-----------------------------------|---|
| Experiencing Problems and Seeking Behavior by Marital Status (%) | | | | | | |
| | Experienced In Past 12 Months | Problem But No Help | Informal Only | Formal Only | Both Formal & Informal | Experienced But Treatment Information Not Provided |
| Loneliness in the past 12 months | | | | | | |
| Married | 19 | 6 | 10 | 0 | 0 | 3 |
| Single, never married | 69 | 16 | 39 | 0 | 8 | 6 |

Note. Due to rounding, row percentages for help seeking behaviors may appear to exceed the percentage who reported experiencing the problem or symptom.

Positive Health-Promoting Behaviors: Marital Status. Single respondents scored higher than did married respondents on the HPLP subscales for physical activity ($M = 2.2$ vs. 1.8) and nutrition ($M = 2.4$ vs. 2.1).

Health Control Beliefs: Marital Status. Single respondents scored higher than did married respondents on the chance ($M = 16.8$ vs. 13.6) health locus of control subscale.

Focused Analysis: Education. In this section, statistically significant results based on comparisons of those with a high school education or less ($n = 50$) versus those with at least some college ($n = 86$) are presented. The complete distribution of education level within the sample was presented previously in the section called Description of the Sample (see Table 1).

Information and Programming: Education. Education was inversely related to use of various sources of information and programming about health-related issues. The greatest differences between those with at least some education beyond high school and those with less education were with respect to the use of books and newspapers/magazines as sources of information.

| Table 32 | | | |
|---|--------------|------------------|--------------|
| Sources of Information About Health Issues by Level of Education (%) | | | |
| | Never | Sometimes | Often |
| Radio | | | |
| High school or less | 43 | 43 | 14 |
| At least some college | 23 | 62 | 16 |
| Newspapers or Magazines | | | |
| High school or less | 37 | 41 | 22 |
| At least some college | 6 | 63 | 31 |
| Books | | | |
| High school or less | 61 | 33 | 6 |
| At least some college | 24 | 47 | 29 |
| Internet | | | |
| High school or less | 65 | 26 | 8 |
| At least some college | 35 | 48 | 17 |
| Special Programs or Community Events | | | |
| High school or less | 59 | 35 | 6 |
| At least some college | 37 | 52 | 11 |
| Health Food Store Clerk | | | |
| High school or less | 86 | 12 | 2 |
| At least some college | 63 | 33 | 4 |

Advice and Treatment: Education. Those respondents with at least some college education more often turned to someone at work, a religious authority, or the Internet/self help for advice more often than those who have a high school education or less. Those with a high school education or less turned to social services and welfare agencies for advice more than did those with at least some college. There were also two differences with respect to treatment of potentially serious physical illness or injuries. Treatment was more likely to be sought by those without some college education, whereas those with at least some college were more likely to turn to God for treatment than were those with a high school education or less.

| Table 33 | | | | | | |
|---|-----------------|---------------------|--------------------------------|--------------------|--------------------------------------|-----|
| Advice and Treatment by Level of Education (%) | | | | | | |
| | Advice | | | | Treatment | |
| | Someone at Work | Religious Authority | Social Services/Welfare Agency | Internet/Self Help | Someone who Attends Place of Worship | God |
| High School or Less | 28 | 16 | 44 | 10 | 12 | 8 |
| At Least Some College | 45 | 32 | 27 | 36 | 1 | 21 |

Physical and Emotional Symptoms and Problems: Education. Those with at least some college education were more likely than those without to report that they had a problem with stress in the past 12 months.

| Table 34 | | | | | | |
|---|--------------------------------------|----------------------------|----------------------|--------------------|-----------------------------------|---|
| Experiencing Problems and Seeking Behavior by Level of Education (%) | | | | | | |
| | Experienced In Past 12 Months | Problem But No Help | Informal Only | Formal Only | Both Formal & Informal | Experienced But Treatment Information Not Provided |
| | Stress in the past 12 months | | | | | |
| High school or less | 72 | 24 | 24 | 4 | 12 | 8 |
| At least some college | 87 | 19 | 45 | 2 | 19 | 1 |

Note. Due to rounding, row percentages for help seeking behaviors may appear to exceed the percentage who reported experiencing the problem or symptom.

Family Influence and Environment: Education. Respondents with at least some college education were more likely than those with less education to state that family members focus on each other's positive qualities and encourage each other and to express their emotions.

| Table 35 | | | | |
|---|--------------------------|-----------------|--------------|-----------------------|
| Family Lifestyle by Level of Education (%) | | | | |
| | Strongly Disagree | Disagree | Agree | Strongly Agree |
| Family members focus on each others positive qualities and encourage each other | | | | |
| High school or less | 0 | 36 | 36 | 28 |
| At least some college | 4 | 6 | 43 | 47 |
| Expressing emotions is encouraged in the family | | | | |
| High school or less | 0 | 27 | 62 | 12 |
| At least some college | 2 | 2 | 72 | 24 |

Focused Analysis: Health Insurance. In this section, statistically significant results based on comparisons of those without health insurance coverage for all or part of the past 12 months ($n = 33$) versus those with continuous coverage during the entire year ($n = 100$) are presented.

Health Care Providers: Health Insurance. Respondents who have not had health insurance for some or all of the past 12 months were more likely to use mental health professionals than were respondents with continuous coverage during the past 12 months. The opposite pattern was observed with respect to visiting a chiropractor.

| Table 36 | | | |
|--|---------------------|----------------------------|---------------------------------------|
| Health Care Providers by Health Insurance (%) | | | |
| | Chiropractor | Counselor/Therapist | Psychiatrist/ Psychologist |
| Without Insurance | 3 | 24 | 15 |
| With Insurance | 19 | 8 | 3 |

Physical and Emotional Symptoms and Problems: Health Insurance. Those without continuous health insurance coverage during the past 12 months were more likely than others to report experiencing loneliness, depression, stress, anxiety, social avoidance, and family problems during the past 12 months. This may be related to the finding that those without health insurance for some part of the past 12 months reported higher levels of use of mental health professionals.

| Table 37 | | | | | | |
|---|--|------------------------------------|--------------------------|------------------------|---|---|
| Experiencing Problems and Seeking Behavior by Health Insurance (%) | | | | | | |
| | Experienced In Past 12 Months | Problem But No Help | Informal Only | Formal Only | Both Formal & Informal | Experienced But Treatment Information Not Provided |
| Loneliness in the past 12 months | | | | | | |
| Without Insurance | 70 | 21 | 42 | 0 | 6 | 0 |
| With Insurance | 46 | 12 | 18 | 2 | 7 | 7 |
| Depression in the past 12 months | | | | | | |
| Without Insurance | 70 | 21 | 39 | 3 | 6 | 0 |
| With Insurance | 48 | 12 | 17 | 3 | 15 | 2 |
| Stress in the past 12 months | | | | | | |
| Without Insurance | 94 | 30 | 54 | 3 | 6 | 0 |
| With Insurance | 76 | 19 | 31 | 3 | 19 | 5 |
| Anxiety in the past 12 months | | | | | | |
| Without Insurance | 67 | 21 | 33 | 6 | 6 | 0 |
| With Insurance | 29 | 5 | 8 | 4 | 8 | 3 |
| Not wanting to see people in the past 12 months | | | | | | |
| Without Insurance | 58 | 24 | 27 | 0 | 0 | 6 |
| With Insurance | 32 | 16 | 9 | 1 | 0 | 6 |
| Family problems in the past 12 months | | | | | | |
| Without Insurance | 73 | 12 | 48 | 3 | 3 | 6 |
| With Insurance | 41 | 3 | 34 | 0 | 1 | 3 |

Note. Due to rounding, row percentages for help seeking behaviors may appear to exceed the percentage who reported experiencing the problem or symptom.

Advice and Treatment: Health Insurance. Respondents who have not had health insurance for some or all of the past 12 months were more likely to turn to family members for advice and treatment than were respondents who had health insurance for the entire past 12 months.

| Table 38 | | |
|--|---------------|------------------|
| Family Members for Advice and Treatment by Health Insurance (%) | | |
| | Advice | Treatment |
| Without Insurance | 54 | 52 |
| With Insurance | 34 | 32 |

Positive Health-Promoting Behaviors: Health Insurance. Respondents who have had health insurance for the entire 12 months reported higher levels of health-promoting behaviors in the areas of spiritual growth ($M = 3.1$ vs. 2.7) and interpersonal relationships ($M = 2.9$ vs. 2.6) than were those who were without health insurance for all or at least some part of the past 12 months.

Focused Analysis: Service Attendance. In this section, statistically significant results based on comparisons among those who reported that they did not attend a church or religious service at all during the past 30 days ($n = 28$), who attended 1 to 3 days ($n = 35$), and who attended 4 or more days ($n = 70$). The distribution of religious preferences within the sample was presented previously in the section called the Description of the Sample (see Table 1). The responses from the Jewish and the Muslim respondents were not included in the analyses reported in this section due to small subgroup sample size.

Information and Programming: Service Attendance. More frequent church attendance was positively associated with more frequent use of several sources of information for learning about health-related issues.

| Table 39 | | | |
|--|-------|-----------|-------|
| Sources of Information About Health Issues | | | |
| by Religious Service Attendance (%) | | | |
| Times Attended Church or Religious Service in Past 30 Days | Never | Sometimes | Often |
| Newspaper or Magazine | | | |
| None | 27 | 62 | 12 |
| 1-3 times | 13 | 74 | 13 |
| 4 or more times | 13 | 45 | 42 |
| Brochure and Pamphlets | | | |
| None | 27 | 54 | 19 |
| 1-3 times | 10 | 64 | 26 |
| 4 or more times | 4 | 59 | 36 |
| Doctor or Medical Provider | | | |
| None | 16 | 56 | 28 |
| 1-3 times | 6 | 71 | 23 |
| 4 or more times | 0 | 61 | 39 |
| Friends/Family/Others who are not Health Professionals | | | |
| None | 23 | 46 | 31 |
| 1-3 times | 3 | 42 | 55 |
| 4 or more times | 6 | 50 | 44 |
| Programs/Sermons/Classes through Place of Worship | | | |
| None | 81 | 19 | 0 |
| 1-3 times | 42 | 48 | 10 |
| 4 or more times | 27 | 53 | 20 |

Health Care Providers: Service Attendance. The use of chiropractors as health care providers was associated with religious service attendance. Specifically, 31% of those who had not attended a religious service in the past 30 days reported going to a chiropractor in the past 12 months as compared to 13% of those with moderate levels of attendance (i.e., 1-3 days) and 9% of those with high levels of attendance (i.e., 4 or more days).

Advice and Treatment: Service Attendance. Those with moderate levels of attendance at religious services (i.e., 1-3 times in the past 30 days) were the most likely to seek advice for potentially serious illnesses or injuries from family members and neighbors or friends. Those who did not attend a religious service, not surprisingly, were the least likely to seek advice from a religious authority or someone who attends their place of worship.

| Table 40 | | | | |
|--|--------------------------------------|---------------------|----------------|-----------------|
| Advice by Religious Service Attendance (%) | | | | |
| Times Attended Church or Religious Service in Past 30 Days | Someone Who Attends Place of Worship | Religious Authority | Family Members | Friend/Neighbor |
| None | 15 | 8 | 27 | 23 |
| 1-3 times | 47 | 25 | 56 | 44 |
| 4 or more times | 40 | 36 | 31 | 21 |

Physical and Emotional Symptoms and Problems: Service Attendance. The greatest difference in the rates of reported experiences with depression and anger were between those with moderate versus high levels of church attendance. For instance, anger was reported to have been a problem in the past 12 months for 43% of those attending religious services on 4 or more days in the past month as compared to 69% of those attending 1 to 3 times. Stress was most commonly reported by those with moderate attendance at religious services.

| Table 41 | | | | | | |
|---|----------------------------------|---------------------|---------------|-------------|------------------------|--|
| Experiencing Problems and Seeking Behavior by Religious Service Attendance (%) | | | | | | |
| Times Attended Church or Religious Service in Past 30 Days | Did Experience In Past 12 Months | Problem But No Help | Informal Only | Formal Only | Both Formal & Informal | Experienced But Treatment Information Not Provided |
| Depression in the past 12 months | | | | | | |
| None | 52 | 16 | 16 | 0 | 20 | 0 |
| 1-3 times | 69 | 19 | 22 | 12 | 9 | 6 |
| 4 or more times | 46 | 12 | 23 | 0 | 11 | 0 |
| Stress in the past 12 months | | | | | | |
| None | 76 | 32 | 16 | 0 | 20 | 8 |
| 1-3 times | 88 | 25 | 41 | 12 | 6 | 3 |
| 4 or more times | 78 | 15 | 42 | 0 | 18 | 3 |
| Anger/Short Temper in the past 12 months | | | | | | |
| None | 60 | 44 | 12 | 0 | 0 | 4 |
| 1-3 times | 69 | 50 | 9 | 3 | 3 | 3 |
| 4 or more times | 43 | 14 | 25 | 2 | 0 | 3 |

Note. Due to rounding, row percentages for help seeking behaviors may appear to exceed the percentage who reported experiencing the problem or symptom.

Family Influence and Environment: Service Attendance. The frequency of attending religious services during the past month was predictably associated with the incorporation of worship and prayer in the family lifestyle, especially among those with the highest level of attendance. Those who did not attend a religious service in the past month reported the lowest levels of agreement that their family has friends to call on for help and that their family is connected with other families.

| Table 42 | | | | |
|--|------------------------------|-----------------|--------------|---------------------------|
| Family Lifestyle by Religious Service Attendance (%) | | | | |
| Times Attended Church or Religious Service in Past 30 Days | Strongly Disagree | Disagree | Agree | Strongly Agree |
| Worship or spiritual experiences are a regular part of my life | | | | |
| None | 27 | 27 | 18 | 27 |
| 1-3 times | 0 | 28 | 44.4 | 28 |
| 4 or more times | 0 | 5 | 26.8 | 68 |
| My family prays together regularly | | | | |
| None | 36 | 46 | 18.2 | 0 |
| 1-3 times | 11 | 33 | 33.3 | 22 |
| 4 or more times | 2 | 15 | 41.5 | 42 |
| The family has friends to call on for help | | | | |
| None | 18 | 9 | 45.5 | 27 |
| 1-3 times | 0 | 0 | 38.9 | 61 |
| 4 or more times | 0 | 5 | 31.7 | 63 |
| My family is connected with other families through its involvement with the neighborhood, community, or church (or similar institution) | | | | |
| None | 27 | 27 | 36.4 | 9 |
| 1-3 times | 6 | 11 | 22.2 | 61 |
| 4 or more times | 2 | 2 | 26.8 | 68 |

Disease and Healing: Service Attendance. Those who attended religious services the most frequently expressed the strongest levels of agreement that disease can be cured through prayer, God can perform miracles, God heals people of injuries and diseases, and prayer is more important than modern medicine in healing diseases such as cancer.

| Table 43 | | | | |
|---|------------------------------|-----------------|--------------|---------------------------|
| Faith-based Healing by Religious Service Attendance (%) | | | | |
| Times Attended Church or Religious Service in Past 30 Days | Strongly Disagree | Disagree | Agree | Strongly Agree |
| Diseases can be cured through prayer | | | | |
| None | 0 | 12 | 46 | 42 |
| 1-3 times | 9 | 9 | 34 | 47 |
| 4 or more times | 0 | 0 | 20 | 80 |
| As a result of my confidence in God to perform such things, I believe in miracles | | | | |
| None | 0 | 4 | 32 | 64 |
| 1-3 times | 3 | 0 | 31 | 66 |
| 4 or more times | 0 | 0 | 11 | 89 |
| God can heal people of their injuries and diseases | | | | |
| None | 0 | 0 | 40 | 60 |
| 1-3 times | 6 | 0 | 33 | 61 |
| 4 or more times | 0 | 0 | 12 | 88 |
| Prayer is more important than modern medicine in healing people with diseases such as cancer | | | | |
| None | 0 | 29 | 29 | 42 |
| 1-3 times | 6 | 22 | 34 | 38 |
| 4 or more times | 0 | 17 | 23 | 67 |

Focused Analysis: Gender. In this section, statistically significant results based on comparisons between men ($n = 57$) and women ($n = 79$) are presented. The presentation of results for this focused analysis includes only narrative to avoid including redundant tables since many tables for the main results included descriptive statistics for men and women.

Information and Programming: Gender. Women were more likely than men to at least sometimes call agency or hospital help lines such as Ask-A-Nurse (64% vs. 42%).

Health Care Providers: Gender. Women were about three times as likely to report having seen a counselor or therapist in the past 12 months (17% vs. 5%).

Advice and Treatment: Gender. Women were about twice as likely as men to turn to religious authorities such as pastors for advice concerning potentially serious illnesses or injuries (33% vs. 16%) and three times as likely to turn to God for treatment of these illnesses or injuries (23% vs. 7%).

Physical and Emotional Symptoms and Problems: Gender. Women were more likely than men to report having experienced problems in the areas of stress (88% vs. 71%), over-eating or under-eating (66% vs. 44%), trouble sleeping (58% vs. 27%), and family difficulties (57% vs. 38%).

Positive Health-Promoting Behaviors: Gender. Men had significantly higher scores than did women in the areas of stress management ($M = 2.6$ vs. 2.4) and physical activity ($M = 2.1$ vs. 1.8).

Summary

Study Overview. The present study was focused on assessing health status indicators, health-related attitudes and behaviors, and health care service utilization among African Americans in Waterloo, Iowa. The study, sponsored by the Black Hawk County Health Department (BHCH) was conducted by the Center for Social and Behavioral Research (CSBR) at the University of Northern Iowa (UNI) as an activity of the UNI EXPORT Center of Excellence on Health Disparities. A nonrandom sample of Black Hawk county residents was achieved through face-to-face interviews conducted in residences and community settings in areas of Waterloo with a high concentration of African American adults and a few mail-back responses from community groups. Data were collected between April 12, 2004 and July 9, 2004. The final sample ($n = 136$) was Black or African American and aged 18 or older. They were predominately Protestant Christians.

Current Health Status. More than 70% of the respondents reported that their physical health was *good*, *very good*, or *excellent*, and 65% of the respondents reported that their emotional health was *good*, *very good*, or *excellent*. However, only 18% reported that both their physical and emotional health were *very good* or *excellent*; whereas, 21% of the respondents reported that both their physical and emotional health were either *fair* or *poor*.

Information and Programming. The top five sources of health-related information were: medical providers (96%), friends/family (92%), brochures/pamphlets (90%), TV (88%), and newspaper/magazines (83%). About 85% of those aged 51 and older at least sometimes get their health-related information from a pharmacist. Those with at least some college education receive health-related information from a more diverse set of sources than do those with a high school education or less.

Appropriate Health Education Locations. The general finding was that all of the possible education settings assessed in this study were viewed as appropriate locations for health-related education by the majority of respondents. Schools, community centers (including libraries and meeting halls), and clinics or hospitals most consistently were endorsed as appropriate locations for health education.

Health Care Providers Recently Used. In the past 12 months, 96% of the respondents had been seen by a medical doctor for their own health needs, and 58% had been to the dentist.

Physical Illness or Injury. When thinking about who they usually get advice and treatment from for serious physical illness and injuries, the four places or people most respondents usually turn to for advice were the doctor's office (87%), family members (84%), friend/neighbor (75%), and God (73%). The most common source of treatment was the doctor's office (79%). A delay in seeking treatment of one week or longer was reported by 24% of the respondents, but 30% reported seeking treatment the same day of the illness or injury.

Physical and Emotional Symptoms and Problems. Respondents were asked which (if any) of 12 physical and emotional symptoms or problems they had experienced in the past 12 months. Treatment was sought for at least one of these twelve experiences by 80% of the respondents and an additional 12% had one of these experiences but did not seek any treatment for it. Of those who did seek advice or treatment, 60% went to a formal treatment provider. Stress was the most commonly reported emotional problem experienced. Women reported significantly higher occurrences than did men in the areas of stress, problem eating, trouble sleeping, and family problems. Feeling depressed was more common among adults under 40 than over 40.

Positive Health-Promoting Behaviors. Spiritual growth was the dimension with the highest mean rating and physical activity was the dimension with the lowest mean rating. Men reported higher levels of health-promoting behaviors than did women in the areas of stress management and physical activity. In the area of health responsibility, 48% of respondents reported that they never attend educational programs on personal health care and 38% never seek guidance or counseling. In the area of physical activity, only 7% reported *routinely* following a planned exercise program and just 10% reported *routinely* taking part in light to moderate physical activity 30-40 minutes 5 or more times a week. In terms of nutrition, about one-fourth (24%) of respondents reported that they *never* read labels for packaged food. In the area of stress, 13% of the respondents reported that they *never* get enough sleep.

Lifestyle Factors. One-third of the respondents said that they *often* (21%) or *routinely* (12%) eat meals prepared in the home that are generally nutritious, low in fat and healthy, but respondents also said that they *often* (50%) or *routinely* (8%) eat out at fast-food or pizza places. Overall, there was a high level of agreement expressed that family members were positive influences on each other in terms of promoting personal responsibility for their health, promoting positive relationship patterns, and incorporating religious activities into the family routine.

Health Locus of Control. The overall pattern for this sample was that respondents primarily attributed their health or illness to internal causes and God. That is, there was a high level of agreement that they needed to take care of themselves to stay healthy while at the same time attributing their physical well-being to God's providence. Prayer was consistently viewed as an activity that should occur when one does not feel well.

Disease and Healing. There was a high level of agreement among respondents about the power of prayer and God to heal diseases, illness, and injuries. More than 90% agreed or strongly agreed that diseases can be cured through prayer (93%), God can perform miracles (98%), and God can heal people of injuries and disease (97%). Importantly, prayer was reported as more important than modern medicine in healing diseases such as cancer by 80% of the respondents.

Implications. The implementation of health care treatment and educational programs with this population should be undertaken with an acknowledgment of the importance and relevance of God, prayer, and family within this population. God was consistently viewed as more influential in achieving and maintaining well-being than were powerful others such as health care providers. The strong reliance on family and friends for advice and treatment of physical and emotional conditions also should not be overlooked when designing and implementing health care interventions within the Waterloo community.

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Glossary

Chance Locus of Control: Perception that one's well-being is largely uncontrollable.

Formal Sources: Formal sources of advice or treatment included: emergency room, doctor's office or clinic, Ask-A-Nurse or a Crisis Line, mental health clinic (e.g., MHI in Independence), Psychiatrist or psychologist, and social service or welfare agencies.

God Locus of Control: Perception that God determines one's health and well-being.

Health-Promoting Lifestyle Profile II: This profile consists of 52 questions that assess individuals' positive health-related behaviors in the areas of health responsibility, physical activity, nutrition, spiritual growth (formerly self-actualization in the first version of the profile), interpersonal relations, and stress management. The profile does not assess negative health-related behaviors.

Internal Locus of Control: Perception that one's well-being is a result of personal behaviors.

Informal Sources: Informal sources of advice or treatment included: spouse, parent, other relative, friend or neighbor, someone at work, Internet or self-help materials, religious authority (e.g., pastor), person at church (or other place of worship), God (prayer), and somebody or someplace else (e.g., weight watchers meetings).

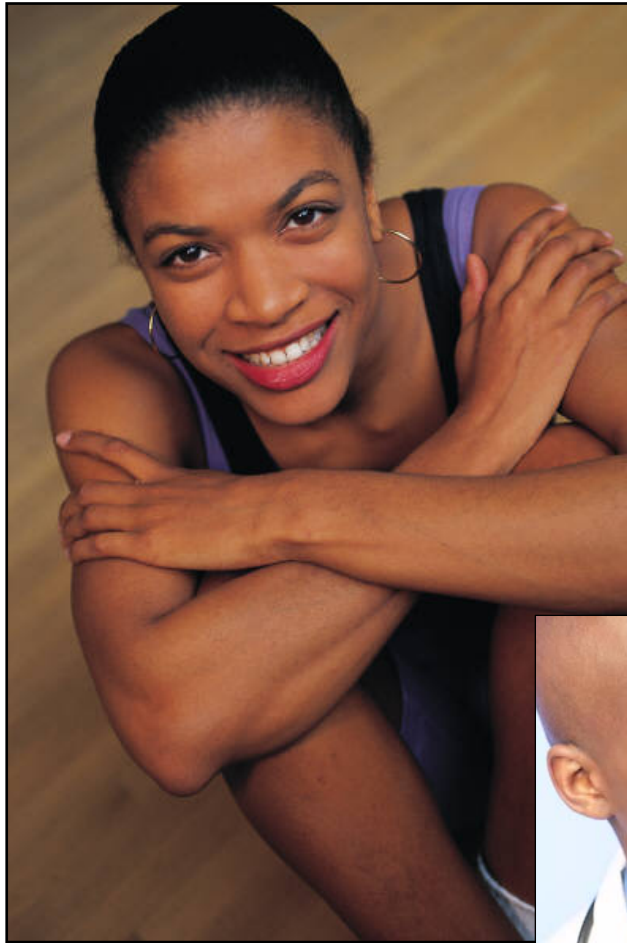
“n”: this is the sample size for each particular analysis. In other words, this number is the denominator and the number of respondents with a particular response is the numerator used to determine the percentage reported in the table or figure.

Powerful-Others Locus of Control: Perception that one's well-being is affected by doctors or powerful others.

Appendix A
Questionnaire

Health & Life-Style Survey

This questionnaire is about health issues that affect adults in Black Hawk County of African American heritage. The answers from all people who participate will be combined and used to help design better health programs. You will not be asked for your name, address, or other personal information that could identify you. You do not have to answer questions you don't want to answer. Completing the questionnaire should take about 25 minutes for most people, but the actual time depends on how much you want to say. Thank you.



1. How would you rate your physical health during the past 12 months?
 Excellent Very Good Good Fair Poor

2. How would you rate your emotional health during the past 12 months?
 Excellent Very Good Good Fair Poor

3. How often do you get information about health issues, illnesses, injuries, and disease prevention from each of these sources?

| How often do you get information from each of these sources? | Never | Sometimes | Often |
|---|--------------------------|--------------------------|--------------------------|
| TV | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Radio | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Newspapers or Magazines | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Books | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Pharmacist | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Brochures or Pamphlets From Doctor's Offices or Health Providers | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Internet | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Agency/Hospital Help Lines (Such as Ask-A-Nurse, Dial-A-Nurse) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Special Programs or Community Events | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A Doctor or Medical Provider | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Friends, Family, or Other People Who Are Not Health Professionals | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Health Food Store Clerk | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Programs, Sermons, or Classes through Church or Place of Worship | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Please write any other sources of health information you often use.

4. Check which topics you think it would be *appropriate* to have programs, classes, or instruction about in each of these places. (Please check **all** boxes that apply)

| Where would it be appropriate to have programs, classes, or instruction on these topics? | Schools (For Youth) | Community Centers/ Libraries/ Meeting Halls | Churches/ Place of Worship | Neighborhood/ Home Meetings | Clinics / Hospitals | Work-place |
|--|--------------------------|---|----------------------------|-----------------------------|--------------------------|--------------------------|
| Nutrition | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Exercise | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Doctor-Patient Relations | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Healing/Prayer Services | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| General Health Education | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Substance Abuse | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Violence/Aggression | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Emotional Health | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

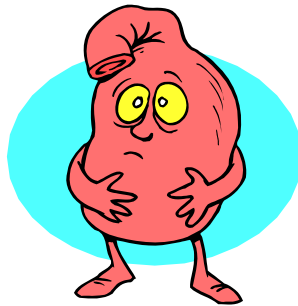
5. To deal with illness and to stay healthy, people may use a variety of health care providers. Check all of the following, if any, you used for your own health needs in the past 12 months.

- | | |
|---|---|
| <input type="checkbox"/> Acupuncturist | <input type="checkbox"/> Medical Doctor |
| <input type="checkbox"/> Chiropractor | <input type="checkbox"/> Pastor/Church elder/Rabbi/Imam |
| <input type="checkbox"/> Counselor/Therapist | <input type="checkbox"/> Psychiatrist/Psychologist |
| <input type="checkbox"/> Dentist | <input type="checkbox"/> Root Doctor or Spiritualist |
| <input type="checkbox"/> Hypnotist | <input type="checkbox"/> Other health provider: (Please list) _____ |
| <input type="checkbox"/> Massage Therapist [not massage parlors] | <input type="checkbox"/> Other health provider: (Please list) _____ |



6. Think about those times you thought you **might** have a serious physical illness or injury (e.g., persistent pain, cough, discomfort, fatigue, trouble sleeping, deep cut, or hard lump) but not something immediately life-threatening. In the left column, check the people or places you most often turned to *for advice*. In the right column, check the people or places you most often turned to *for treatment*. (Check **all** boxes that apply to you about these serious but not life-threatening illnesses/injuries.)

| Advice | Person or Place | Treatment |
|--------------------------|--|--------------------------|
| <input type="checkbox"/> | Family Member (e.g., spouse, child, parent, brother/sister, grandparent) | <input type="checkbox"/> |
| <input type="checkbox"/> | Friend or Neighbor | <input type="checkbox"/> |
| <input type="checkbox"/> | Someone at Work (e.g., Coworker, Supervisor, Employer) | <input type="checkbox"/> |
| <input type="checkbox"/> | Someone Who Attends Your Place of Worship (e.g., Church) | <input type="checkbox"/> |
| <input type="checkbox"/> | Religious Authority (e.g., Pastor, Priest, Rabbi, Imam) | <input type="checkbox"/> |
| <input type="checkbox"/> | God (Prayer) | <input type="checkbox"/> |
| <input type="checkbox"/> | Social Services/Welfare Agency | <input type="checkbox"/> |
| <input type="checkbox"/> | Internet or Self-Help Materials | <input type="checkbox"/> |
| <input type="checkbox"/> | Ask-A-Nurse or a Crisis Line | <input type="checkbox"/> |
| <input type="checkbox"/> | Doctor's Office/Clinic | <input type="checkbox"/> |
| <input type="checkbox"/> | Emergency Room (or call Ambulance) | <input type="checkbox"/> |
| <input type="checkbox"/> | Somebody or Someplace else (please describe:) | <input type="checkbox"/> |



If you have never had a serious illness or injury, please check here and then Go Directly To Question 8 on Page 5.

7. When you felt you may have had a serious physical illness or injury that was not immediately life-threatening, how much time **USUALLY** passed before you **sought** medical attention from a professional health care provider?

- | | | | |
|--|------------------------------------|--|---------------------------------------|
| <input type="checkbox"/> 1 day or less | <input type="checkbox"/> 4-6 days | <input type="checkbox"/> 3-4 weeks | <input type="checkbox"/> Never Sought |
| <input type="checkbox"/> 2-3 days | <input type="checkbox"/> 1-2 weeks | <input type="checkbox"/> More than a Month | Medical Attention |

8. This table contains several symptoms or problems people sometimes experience. At the top of the table, please circle whether you had each symptom or problem during the past 12 months.

| | Loneliness | Depression | Stress | Anxiety | Over or Under Eating | Trouble Sleeping | Anger/Short Temper | Alcohol Problem | Drug Problem | Not Wanting to See People | Family Problems | Physical Sickness/Injury |
|---|------------|------------|--------|---------|----------------------|------------------|--------------------|-----------------|--------------|---------------------------|-----------------|--------------------------|
| Did You Experience This Problem During the Past 12 Months? | No | No | No | No | No | No | No | No | No | No | No | No |
| (Please circle yes or no) | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |

For each symptom or problem that you checked "Yes," now check where you went for advice or treatment

| | | | | | | | | | | | | |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Did Not Seek Any Help | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Spouse | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Parent | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other Relative | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Friend or Neighbor | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Someone at Work (e.g., Coworker, Supervisor, Employer) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Emergency Room | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Doctor's Office/Clinic | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ask-A-Nurse or a Crisis Line | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Internet or Self-Help Materials | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Mental Health Center/Mental Health Institute in Independence | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Psychiatrist/Psychologist | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Social Services/Welfare Agency | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Religious Authority (Pastor, Priest, Rabbi, Imam, etc.) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Person who attends your place of worship (e.g., church) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| God (Prayer) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Somebody or someplace else (e.g., pastor's wife, AA group). <i>Describe who or where below the appropriate column.</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

9. This table contains statements about your present way of life or personal habits. Please respond to each item as accurately as possible, and try not to skip any items. Circle the frequency with which you engage in each behavior by circling: **N** for never, **S** for sometimes, **O** for often, or **R** for routinely.

| Way of Life or Personal Habits | Never | Sometimes | Often | Routinely |
|--|--------------|------------------|--------------|------------------|
| Discuss my problems and concerns with people close to me. | N | S | O | R |
| Choose a diet low in fat, saturated fat, and cholesterol. | N | S | O | R |
| Report any unusual signs or symptoms to a physician or other health professional. | N | S | O | R |
| Follow a planned exercise program. | N | S | O | R |
| Get enough sleep. | N | S | O | R |
| Feel I am growing and changing in positive ways. | N | S | O | R |
| Praise other people easily for their achievements. | N | S | O | R |
| Limit use of sugars and food containing sugar (sweets). | N | S | O | R |
| Read or watch TV programs about improving health. | N | S | O | R |
| Exercise vigorously for 20 or more minutes at least three times a week (such as brisk walking, bicycling, aerobic dancing, using a stair climber). | N | S | O | R |
| Take some time for relaxation each day. | N | S | O | R |
| Believe that my life has purpose. | N | S | O | R |
| Maintain meaningful and fulfilling relationships with others. | N | S | O | R |
| Eat 6-11 servings of bread, cereal, rice and pasta each day. | N | S | O | R |
| Question health professionals in order to understand their instructions. | N | S | O | R |
| Take part in light to moderate physical activity (such as sustained walking) 30-40 minutes 5 or more times a week. | N | S | O | R |
| Accept those things in my life which I cannot change. | N | S | O | R |
| Look forward to the future. | N | S | O | R |
| Spend time with close friends. | N | S | O | R |
| Eat 2-4 servings of fruit each day. | N | S | O | R |
| Get a second opinion when I question my health care provider's advice. | N | S | O | R |
| Take part in leisure-time (recreational) physical activities (such as swimming, dancing, bicycling). | N | S | O | R |
| Concentrate on pleasant thoughts at bedtime. | N | S | O | R |
| Feel content and at peace with myself. | N | S | O | R |
| Find it easy to show concern, love and warmth to others. | N | S | O | R |
| Eat 3-5 servings of vegetables each day. | N | S | O | R |
| Discuss my health concerns with health professionals. | N | S | O | R |
| Do stretching exercises at least 3 times per week. | N | S | O | R |
| Use specific methods to control my stress. | N | S | O | R |
| Work toward long-term goals in my life. | N | S | O | R |
| Touch and am touched by people I care about. | N | S | O | R |

| Way of Life or Personal Habits | Never | Sometimes | Often | Routinely |
|--|-------|-----------|-------|-----------|
| Eat 2-3 servings of milk, yogurt, or cheese each day. | N | S | O | R |
| Inspect my body at least monthly for physical changes/danger signs. | N | S | O | R |
| Get exercise during usual daily activities (such as walking during lunch, using stairs instead of elevators, parking car away from destination and walking). | N | S | O | R |
| Balance time between work and play. | N | S | O | R |
| Find each day interesting and challenging. | N | S | O | R |
| Find ways to meet my needs for intimacy. | N | S | O | R |
| Eat only 2-3 servings from the meat, poultry, fish, dried beans, eggs, and nuts, group each day. | N | S | O | R |
| Ask for information from health professionals about how to take good care of myself. | N | S | O | R |
| Check my pulse rate when exercising. | N | S | O | R |
| Practice relaxation or meditation for 15-20 minutes daily. | N | S | O | R |
| Am aware of what is important to me in life. | N | S | O | R |
| Get support from a network of caring people. | N | S | O | R |
| Read labels to identify nutrients, fats, and sodium content in packaged food. | N | S | O | R |
| Attend educational programs on personal health care. | N | S | O | R |
| Reach my target heart rate when exercising. | N | S | O | R |
| Pace myself to prevent tiredness. | N | S | O | R |
| Feel connected with some force greater than myself | N | S | O | R |
| Settle conflicts with others through discussion and compromise. | N | S | O | R |
| Eat breakfast. | N | S | O | R |
| Seek guidance or counseling when necessary. | N | S | O | R |
| Expose myself to new experiences and challenges. | N | S | O | R |

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10. This table is about the meals that you eat both at home and at restaurants (including dine-in and carry-out). Respond to each statement by circling: **N** for never, **S** for sometimes, **O** for often, or **R** for routinely.

| How often does each of these statements describe your meals? | Never | Sometimes | Often | Routinely |
|---|--------------|------------------|--------------|------------------|
| Meals prepared in the home generally are nutritious, low in fat, and healthy. | N | S | O | R |
| When I eat out, I choose food that is low in fat and cholesterol. | N | S | O | R |
| Meals prepared at home often include fried foods. | N | S | O | R |
| I eat out at fast-food places or pizza places. | N | S | O | R |

11. This table is about the lifestyle of your family. Please rate how strongly you disagree or agree that each statement is true of your family. By family, we mean family members who live in the same house, apartment, or dwelling.

If you don't live with your family, please check here and then Go Directly To Question 12 on Page 9.

| Do you strongly disagree, disagree, agree, or strongly agree that these statements are true about your family (that is, the family members you live with)? | Strongly Disagree | Disagree | Agree | Strongly Agree |
|---|--------------------------|-----------------|--------------|-----------------------|
| Family members encourage one another to eat healthfully. | 1 | 2 | 3 | 4 |
| Family members expect each other to be physically active. | 1 | 2 | 3 | 4 |
| Family time often involves watching television or playing video games. | 1 | 2 | 3 | 4 |
| Expressing emotions is encouraged in the family. | 1 | 2 | 3 | 4 |
| My family often relaxes, talks, and laughs together. | 1 | 2 | 3 | 4 |
| Family members share their stressful experiences with each other. | 1 | 2 | 3 | 4 |
| Family members are encouraged to seek health care early if a problem develops. | 1 | 2 | 3 | 4 |
| Protective health behaviors are openly discussed and encouraged (e.g., abstinence, condom use to prevent STDs, hearing/eye protection/sunscreen). | 1 | 2 | 3 | 4 |
| Personal responsibility for health is encouraged by the family. | 1 | 2 | 3 | 4 |
| Family members encourage each other to "keep going" when life is hard. | 1 | 2 | 3 | 4 |
| Family relationships are based on love and forgiveness of each other. | 1 | 2 | 3 | 4 |
| Family members focus on each other's positive qualities and encourage each other. | 1 | 2 | 3 | 4 |
| Worship or spiritual experiences are a regular part of my family life. | 1 | 2 | 3 | 4 |
| Family members model health habits for each other. | 1 | 2 | 3 | 4 |
| Disagreements are settled by talking rather than verbal abuse or physical violence. | 1 | 2 | 3 | 4 |
| My family prays together regularly. | 1 | 2 | 3 | 4 |
| In times of trouble, the family has friends to call on for help. | 1 | 2 | 3 | 4 |
| My family is connected with other families through its involvement with the neighborhood, community, or church (or similar institution). | 1 | 2 | 3 | 4 |

12. Some people believe that faith-based healings take place in today's age, but other people do not believe that people can be healed by the power of faith and prayer. Please rate the extent to which you disagree or agree with each statement.

| Do you strongly disagree, disagree, agree, or strongly agree with each of these statements about healing, injuries, illness, and faith? | Strongly Disagree | Disagree | Agree | Strongly Agree |
|--|--------------------------|-----------------|--------------|-----------------------|
| Diseases can be cured through prayer. | 1 | 2 | 3 | 4 |
| As a result of my confidence in God to perform such things, I believe in miracles. | 1 | 2 | 3 | 4 |
| God can heal people of their injuries and diseases. | 1 | 2 | 3 | 4 |
| Prayer is more important than modern medicine in healing people with diseases such as cancer. | 1 | 2 | 3 | 4 |

13. This table contains several statements about your health. Circle the number from 1 (*Strongly Disagree*) to 6 (*Strongly Agree*) that reflects how strongly you disagree or agree with each statement.

| How strongly do you disagree or agree with each health statement? | Strongly Disagree | | | | Strongly Agree | |
|---|--------------------------|---|---|---|-----------------------|---|
| If I become sick, I have the power to make myself well again. | 1 | 2 | 3 | 4 | 5 | 6 |
| Often I feel that no matter what I do, if I am going to get sick, I will get sick. | 1 | 2 | 3 | 4 | 5 | 6 |
| If I see an excellent doctor regularly, I am less likely to have health problems. | 1 | 2 | 3 | 4 | 5 | 6 |
| My health is determined by God's purposes. | 1 | 2 | 3 | 4 | 5 | 6 |
| It seems that my health is greatly influenced by accidental happenings. | 1 | 2 | 3 | 4 | 5 | 6 |
| I can only maintain my health by consulting health professionals. | 1 | 2 | 3 | 4 | 5 | 6 |
| I am directly responsible for my health. | 1 | 2 | 3 | 4 | 5 | 6 |
| My health is primarily controlled by God. | 1 | 2 | 3 | 4 | 5 | 6 |
| Other people play a big part in whether I stay healthy or become sick. | 1 | 2 | 3 | 4 | 5 | 6 |
| Whatever goes wrong with my health is my own fault. | 1 | 2 | 3 | 4 | 5 | 6 |
| When I am sick, I just have to let nature run its course | 1 | 2 | 3 | 4 | 5 | 6 |
| Whether or not I get a particular disease depends on God's plan. | 1 | 2 | 3 | 4 | 5 | 6 |
| Health professionals keep me healthy. | 1 | 2 | 3 | 4 | 5 | 6 |
| When I stay healthy, I'm just plain lucky. | 1 | 2 | 3 | 4 | 5 | 6 |
| My physical well-being depends on how well I take care of myself. | 1 | 2 | 3 | 4 | 5 | 6 |
| If I obey God's commands I am less likely to have health problems. | 1 | 2 | 3 | 4 | 5 | 6 |
| When I feel ill, I know it is because I have not been taking care of myself properly. | 1 | 2 | 3 | 4 | 5 | 6 |
| The type of care I receive from other people is what is responsible for how well I recover from an illness. | 1 | 2 | 3 | 4 | 5 | 6 |
| Whenever I don't feel well, I should pray. | 1 | 2 | 3 | 4 | 5 | 6 |
| Even when I take care of myself, it's easy to get sick. | 1 | 2 | 3 | 4 | 5 | 6 |
| When I become ill, it's a matter of fate. | 1 | 2 | 3 | 4 | 5 | 6 |
| I can pretty much stay healthy by taking good care of myself. | 1 | 2 | 3 | 4 | 5 | 6 |
| I recover from an illness because of God's provision. | 1 | 2 | 3 | 4 | 5 | 6 |
| Following doctor's orders to the letter is the best way for me to stay healthy. | 1 | 2 | 3 | 4 | 5 | 6 |

14. What is your religious preference? Do you consider yourself:
- Christian — Protestant (e.g., Baptist, Lutheran, Methodist, Pentecostal)
 - Christian — Catholic
 - Some other type of Christian (Please describe: _____)
 - Muslim
 - Jewish
 - Some other faith (Please describe: _____)
 - Atheist/Agnostic
 - No Religious Preference
15. In the past 30 days, on how many days (if any) did you attend a church or religious service, not including a special event such as a wedding or funeral?
- None 1 2 3 4 5 or More
16. How religious a person do you consider yourself?
- Very Religious
 - Moderately Religious
 - Slightly Religious
 - Not at all Religious
17. What is your gender?
- Male Female
18. How old are you? _____
19. Do you consider yourself to be Black or African American, even partially?
- Yes No
20. What is the highest level of education you have completed?
- Never Attended School or Only Attended Kindergarten
 - Elementary School (Grades 1-8)
 - Some High School (Grades 1-11)
 - High School Graduate or GED
 - Some College (But Did Not Earn a 4-Year Degree) or Technical School (e.g., AA)
 - College Graduate with a 4-Year Degree (e.g., BA, BS)
 - Graduate/Professional School with Advance Degree Completed (e.g., MA, MS, JD, MBA, MD, PhD)

21. Which of the following **best** describes your current employment status? (Check only 1 box.)

- Work full-time (35 + hours per week at one or more jobs)
- Work part-time
- Retired
- Homemaker
- Self-employed
- Student
- Out of work for less than 1 year
- Out of work for more than 1 year
- Unable to work



22. Have you been without health insurance for any part of the past 12 months?

- Yes
- No

23. Have you been without prescription drug coverage for any part of the past 12 months?

- Yes
- No

24. Which of the following best describes your current marital status?

- Married
- Divorced or Separated
- Living as Married
- Single, Never Married
- Widowed

25. During the past 12 months, how many children under 18 were living with you all or most of the time?

- None
- 1
- 2
- 3
- 4
- 5 or More

26. In terms of family heritage, where was your family from (e.g., Buxton, Mississippi Delta, Chicago, Detroit) before moving to this area? _____

27. What is your annual gross (before taxes) household income from all sources?

- Less than \$10,000
- Between \$10,000 and \$15,000
- Between \$15,000 and \$20,000
- Between \$20,000 and \$25,000
- Between \$25,000 and \$35,000
- Between \$35,000 and \$50,000
- Between \$50,000 and \$75,000
- \$75,000 or more

28. Do you have any physical, mental, or emotional problems that limit your daily activities?

- Yes
- No

Please write any other comments about health issues that you think are important, types of medical treatment services you would like to see in the county, or things that keep you from using medical treatment services currently available in the county:

Thank you for completing this questionnaire. Your answers will be combined with those of all the other people who completed questionnaires and will be used to help design better health programs. If you have questions about your participation in this survey, you can contact the primary investigator (Gene Lutz, Ph.D.) by calling 273-2105 or Tom O'Rourke of the Black Hawk County Health Department, as the sponsor of this research by calling 291-2413.

To be completed by research team members:

Interviewer Code:

Date Completed:

Location:

Format:

Read

Self-Administered

Appendix B
Data Collection Sites

A. Face to Face Interview Locations

| <u>Location</u> | <u>Number of Interviews</u> |
|---|-----------------------------|
| 0. Waterloo | 6 |
| 1. Tri-City Beauty in Waterloo | 6 |
| 2. Sookie's Restaurant in Waterloo | 1 |
| 3. Korner Kuts Barbershop | 11 |
| 4. Private Residence | 91 |
| 5. People's Clinic in Waterloo | 3 |
| 6. University of Northern Iowa (Lawther Hall) | 6 |
| 7. Mailback | 5 |
| 8. Hair Port Barber Shop | 4 |
| 9. Location Not Recorded | 3 |

B. Community Groups and Churches*

1. Gates Park Neighborhood Association
2. Good Shepherd Neighborhood Association
3. Maples Neighborhood Association
4. Common Grounds Neighborhood Association
5. Roosevelt Neighborhood Association
6. Unity Neighborhood Association
7. Lenion Missionary Baptist Church
8. Pilgrim's Rest Baptist Church
9. Mt. Calvary Missionary Baptist Church
10. Jubilee United Methodist Church
11. Gift of Life Missionaries
12. Deliverance Temple Church
13. Savior Baptist Church
14. Mt. Carmel Baptist Church
15. Antioch Baptist Church
16. Payne Memorial AME
17. Jehovah's Witness Newell Congregation
18. Rosehill Church of God in Christ

* Each was sent 5 questionnaires except the Unity Neighborhood Association which received 7.

Appendix C

Additional Tables of Findings

Note: Some tables contain values in parentheses. These values represent the percentages of respondents who provided a response to the item (i.e., the percentage based on the denominator that excludes those who choose not to give an answer to the item).

| | Excellent % | Very Good % | Good % | Fair % | Poor % | No Response % | Not Applicable % |
|--|----------------|----------------|-----------|-----------|-----------|------------------|------------------------|
| 1. How would you rate your physical health during the past 12 months? | 14 | 24 | 32 | 23 | 5 | 2 | 0 |
| | 14 | 25 | 32 | 23 | 5 | | |
| 2. How would you rate your emotional health during the past 12 months? | 10 | 15 | 38 | 28 | 6 | 2 | 0 |
| | 10 | 16 | 39 | 29 | 6 | | |

| | Never % | Sometimes % | Often % | No Response % | Not Applicable % |
|---|------------|----------------|------------|------------------|---------------------|
| 3. How often do you get information from each of these sources? | | | | | |
| TV | 12 | 57 | 29 | 2 | 0 |
| Radio | 29 | 54 | 15 | 2 | 0 |
| Newspapers or Magazines | 30 | 55 | 15 | | |
| Books | 17 | 54 | 27 | 2 | 0 |
| Pharmacist | 17 | 55 | 28 | | |
| Brochures or Pamphlets from Health Providers | 37 | 40 | 20 | 3 | 0 |
| Internet | 38 | 42 | 20 | | |
| Help Lines | 33 | 49 | 15 | 3 | 0 |
| Special Programs / Comm. Events | 34 | 51 | 15 | | |
| Medical Provider | 10 | 57 | 30 | 3 | 0 |
| Friends or Family | 10 | 59 | 31 | | |
| Health Food Store Clerk | 46 | 38 | 13 | 3 | 0 |
| Programs or Sermons through Church | 47 | 39 | 14 | 3 | |
| | 43 | 47 | 5 | 4 | 0 |
| | 45 | 49 | 5 | | |
| | 44 | 45 | 9 | 2 | 0 |
| | 45 | 46 | 9 | | |
| | 4 | 58 | 65 | 3 | 0 |
| | 4 | 60 | 36 | | |
| | 8 | 45 | 44 | 3 | 0 |
| | 8 | 46 | 46 | | |
| | 69 | 24 | 3 | 4 | 0 |
| | 72 | 25 | 3 | | |
| | 42 | 42 | 13 | 3 | 0 |
| | 43 | 43 | 14 | | |

| | Schools (For Youth) | | Community Centers / Libraries / Meeting Halls | | Churches / Places of Worship | | Neighborhood / Home Meetings | | Clinics / Hospitals | | Workplace | |
|---|------------------------|---------|---|---------|---------------------------------|---------|---------------------------------|---------|---------------------|---------|-----------|---------|
| | Yes % | No % | Yes % | No % | Yes % | No % | Yes % | No % | Yes % | No % | Yes % | No % |
| 4. Check which topics you think it would be <i>appropriate</i> to have programs, classes, or instruction about in each of these places. | | | | | | | | | | | | |
| Nutrition | 96 (98) | 2 | 88 (90) | 10 | 85 (86) | 14 | 77 (78) | 21 | 92 (93) | 7 | 85 (86) | 14 |
| Exercise | 96 (97) | 3 | 88 (90) | 10 | 82 (84) | 16 | 83 (84) | 15 | 91 (93) | 7 | 85 (86) | 14 |
| Doctor-Patient Relations | 76 (78) | 22 | 74 (75) | 24 | 71 (72) | 28 | 74 (75) | 24 | 89 (90) | 10 | 71 (72) | 27 |
| Healing / Prayer Services | 74 (75) | 24 | 71 (72) | 28 | 94 (96) | 4 | 79 (80) | 20 | 78 (79) | 21 | 71 (72) | 28 |
| General Health Education | 96 (97) | 3 | 88 (90) | 10 | 83 (84) | 15 | 82 (84) | 16 | 90 (92) | 8 | 85 (86) | 14 |
| Substance Abuse | 93 (94) | 6 | 91 (92) | 7 | 88 (89) | 11 | 88 (90) | 10 | 92 (93) | 7 | 88 (90) | 10 |
| Violence / Aggression | 91 (92) | 7 | 90 (92) | 8 | 85 (86) | 14 | 89 (90) | 10 | 88 (89) | 11 | 87 (88) | 12 |
| Emotional Health | 93 (94) | 6 | 92 (93) | 7 | 92 (93) | 7 | 88 (90) | 10 | 95 (96) | 4 | 91 (93) | 7 |

| | Used % | Did Not Use % | No Response % | Not Applicable % |
|--|-----------|------------------|------------------|---------------------|
| 5. Check all of the following, if any, you used for your own health needs in the past 12 months. | | | | |
| Acupuncturist | 4 | 94 | 2 | 0 |
| Chiropractor | 15 | 84 | 2 | 0 |
| Counselor/Therapist | 12 | 87 | 2 | 0 |
| Dentist | 57 | 42 | 2 | 0 |
| Hypnotist | 98 | 0 | 2 | 0 |
| Massage Therapist | 12 | 87 | 2 | 0 |
| Medical Doctor | 95 | 4 | 2 | 0 |
| Pastor/Church elder/Rabbi/Imam | 17 | 82 | 2 | 0 |
| Psychiatrist/Psychologist | 6 | 93 | 2 | 0 |
| Root Doctor or Spiritualist | 1 | 98 | 2 | 0 |
| Foot Doctor (Other) | 5 | 93 | 2 | 0 |
| Eye Doctor (Other) | 3 | 95 | 2 | 0 |
| Other: Miscellaneous | 4 | 94 | 2 | |
| | 5 | 95 | | |

Note: The “Other Health Provider” variables were rearranged to new variables “Eye Doctor (Other)”, “Foot Doctor (Other)” and “Root Doctor (Other)”. (see Figure 8)

| | Advice | | Treatment | | No Response | Not Applicable |
|--|--------|---------------|-----------|---------------|-------------|----------------|
| | Used % | Did Not Use % | Used % | Did Not Use % | % | % |
| 6. Think about those times you thought you might have a serious physical illness or injury. Check the people or places that you most often turned to for advice and those that you most often turned to for treatment. | | | | | | |
| Family Members | 83 | 15 | 36 | 62 | 2 | 0 |
| | 84 | 16 | 37 | 63 | | |
| Friend/Neighbor | 74 | 24 | 27 | 71 | 2 | 0 |
| | 75 | 25 | 28 | 72 | | |
| Someone at Work | 38 | 60 | 8 | 90 | 2 | 0 |
| | 39 | 61 | 8 | 92 | | |
| Someone at Place of Worship | 36 | 63 | 5 | 93 | 2 | 0 |
| | 37 | 63 | 5 | 95 | | |
| Religious Authority | 26 | 73 | 5 | 93 | 2 | 0 |
| | 26 | 74 | 5 | 95 | | |
| God | 72 | 26 | 16 | 82 | 2 | 0 |
| | 73 | 27 | 16 | 84 | | |
| Social Services/ Welfare Agency | 33 | 65 | 11 | 88 | 2 | 0 |
| | 34 | 66 | 11 | 89 | | |
| Internet/Self-Help | 26 | 73 | 6 | 93 | 2 | 0 |
| | 26 | 74 | 6 | 94 | | |
| Crisis Line | 40 | 59 | 10 | 88 | 2 | 0 |
| | 40 | 60 | 10 | 90 | | |
| Doctor's Office | 85 | 13 | 78 | 21 | 2 | 0 |
| | 87 | 13 | 79 | 21 | | |
| Emergency Room | 42 | 57 | 35 | 63 | 2 | 0 |
| | 42 | 58 | 36 | 64 | | |
| Somebody/Place Else | 1 | 98 | 0 | 98 | 2 | 0 |
| | 1 | 99 | 0 | 100 | | |

| | 1 Day or Less % | 2 – 3 Days % | 4 – 6 Days % | 1 – 2 Weeks % | 3 – 4 Weeks % | More than 1 Month % | Never | Never Had Serious Injury % | No Response % | Not Applicable % |
|--|-----------------------|--------------------|--------------------|---------------------|---------------------|---------------------------|-------|--|---------------------|------------------------|
| 7. When you felt you may have had a serious physical injury that was not immediately life-threatening, how much time USUALLY passed before you sought medical attention form a health care provider? | 23 | 27 | 10 | 6 | 7 | 4 | 1 | 19 | 4 | 19 |
| | 30 | 34 | 13 | 8 | 9 | 6 | 1 | 19 | | |

| | Experienced Problem | | No Response % | Not Applicable % |
|---|---------------------|------|------------------|---------------------|
| | Yes % | No % | | |
| 8. Circle whether you had each symptom or problem during the past 12 months | | | | |
| Loneliness | 52 | 46 | 3 | 0 |
| | 53 | 47 | | |
| Depression | 53 | 44 | 3 | 0 |
| | 54 | 46 | | |
| Stress | 79 | 18 | 2 | 0 |
| | 81 | 19 | | |
| Anxiety | 38 | 60 | 3 | 0 |
| | 61 | 39 | | |
| Over or Under Eating | 54 | 42 | 4 | 0 |
| | 56 | 44 | | |
| Trouble Sleeping | 43 | 53 | 4 | 0 |
| | 45 | 55 | | |
| Anger/ Short Temper | 51 | 46 | 4 | 0 |
| | 53 | 47 | | |
| Alcohol Problem | 10 | 87 | 4 | 0 |
| | 10 | 90 | | |
| Drug Problem | 10 | 85 | 4 | 0 |
| | 11 | 89 | | |
| Not Wanting to See People | 37 | 60 | 3 | 0 |
| | 38 | 62 | | |
| Family Problems | 47 | 49 | 4 | 0 |
| | 49 | 51 | | |
| Physical Sickness/Injury | 36 | 59 | 5 | 0 |
| | 38 | 62 | | |

| Health Promoting Lifestyles Profile – II | Never % | Sometimes % | Often % | Routinely % | No Response % | Not Applicable % |
|---|------------|----------------|------------|----------------|------------------|------------------------|
| 9. Indicate the frequency with which you engage in each behavior. | | | | | | |
| <u>• Health Responsibility Questions</u> | | | | | | |
| Report any unusual signs of symptoms to a physician or other health professional. | 11 | 46 | 29 | 12 | 2 | 0 |
| Read or watch TV programs about improving health | 11 | 47 | 29 | 12 | 2 | 0 |
| Question health professionals in order to understand their instructions | 11 | 59 | 31 | 9 | | |
| Get a second opinion when I question my health care provider's advice | 10 | 45 | 21 | 18 | 6 | 0 |
| Discuss my health concerns with health professionals | 11 | 48 | 22 | 20 | | |
| Inspect my body at least monthly for physical changes/danger signs | 21 | 53 | 14 | 10 | 2 | 0 |
| Ask for information from health professionals about how to take good care of myself | 21 | 54 | 14 | 10 | | |
| Attend educational programs on personal health care | 7 | 51 | 24 | 14 | 4 | 0 |
| Seek guidance or counseling when necessary | 8 | 53 | 25 | 14 | | |
| | 8 | 38 | 28 | 22 | 4 | 0 |
| | 8 | 40 | 29 | 23 | | |
| | 21 | 49 | 16 | 10 | 3 | 0 |
| | 22 | 51 | 17 | 11 | | |
| | 47 | 36 | 11 | 3 | 3 | 0 |
| | 48 | 37 | 11 | 3 | | |
| | 37 | 40 | 16 | 4 | 3 | 0 |
| | 38 | 42 | 17 | 4 | | |

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| Health Promoting Lifestyles Profile – II | Never % | Sometimes % | Often % | Routinely % | No Response % | Not Applicable % |
|--|------------|----------------|------------|----------------|------------------|------------------------|
| 9. Indicate the frequency with which you engage in each behavior. | | | | | | |
| <u>• Physical Activity Questions</u> | | | | | | |
| Follow a planned exercise program. | 38 | 39 | 15 | 6 | 2 | 0 |
| | 38 | 40 | 15 | 7 | | |
| Exercise vigorously for 20 or more minutes at least three times a week (such as brisk walking, bicycling, aerobic dancing, using a stair climber). | 31 | 43 | 12 | 12 | 3 | 0 |
| | 32 | 44 | 12 | 12 | | |
| Take part in light to moderate physical activity (such as sustained walking 30-40 minutes five or more times a week). | 49 | 29 | 9 | 10 | 2 | 0 |
| | 50 | 30 | 9 | 10 | | |
| Take part in leisure-time (recreational) physical activities (such as swimming, dancing, bicycling). | 27 | 33 | 24 | 14 | 2 | 0 |
| | 28 | 34 | 24 | 14 | | |
| Do stretching exercises at least 3 times per week. | 28 | 43 | 11 | 13 | 5 | 0 |
| | 30 | 45 | 12 | 14 | | |
| Get exercise during usual daily activities (such as walking during lunch, using stairs instead of elevators, parking car away from destination and walking). | 20 | 35 | 29 | 13 | 3 | 0 |
| | 20 | 36 | 30 | 14 | | |
| Check my pulse rate when exercising. | 68 | 22 | 4 | 3 | 3 | 0 |
| | 70 | 23 | 4 | 3 | | |
| Reach my target heart rate when exercising. | 50 | 32 | 8 | 6 | 4 | 0 |
| | 52 | 33 | 8 | 6 | | |

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| Health Promoting Lifestyles Profile – II | Never % | Sometimes % | Often % | Routinely % | No Response % | Not Applicable % |
|--|------------|----------------|------------|----------------|------------------|------------------------|
| 9. Indicate the frequency with which you engage in each behavior. | | | | | | |
| • Nutrition Questions | | | | | | |
| Choose a diet low in fat, saturated fat, and cholesterol. | 27 | 43 | 22 | 7 | 2 | 0 |
| Limit use of sugars and food containing sugar (sweets). | 27 | 44 | 22 | 7 | | |
| Eat 6-11 servings of bread, cereal, rice and pasta each day. | 29 | 44 | 17 | 7 | 3 | 0 |
| Eat 2-4 servings of fruit each day. | 30 | 46 | 17 | 8 | | |
| Eat 3-4 servings of vegetables each day. | 23 | 45 | 18 | 10 | 5 | 0 |
| Eat 2-3 servings of milk, yogurt, or cheese each day. | 24 | 47 | 19 | 10 | | |
| Eat only 2-3 servings from the meat, poultry, fish, dried beans, eggs, and nuts, group each day. | 12 | 43 | 30 | 12 | 3 | 0 |
| Read labels to identify nutrients, fats, and sodium content in packaged food. | 13 | 44 | 31 | 12 | | |
| Eat breakfast. | 17 | 40 | 24 | 15 | 4 | 0 |
| | 18 | 41 | 25 | 16 | | |
| | 19 | 40 | 26 | 12 | 3 | 0 |
| | 20 | 42 | 27 | 12 | | |
| | 7 | 29 | 37 | 24 | 4 | 0 |
| | 8 | 30 | 38 | 24 | | |
| | 23 | 43 | 18 | 13 | 4 | 0 |
| | 24 | 44 | 18 | 14 | | |
| | 12 | 49 | 18 | 16 | 4 | 0 |
| | 13 | 51 | 19 | 17 | | |

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| Health Promoting Lifestyles Profile – II | Never % | Sometimes % | Often % | Routinely % | No Response % | Not Applicable % |
|---|------------|----------------|------------|----------------|------------------|------------------------|
| 9. Indicate the frequency with which you engage in each behavior. | | | | | | |
| <u>• Spiritual Growth Questions</u> | | | | | | |
| Feel I am growing and changing in positive ways. | 4 | 30 | 46 | 17 | 3 | 0 |
| Believe that my life has purpose. | 4 | 31 | 48 | 17 | | |
| | 4 | 14 | 43 | 36 | 3 | 0 |
| Look forward to the future. | 4 | 14 | 44 | 37 | | |
| | 1 | 21 | 38 | 38 | 3 | 0 |
| Feel content and at peace with myself. | 1 | 22 | 39 | 39 | | |
| | 4 | 32 | 37 | 24 | 4 | 0 |
| Work toward long-term goals in my life. | 4 | 34 | 38 | 24 | | |
| | 6 | 29 | 32 | 30 | 3 | 0 |
| Find each day interesting and challenging. | 6 | 30 | 33 | 31 | | |
| | 5 | 33 | 40 | 19 | 3 | 0 |
| Am aware of what is important to me in life. | 5 | 34 | 41 | 20 | | |
| | 3 | 18 | 38 | 37 | 4 | 0 |
| Feel connected with some force greater than myself. | 3 | 18 | 40 | 38 | | |
| | 2 | 15 | 31 | 47 | 4 | 0 |
| Expose myself to new experiences and challenges. | 2 | 16 | 32 | 49 | | |
| | 4 | 36 | 31 | 24 | 5 | 0 |
| | 5 | 38 | 33 | 25 | | |

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| Health Promoting Lifestyles Profile – II | Never % | Sometimes % | Often % | Routinely % | No Response % | Not Applicable % |
|---|------------|----------------|------------|----------------|------------------|------------------------|
| 9. Indicate the frequency with which you engage in each behavior. | | | | | | |
| <u>• Interpersonal Relations Questions</u> | | | | | | |
| Discuss my problems and concerns with people close to me. | 5 | 46 | 38 | 9 | 2 | 0 |
| Praise other people easily for their achievements. | 3 | 29 | 43 | 23 | 2 | 0 |
| Maintain meaningful and fulfilling relationships with others. | 2 | 23 | 42 | 30 | 3 | 0 |
| Spend time with close friends. | 4 | 32 | 33 | 28 | 4 | 0 |
| Find it easy to show concern, love and warmth to others. | 2 | 29 | 31 | 34 | 4 | 0 |
| Find ways to meet my needs for intimacy. | 2 | 22 | 41 | 32 | 3 | 0 |
| Touch and am touched by people I care about. | 12 | 37 | 29 | 15 | 7 | 0 |
| Get support form a network of caring people. | 6 | 26 | 42 | 23 | 4 | 0 |
| Settle conflicts with others through discussion and compromise. | 3 | 38 | 32 | 24 | 4 | 0 |
| | 3 | 39 | 33 | 25 | | |

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| Health Promoting Lifestyles Profile – II | Never % | Sometimes % | Often % | Routinely % | No Response % | Not Applicable % |
|---|------------|----------------|------------|----------------|------------------|------------------------|
| 9. Indicate the frequency with which you engage in each behavior. | | | | | | |
| <u>• Stress Management Questions</u> | | | | | | |
| Get enough sleep. | 12 | 43 | 28 | 14 | 2 | 0 |
| Take some time for relaxation each day. | 13 | 44 | 29 | 14 | 2 | 0 |
| Accept those things in my life which I cannot change. | 8 | 46 | 24 | 20 | 2 | 0 |
| Concentrate on pleasant thoughts at bedtime. | 8 | 47 | 25 | 20 | 2 | 0 |
| Use specific methods to control my stress. | 2 | 26 | 47 | 23 | 2 | 0 |
| Balance time between work and play. | 5 | 27 | 48 | 23 | 3 | 0 |
| Practice relaxation or meditation for 15-20 minutes daily. | 4 | 38 | 40 | 15 | 3 | 0 |
| Pace myself to prevent tiredness. | 4 | 39 | 41 | 15 | 3 | 0 |
| | 14 | 43 | 32 | 8 | 3 | 0 |
| | 14 | 45 | 33 | 8 | 3 | 0 |
| | 12 | 35 | 40 | 10 | 3 | 0 |
| | 13 | 36 | 41 | 10 | 3 | 0 |
| | 29 | 39 | 22 | 7 | 3 | 0 |
| | 30 | 40 | 23 | 8 | 4 | 0 |
| | 24 | 45 | 20 | 8 | 4 | 0 |
| | 24 | 47 | 21 | 8 | | |

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| | Never % | Sometimes % | Often % | Routinely % | No Response % | Not Applicable % |
|---|------------|----------------|------------|----------------|------------------|------------------------|
| 10. How often does each of these statements describe your meals? | | | | | | |
| Meals prepared in the home generally are nutritious, low in fat, and healthy. | 12 | 52 | 20 | 11 | 4 | 0 |
| When I eat out, I choose food that is low in fat and cholesterol. | 13 | 55 | 21 | 12 | 4 | 0 |
| Meals prepared at home often include fried foods. | 33 | 47 | 12 | 8 | 4 | 0 |
| I eat out at fast-food places or pizza places. | 3 | 43 | 34 | 15 | 4 | 0 |
| | 4 | 45 | 35 | 16 | 5 | 1 |
| | 4 | 38 | 50 | 8 | | |

| Family Influence and Environment | Strongly Disagree % | Disagree % | Agree % | Strongly Agree % | No Response % | Not Applicable % |
|---|----------------------------|-------------------|----------------|-------------------------|----------------------|-------------------------|
| 11. Please rate how strongly you disagree or agree that each statement is true of your family. | | | | | | |
| • Health Responsibility | | | | | | |
| Family members are encouraged to seek health care early if a problem develops. | 1 | 7 | 34 | 15 | 2 | 41 |
| | 1 | 12 | 60 | 27 | | |
| Protective health behaviors are openly discussed and encouraged (e.g., abstinence, condom use to prevent STDs, hearing/eye protection/sunscreen). | 2 | 12 | 30 | 11 | 3 | 41 |
| | 4 | 22 | 54 | 20 | | |
| Personal responsibility for health is encouraged by the family. | 0 | 5 | 36 | 15 | 3 | 41 |
| | 0 | 9 | 65 | 26 | | |
| • Family Support | | | | | | |
| Family members model health habits for each other . | 4 | 12 | 27 | 12 | 4 | 41 |
| | 7 | 22 | 50 | 22 | | |
| Disagreements are settled by talking rather than verbal abuse or physical violence. | 2 | 18 | 25 | 9 | 4 | 41 |
| | 4 | 32 | 46 | 18 | | |
| In times of trouble, the family has friends to call on for help. | 2 | 3 | 21 | 29 | 3 | 41 |
| | 4 | 5 | 38 | 53 | | |
| My family is connected with other families through its involvement with the neighborhood, community, or church. | 4 | 5 | 15 | 31 | 3 | 41 |
| | 8 | 9 | 28 | 55 | | |

| | Strongly Disagree % | Disagree % | Agree % | Strongly Agree % | No Response % | Not Applicable % |
|--|---------------------|------------|---------|------------------|---------------|------------------|
| 11. Please rate how strongly you disagree or agree that each statement is true of your family. | | | | | | |
| <u>• Nutrition</u> | | | | | | |
| Family members encourage one another to eat healthfully | 4 | 10 | 32 | 11 | 2 | 41 |
| | 8 | 17 | 56 | 20 | | |
| <u>• Physical Activity</u> | | | | | | |
| Family members expect each other to be physically active | 4 | 8 | 38 | 7 | 2 | 41 |
| | 6 | 1 | 66 | 13 | | |
| Family time often involves watching television or playing video games | 4 | 6 | 32 | 14 | 2 | 41 |
| | 8 | 10 | 57 | 25 | | |
| <u>• Stress Control & Management</u> | | | | | | |
| Expressing emotions is encouraged in the family | 1 | 6 | 39 | 11 | 2 | 41 |
| | 1 | 10 | 69 | 20 | | |
| My family often relaxes, talks, and laughs together | 0 | 4 | 37 | 15 | 2 | 41 |
| | 0 | 8 | 65 | 27 | | |
| Family members share their stressful experiences with each other | 2 | 7 | 35 | 11 | 4 | 41 |
| | 3 | 14 | 64 | 20 | | |

| | Strongly Disagree % | Disagree % | Agree % | Strongly Agree % | No Response % | Not Applicable % |
|--|---------------------|------------|---------|------------------|---------------|------------------|
| 11. Please rate how strongly you disagree or agree that each statement is true of your family. | | | | | | |
| <u>• Family Resilience & Resources</u> | | | | | | |
| Family members encourage each other to "keep going" when life is hard | 1 | 1 | 24 | 31 | 3 | 41 |
| Family relationships are based on love and forgiveness of each other | 0 | 4 | 24 | 28 | 3 | 41 |
| Family members focus on each other's positive qualities and encourage each other | 2 | 9 | 22 | 22 | 4 | 41 |
| Worship or spiritual experiences are a regular part of my family life | 3 | 16 | 40 | 40 | 3 | 41 |
| My family prays together regularly | 5 | 14 | 29 | 51 | 3 | 41 |
| | 12 | 28 | 33 | 28 | | |

| | Strongly Disagree % | Disagree % | Agree % | Strongly Agree % | No Response % | Not Applicable % |
|---|---------------------|------------|---------|------------------|---------------|------------------|
| 12. Do you strongly disagree, disagree, agree, or strongly agree with each of these statements about healing, injuries, illness, and faith? | | | | | | |
| Diseases can be cured through prayer | 2 | 5 | 27 | 60 | 5 | 0 |
| | 2 | 5 | 29 | 64 | | |
| As a result of my confidence in God to perform such things, I believe in miracles | 2 | 1 | 21 | 73 | 4 | 0 |
| | 2 | 1 | 22 | 76 | | |
| God can heal people of their injuries and diseases | 2 | 0 | 24 | 71 | 4 | 0 |
| | 2 | 0 | 24 | 73 | | |
| Prayer is more important than modern medicine in healing people with diseases such as cancer | 3 | 15 | 25 | 52 | 5 | 0 |
| | 3 | 16 | 26 | 54 | | |

| Locus of Control | Strongly Disagree % | 2 | 3 | 4 | 5 | Strongly Agree % | No Response % | Not Applicable % |
|--|----------------------------|----------|----------|----------|----------|-------------------------|----------------------|-------------------------|
| 13. Statements that reflects your health | | | | | | | | |
| • Internal | | | | | | | | |
| If I became sick, I have the power to make myself well again. | 11 | 4 | 18 | 34 | 18 | 11 | 3 | 0 |
| I am directly responsible for my health. | 11 | 4 | 19 | 35 | 19 | 11 | | |
| | 3 | 2 | 6 | 11 | 25 | 50 | 4 | 0 |
| | 3 | 2 | 6 | 12 | 26 | 52 | | |
| Whatever goes wrong with my health is my own fault | 12 | 10 | 19 | 15 | 20 | 20 | 4 | 0 |
| | 13 | 40 | 20 | 16 | 21 | 21 | | |
| My physical well-being depends on how well I take care of myself | 3 | 4 | 4 | 12 | 38 | 35 | 4 | 0 |
| | 3 | 5 | 4 | 12 | 40 | 37 | | |
| When I feel ill, I know it is because I have not been taking care of myself properly | 5 | 11 | 16 | 19 | 24 | 21 | 4 | 0 |
| | 5 | 12 | 17 | 20 | 25 | 22 | | |
| I can pretty much stay healthy by taking good care of myself | 2 | 4 | 9 | 15 | 33 | 32 | 7 | 0 |
| | 2 | 4 | 9 | 16 | 35 | 34 | | |
| • Health God | | | | | | | | |
| My health is determined by God's purposes | 7 | 4 | 12 | 18 | 24 | 33 | 2 | 0 |
| | 7 | 4 | 12 | 18 | 25 | 34 | | |
| My health is primarily controlled by God | 6 | 4 | 7 | 10 | 23 | 45 | 5 | 0 |
| | 6 | 4 | 8 | 11 | 24 | 47 | | |
| Whether or not I get a particular disease depends on Gods plan | 27 | 15 | 12 | 12 | 16 | 11 | 6 | 0 |
| | 29 | 16 | 13 | 12 | 17 | 12 | | |
| If I obey God's commands I am less likely to have health problems | 13 | 18 | 12 | 18 | 12 | 20 | 7 | 0 |
| | 14 | 19 | 14 | 17 | 13 | 21 | | |
| Whenever I don't feel well, I should pray | 1 | 1 | 5 | 4 | 24 | 62 | 4 | 0 |
| | 1 | 1 | 5 | 5 | 24 | 64 | | |

| Locus of Control | Strongly Disagree % | 2 | 3 | 4 | 5 | Strongly Agree % | No Response % | Not Applicable % |
|--|----------------------------|----------|----------|----------|----------|-------------------------|----------------------|-------------------------|
| 13. Statements that reflects your health | | | | | | | | |
| I recover from an illness because of God's provision | 2 | 0 | 5 | 10 | 28 | 50 | 5 | 0 |
| | 2 | 0 | 5 | 11 | 30 | 53 | | |
| • Powerful Others | | | | | | | | |
| If I see an excellent doctor regularly, I am less likely to have health problems | 40 | 24 | 10 | 10 | 10 | 4 | 2 | 0 |
| | 41 | 25 | 10 | 10 | 10 | 4 | | |
| I can only maintain my health by consulting health professionals | 46 | 21 | 14 | 7 | 6 | 4 | 3 | 0 |
| | 47 | 21 | 14 | 8 | 6 | 4 | | |
| Other people play a big part in whether I stay healthy or become sick | 50 | 21 | 13 | 9 | 2 | 2 | 4 | 0 |
| | 52 | 21 | 14 | 9 | 2 | 2 | | |
| Health professionals keep me health | 34 | 15 | 24 | 15 | 3 | 4 | 4 | 0 |
| | 35 | 16 | 25 | 15 | 3 | 5 | | |
| The type of care I receive from other people is what is responsible for how well I recover from an illness | 43 | 18 | 12 | 14 | 4 | 4 | 4 | 0 |
| | 45 | 19 | 12 | 15 | 5 | 4 | | |
| Following doctor's orders to the letter is the best way for me to stay healthy | 14 | 23 | 23 | 17 | 11 | 7 | 5 | 0 |
| | 15 | 24 | 24 | 18 | 12 | 8 | | |
| • Chance | | | | | | | | |
| Often I feel that no matter what I do, if I am going to get sick, I will get sick | 29 | 15 | 23 | 17 | 9 | 6 | 2 | 0 |
| | 29 | 15 | 23 | 17 | 9 | 6 | | |
| It seems that my health is greatly influenced by accidental happenings | 38 | 21 | 21 | 11 | 5 | 1 | 3 | 0 |
| | 39 | 22 | 21 | 11 | 5 | 1 | | |
| When I am sick, I just have to let nature run its course | 18 | 15 | 25 | 17 | 12 | 5 | 7 | 0 |

| Locus of Control | Strongly Disagree % | 2 | 3 | 4 | 5 | Strongly Agree % | No Response % | Not Applicable % |
|--|---------------------|----|----|----|----|------------------|---------------|------------------|
| 13. Statements that reflects your health | | | | | | | | |
| When I stay healthy, I'm just plain lucky | 19 | 17 | 27 | 18 | 14 | 6 | | |
| | 56 | 19 | 11 | 6 | 2 | 2 | 4 | 0 |
| Even when I take care of myself, it's easy to get sick | 58 | 20 | 12 | 6 | 2 | 2 | | |
| | 16 | 13 | 22 | 18 | 16 | 10 | 4 | 0 |
| When I become ill, it's a matter of fate | 17 | 14 | 23 | 18 | 17 | 11 | | |
| | 22 | 22 | 26 | 15 | 6 | 4 | 4 | 0 |
| | 23 | 23 | 27 | 15 | 7 | 5 | | |

| | Christian Protestant % | Christian Catholic % | Some other type of Christian % | Muslim % | Jewish % | Some other faith % | Atheist/Agnostic % | No religious Preferences % | No Response % | Not Applicable % |
|--|------------------------|------------------------|--------------------------------|------------------------|---------------|--------------------|--------------------|----------------------------|---------------|------------------|
| 14. What is your religious preference? Do you consider yourself: | 94 | 2 | 0 | 1 | 1 | 0 | 0 | 2 | 1 | 0 |
| | 95 | 2 | 0 | 1 | 1 | 0 | 0 | 2 | | |
| | None % | 1 % | 2 % | 3 % | 4 % | 5 or More % | No Response % | Not Applicable % | | |
| 15. In the past 30 days, on how many days (if any) did you attend a church or religious service, not including a special event such as a wedding or funeral? | 21 | 7 | 7 | 12 | 11 | 40 | 2 | 0 | | |
| | 21 | 7 | 8 | 12 | 11 | 41 | | | | |
| | Very Religious % | Moderately Religious % | Slightly Religious % | Not at all Religious % | No Response % | Not Applicable % | | | | |
| 16. How religious a person do you consider yourself? | 26 | 46 | 24 | 2 | 2 | 0 | | | | |
| | 26 | 47 | 25 | 2 | | | | | | |

| | Male % | Female % | No Response % | Not Applicable % |
|--------------------------|-----------|-------------|------------------|------------------------|
| 17. What is your gender? | 42 | 58 | 0 | 0 |
| | 42 | 58 | | |

| | % | No Response % | Not Applicable % |
|----------------------|----|------------------|------------------------|
| 18. How old are you? | | | |
| Under 40 | 50 | 0 | 0 |
| | 50 | | |
| 40 through 50 | 23 | 0 | 0 |
| | 23 | | |
| 51 and Older | 27 | 0 | 0 |
| | 27 | | |

| | Yes % | No % | No Response % | Not Applicable % |
|---|----------|---------|------------------|------------------------|
| 19. Do you consider yourself to be Black or African American, even partially? | 97 | 0 | 3 | 0 |
| | 100 | 0 | | |

| | Never Attended % | Elementary School % | Some High School % | High School Graduate or GED % | Some College or Technical School % | College Graduate % | Graduate/Pr ofessional School % | No Response % | Not Applicable % |
|--|------------------------|---------------------------|-----------------------------|---|--|--------------------------|--|---------------------|------------------------|
| 20. What is the highest level of education you have completed? | 0 | 7 | 5 | 24 | 46 | 10 | 7 | 0 | 0 |
| | 7 | 5 | 24 | 46 | 10 | 7 | | | |

| | Work Full-time % | Work Part-time % | Retired % | Homemaker % | Self-employed % | Student % | Out of Work Less than 1 Year % | Out of Work More than 1 Year % | Unable to Work % | No Response % | Not Applicable % |
|--|------------------|------------------|-----------|-------------------------|-------------------------|------------------|--------------------------------|--------------------------------|------------------|---------------|------------------|
| 21. Which of the following best describes your current employment status? | 45 | 15 | 9 | 2 | 2 | 7 | 5 | 2 | 12 | 2 | 0 |
| | 46 | 15 | 9 | 2 | 2 | 7 | 5 | 2 | 13 | | |
| | | | Yes % | No % | No Response % | Not Applicable % | | | | | |
| 22. Have you been without health insurance for any part of the past 12 months? | | | 24 | 74 | 2 | 0 | | | | | |
| | | | 25 | 75 | | | | | | | |
| | | | Yes % | No % | No Response % | Not Applicable % | | | | | |
| 23. Have you been without prescription drug coverage for any part of the past 12 months? | | | 29 | 69 | 2 | 0 | | | | | |
| | | | 29 | 71 | | | | | | | |
| | | | Married % | Single, Never married % | Divorced or Separated % | Widowed % | Living as Married % | No Response % | Not Applicable % | | |
| 24. Which of the following best describes your current marital status? | | | 23 | 38 | 24 | 7 | 5 | 3 | 0 | | |
| | | | 24 | 39 | 25 | 7 | 5 | | | | |

| | None % | 1 % | 2 % | 3 % | 4 % | 5 or More % | No Response % | Not Applicable % |
|---|-----------|--------|--------|--------|--------|----------------|---------------------|------------------------|
| 25. During the past 12 months, how many children under 18 were living with you all or most of the time? | 54 | 25 | 9 | 7 | 2 | 0 | 4 | 0 |
| | 56 | 26 | 9 | 8 | 2 | 0 | | |

| | % | No Response % | Not Applicable % |
|---|----|------------------|------------------------|
| 26. In terms of family heritage, where was your family from (e.g., Buxton, Mississippi Delta, Chicago, Detroit) before moving to this area? | | | |
| Mississippi | 63 | 5 | 0 |
| | 66 | | |
| Some Other Place | 32 | 5 | 0 |
| | 34 | | |

| | Less than \$10,000 % | \$10,000- \$15,000 % | \$15,000- \$20,000 % | \$20,000- \$25,000 % | \$25,000- \$35,000 % | \$35,000- \$50,000 % | \$50,000- \$75,000 % | \$75,000 or More % | No Response % | Not Applicable % |
|---|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|--------------------------|---------------------|------------------------|
| 27. What is your annual gross (before taxes) household income from all sources? | 35 | 12 | 6 | 13 | 10 | 10 | 4 | 1 | 9 | 0 |
| | 39 | 14 | 6 | 14 | 11 | 10 | 4 | 1 | | |

| | Yes % | No % | No Response % | Not Applicable % |
|---|----------|---------|------------------|------------------------|
| 28. Do you have any physical, mental, or emotional problems that limit your daily activities? | 21 | 75 | 4 | 0 |
| | 22 | 78 | | |

Appendix D
Additional Comments

The following statement was included at the end of the questionnaire: “Please write any other comments about health issues that you think are important, types of medical treatment services you would like to see in the county, or things that keep you from using medical services currently available in the county.” The responses have been organized by theme below. Three font styles were used to allow the reader to distinguish the age group of the respondent providing each comment. ‘**Bold**’ font corresponds to respondents aged 51 years or older. ‘Regular’ font corresponds to respondents aged 40 through 50 years. ‘*Italic*’ font corresponds to respondents aged 18 through 39 years.

| Police |
|---|
| <p>Safer, healthy environment for young people to live (apartment complex).</p> <p>Better police protection for seniors’ apartment. Police need better safety protection to handle/deal with African American men</p> <p>Police dept need to learn how to handle African American women/children, men better.</p> <p>Racial profiling needs to be handle better.</p> <p>Police dept needs more diverse on the force.</p> <p>Need less visiting of the police officer in the city.</p> <p>(He) believes that police officers are racist toward African American males in Waterloo.</p> <p>Police officers need to stop the racial profiling.</p> <p>Waterloo needs some more African American officers.</p> <p>Police officers need to start treating blacks fair.</p> <p>Need more diverse on the police force.</p> <p>Stop racial profile for black males.</p> <p>Police need classes for how to African Americans.</p> <p>Diverse police force.</p> <p>Diversity on police force.</p> <p>Education for police force how to handle Black people, learn about how they live.</p> <p>More diverse on the police force.</p> <p>Police needs more classes to help them cope or deal with African American in the community.</p> <p>Police officers need to stop racism, picking African American males for no reasons.</p> <p>The police officers are very racist.</p> <p>Police officers need to be better prepared to handle African American males.</p> <p>African American males need more training for jobs after incarcerated.</p> <p>Law enforcement more minority on the force.</p> <p>Police officer should try to understand African American males better, so they can deal with them better.</p> <p>Police officer need to be trained better for Black males.</p> <p>Need more African American officers in Waterloo</p> <p>Police need to learn how to work with African American</p> <p>Too much visibility of police officers in the eastside of Waterloo.</p> <p>Police harassment need to be stopped.</p> <p>Black males are racial profiles by police officers in Waterloo.</p> <p><i>Police dept needs to remove the decals on the police cars that represent bad (things).</i></p> <p><i>Police dept need to be more diversified officers. They should have training on how to deal with African Americans.</i></p> <p><i>Police officer need to treat African American males with respect.</i></p> <p><i>More diverse on the police force</i></p> <p><i>Police need to be less racist, ignorant, more patient, understanding, and less prejudice.</i></p> |

Insurance and Prescription Concerns

More benefits for low-income families on Medicare for prescription.

More coverage on prescription drugs.

Benefits for those with limited prescription coverage.

I have limited health insurance and limited prescription. I would like to low-income dental plan for me. Vision plan for low-income, have it but need another one. Prescription plan would be nice so low-income family could afford it.

Prescription benefits as an issue, I am an elderly who pay over 60% of my income and live on a fixed-income.

Need lower prescription drug cost for elderly

Lower prescription.

Health benefits (for people with) low income.

Insurance rates are going up annually, and extend and quality of care continues to go drastically down. Even with insurance there are more and more exams and tests that are not covered. Nor does many insurance companies cover massage therapy, which is an alternative to taking so much medications, of someone suffers from arthritic and joint or even muscle.

Want lower prescription drug cost.

Lower prescription drugs for elders.

Pharmacy hours need to be 24-hour or longer hours.

Don't give you medicine if you don't have Medicare and everyone should get medicine and treatment.

More programs on drug rehabilitation

Better healthcare for elderly and especially prescription drug coverage.

Lower prescription drug.

Lack of insurance for males with no job or less paying job.

Lower insurance (cost) and make it easier to get health care.

Need better insurance coverage for young people (it needs to be affordable).

Housing

And better housing for young people.

More affordable housing.

Need more money for home improvements

House discrimination for African American need to decrease.

Community needs more apartment (nice) and affordable housing.

Need more funding to help single parents own their home.

More homeowner loans to assist single parent

More housing benefits for single mothers with low to mid range salary.

Need more town houses available for students and affordable.

Discrimination and Racism

Discriminate Blacks; take other nationalities in before taking Blacks.

The city of Waterloo is very racist.

Concern about discrimination with police dept and getting jobs.

Job, Employment and Business Opportunity

Black Hawk county needs more jobs for young people

Better jobs for young people, better training job,

Jobs for young people especially young black men.

Programs for young black men who have been incarcerated to gain job + health benefits

Help black men become more qualified for jobs.

More jobs, better pay.

Jobs for young people.

Need more jobs to keep young people around. System will go down without young people.

Young black males coming from prisoner should be able to set jobs and keep them.

Better access for disabled people to more jobs – better jobs.

More jobs.

Need more job in Black Hawk county

Black males who have been incarcerated need to be able to get jobs after they have done their time.

Need more Black own business in the community.

Need more companies for more jobs and better pay.

More jobs.

Higher paid jobs.

More jobs for young Black males.

Need more jobs.

Jobs for minority with better pay.

Separation of city such as geographic. Like to see more Black own business for example, run and operate by Blacks.

Working too much to survive... Today people have choices, can come home after 11 hours day and order fast food.

Better training for young African American males who come out of prison or half-way house.

Training for young single parent for school of jobs.

Need more jobs for young males with criminal records.

Better jobs for college graduates.

More jobs for graduates

More jobs with better benefits for mothers with children.

More jobs.

More opportunities for African American.

More jobs.

More jobs with good benefits.

Better paying jobs with benefits.

More jobs to keep college graduates here.

Need better jobs for college graduates here in Black Hawk County.

Economic Concern

Inflation (has) bad (effects) depending on location. Prices vary too much.

Child support cost is too high to survive.

Taxes are too expensive for a small town.

Community-Social Services

Drug awareness for youth.

Better recreational facilities for young people

Black Hawk needs better transportation to go to daily activities such as (dept. store, bill paying on monthly bases).

Social services such as food stamps for men who have been incarcerated to help them get on the feet.

Veteran transportation needed because service has been cut and times need improving.

Community needs more services that take elderly to the doctor's office for their appointments.

(African American) Kids need a skate rink in the community (Waterloo) for exercise.

Need more tutoring for young kids for improving in education and taught to learn how to play different sports.

Community center for young and old.

Better access to public transportation.

Need more drug awareness in community.

Kids need more activities to keep them busy.

Young people need other positive things in the community (more often).

Need more community services for African American and other races for young teenagers.

More Blacks in community to get together and help one other.

Places for kids to go: recreation.

Need more constructive things for young children.

Need to create better training facilities for African American males.

Need to find more positive things for young black males.

Black males are left out; need more positive roles models to help the males.

Streets need fixing (repair) in Waterloo.

AIDS awareness program

I like to see young people promoting health services to get youth involved in taking better care of them.

Classes to get young and older people familiar with computers so they could use the internet to find cure and doctors for a particular diseases or illnesses.

Better child care for kids.

I would like to see more health conventions in the county encouraging people to take care of themselves, as well as ways to teach children how to take care of themselves now before they develop future problems.

Better child care providers for young low-income mothers.

Religion Issues

God is most important. Listen to her on KBBG 1st and 3rd Sunday 8:00 a.m.

Have churches come together in the community for positive and negative issues.

Unity among African American churches.

| School |
|--|
| <p>School system should be (better) Need better educational system. Religion at school is needed. The school system in Waterloo needs improving especially in the middle school setting. <i>Better school system than now, for example, better teacher with interest to teach, and better teacher overall.</i> <i>Bad teaching efficiencies and bad school facilities.</i> <i>School system needs improvements.</i> <i>Under paid teacher in high school. Children suffer this less beneficial error.</i> <i>School system in Waterloo need more funding.</i> <i>School system needs more training for teachers and kids needs to know Black history.</i> <i>Kids need more music classes in the school and additional music programs for youth to enhance and appreciate music.</i> <i>More funding for Black children to get a better education.</i> <i>Better teachers in Waterloo schools.</i> <i>More young people going to school (college K-12)</i></p> |
| Clinic and Hospital Staff and Policies and Facilities |
| <p>Organ donor facility needed. Leave pharmacies open longer – 24 hours. Pharmacist and service providers need to be more helpful + friendly. <i>Doctor is not thorough, does not listen to what she really feels, doctor treats her as if she doesn't know what she is talking about, doesn't follow up on her and doesn't pay attention to her family medical history, which makes a big difference for her. Her grandmother died before the age of 40.</i> <i>Says unfortunately she goes to her</i></p> |
| Miscellaneous |
| <p>A lot of things to be changed but doesn't feel can do anything about it. People should be more aware of the foods they take and put in their bodies. Eat healthier. Awareness over the news for parents about their kids. "Parents, where are your kids?" <i>Disagree of the casino and its location.</i></p> |