

Focus Group Report

Submitted by

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INTRODUCTION

Broward Regional Health Planning Council, Health Foundation of South Florida and Nova Southeastern University (NSU) fund the Broward County Nutrition and Fitness Project. The goal of this project is to conduct a thorough assessment for community services and community needs on Nutrition and Fitness. Through the use of well-planned research methods and procedures, researchers at NSU will create an inventory of all services available related to nutrition and fitness for Broward County, assess what is currently being done in Broward County to address the following: community need, current services, and gaps in existing services as they relate to nutrition and fitness. Further, national resources available to the citizens of Broward County will be cataloged along with the mechanisms to access those services.

Exploratory focus groups were held on the campus of NSU during consecutive Saturdays during the month of January 2006. These focus groups were comprised of Broward County residents. The current study utilizes qualitative research methods to obtain a rich description of attitudes, beliefs, and experiences of Broward County residents. In these focus group's, the needs, beliefs, experiences, fears, and vocabulary of the participants will be detailed, as well as demographic and socio-cultural characteristics of the target population as they pertain to nutrition and fitness. Focus groups serve to explore the perceived risks and concerns associated with nutrition and fitness issues and also provide a richer understanding of the target populations perspectives on what services and resources are currently available to them and what those resources may be lacking. It is intended that these results will be able to assist public health professionals in developing culturally appropriate programs, health messages, and other communication efforts that aim to educate in the areas of fitness and nutrition.

DESIGN & METHODS

The current study is the second phase of a larger study that seeks to conduct a thorough assessment for community services and community needs on Nutrition and Fitness in Broward County, FL. Flyers were distributed at NSU clinics looking for volunteer participants. Interested participants contacted the NSU researchers by way of telephone call or e-mailed to gain additional information about the research study (see attached Flyer). Those who agreed to take part in the focus groups were given informed consent forms prior to beginning each focus group. The measures investigators took to minimize potential risks to confidentiality are described below:

- (a) During the focus groups respondents were asked to only use first names in the context of their discussions so that individuals are not identifiable in the resulting transcripts and participants will not be asked about any information that will pertain to public health identifiers.
- (b) There was no mechanism for matching participant comments with names since names will not be a part of the transcribed tapes generated during the formative research.
- (c) Transcription of the focus group tapes are performed by the Institute for Child Health Policy staff.
- (c) All data are secured in a locked fireproof file cabinet (i.e., tapes, transcripts, questionnaires, and other records). Focus group tapes are destroyed after transcription and transcripts will be stored for up to 7 years. There will be no identifiable names attached to any transcripts. In addition, only three individuals (the two PIs and the project coordinator) have access to these files.
- (e) The participants were given a \$25 gift certificate for their participation in the focus groups. Prior to distribution of certificates participants were asked to provide a signature with no other identifying information on the informed consent form.

DATA COLLECTION

Four focus groups were convened with Broward County residents during January 2006. Each discussion was facilitated by a research professional with training and experience in conducting focus groups. The facilitator followed a focus group guide with a standard introduction and opening question, discussion topics, and probes, although the order of discussing the topics varied across focus groups. Focus group discussions included, knowledge of nutrition and fitness, personal views and experiences surrounding nutrition and fitness, and solutions for improving nutrition and fitness. Each focus group discussion was audio-recorded, and notes were taken on key issues that arose during the discussion. Respondents were offered a brief break with light refreshments approximately half way through the discussion. Each focus group was subsequently transcribed verbatim. At the end of each focus group respondents completed a brief questionnaire that measured demographic characteristics as well as attitudes, beliefs, experiences, and knowledge about nutrition and fitness. To preserve the qualitative focus of this phase of study we opted to have respondents complete the questionnaire after the focus group had been conducted thus maintaining the integrity of the qualitative data (thereby minimizing the possibility that items on the questionnaire would shape how respondents discuss the topic). Respondents were offered a \$25 gift certificate incentive. This study was conducted with the approval of the Nova Southeastern University Institutional Review Board.

DEMOGRAPHICS	Count	Percent
Gender (N=38)		
Male	10	26%
Female	28	74%
Marital Status (N=37)		
Single (never married)	22	59%
Married	8	22%
Divorced	5	14%
Widowed	1	3%
Separated	1	3%
Work for Pay (N=36)		
Yes	23	64%
No	13	36%
Average Number of Hrs/Week (N=20)		
12-35 hours	3	15%
36-40 hours	12	60%
41 or more	5	25%
Ethnicity / Race (N=37)		
African American / Black	8	22%
American Indian / Pacific Islander	0	0%
Asian	2	5%
Biracial	0	0%
Caucasian / White	19	51%
Hispanic	6	16%
Other	2	5%
Approximate Household Income (N=30)		
Less than \$30,000	14	47%
\$30,000 - \$74,999	9	30%
\$75,000 or more	5	17%
(Unknown or refused)	2	7%
Years of School Completed (N=28)		
5 years or less	3	11%
7-12 years (high school level)	4	14%
13-16 years (college level)	10	36%
17-18 years (masters level)	6	21%
19 or more (doctoral level)	5	18%

DATA ANALYSIS

Data was analyzed according to procedures outlined in Patton (2002). Once a structure had been agreed upon among the three members of the analysis team, the data were coded, and the codes were entered into *Atlas.ti*, a qualitative software package. Each focus group transcript was read carefully for the purpose of creating a coding structure and lexicon that would provide a meaningful framework to capture respondents' attitudes, beliefs, and experiences (see attached). Next, the analysis team identified the codes that were relevant to each research question and analyzed the data separately by research question. This process involves reading the coded text and identifying salient themes that were relevant to each research question. Research questions with target group population direct quotes are presented in the tables below.

RESULTS

What are the major perceived barriers to exercising posed by Broward County residents?

"A lot people do not think that they have time to do it, that they have a place to do it, they don't think it's for them, they tried it before and it hasn't worked."
"I think in the past 10 to 20 physical fitness has been excluded from the school system it's not a part of their daily schooling an importance has gone away so the kids aren't learning the skills they need to participate in leisure sports so they go and watch a softball game instead of playing a soft ball game because they don't know how to hit a ball."
"I think another barrier might be cost some people don't know they can just work out or they don't have the motivation to workout at home and they prefer to workout at a gym but going to the gym costs money or going to take a class costs money so between motivation and just cost to exercise."
"I think there's kind of like a clique-ism in the area where the cities may not want to share their resources with the county and the county parks systems may not want to share their resources with the educational systems and maybe there's not enough people to bring the children to these areas to participate in these activities, swimming or tennis or whatever else that may be available so there's not that networking necessary between facilities that are available infrastructure and the educational system for the children."
"I decided on a new goal this year too, eat better, exercise more, I haven't started it today the 7 th of January. I just can't find the time, you know I do work two jobs and it's very difficult for me."
"I really enjoy a class and I find I can't find a class that fit my needs.... I've gone to different gyms and all they have is these high tech things that are no interest to me nor can my body endure it... I want to take a nice class with people, but there just nothing to fit my needs and umm the cost, after a few months I find that the cost is way to high and there sales tactics, sorry, are horrible."
"People just have certain conditions that sometimes don't know either the proper way of exercising, they don't know what they can and cannot do or there is laziness involved in it, but there is also the need for motivation, and if they had the proper knowledge."
"I feel that we're in time that you know even if you don't want to work out, it's almost ok because now we have plastic surgery."
"In my particular case I know that, that didn't work and umm so it's health, motivation is a big thing and will power is a big thing."

What are the major perceived barriers to exercising posed by Broward County residents?

<p>"Why isn't there a public gym you know like, if you're restricting access to something that apparently is vital to being fit and healthy, why would you make it accessible to only a small population."</p>
<p>"Well for me umm, as exercise is concerned, I have a health issue, umm before I use to go to gym, I love to walk, but right now I have a health issue so I can't do either one, but I try to monitor what I'm eating but I don't think it help, cause the medication I'm taking put some weight on me so that what uh my problem is right now and I'm very conscious about it."</p>
<p>"And the traffic is unbelievable, umm I live directly, I have a, I own my own house but right next to us is a relatively large apartment complex and the traffic in out of that apartment complex is unbelievable, I mean it's constant, and maybe there's not enough road in and out of it or something but the children, you wouldn't want your child outside, you really wouldn't, there may be area for them to play in, but for them to get to that area within that apartment complex they would have to cross over these roads and so forth and if they are under the age of 10, you wouldn't want your child out there."</p>
<p>"But you know what, at different part, times in my life when I was heavier I would never walk into a (Right) Club elite, I don't care where it was; I would never walk in until I was lost weight and I was comfortable, and that's a really big thing with clubs."</p>
<p>"I think another barrier might be cost some people don't know they can just work out or they don't have the motivation to workout at home and they prefer to workout at a gym but going to the gym costs money or going to take a class costs money so between motivation and just cost to exercise."</p>
<p>"I personally like, my biggest thing the reason why I don't go the gym, it's so bad to say but whatever, umm I get embarrassed sometimes, like I don't like running if I know that the gym is crowded and like I know everyone that I see there like there's good looking people like I see them out like you know in the gym I don't want to be spoken to, and I'm think about that in hind sight and when I was younger we had gym in the morning and we had to run and we had to wear these outfits and like I was friends with everyone like but no you don't want to be sweating and I so that could be like forcing it when I was younger, you know obviously I think you know that everyone is looking at me, when no one care about anyone when they're at the gym."</p>
<p>"Going back to what name mentioned said, in the north, south central why doesn't that complex have something there, why doesn't my little community, my little small community, I have to go outside of it to get what I want or what I need. It's not completely close, it's not within our circle work, you know whatever that circle is were we spend our time, it's not convenient for us we don't, that's maybe that's where the learning needs to be too."</p>

What are the major perceived barriers to eating healthy posed by Broward County Residents?

"The issues that are involved with eating healthy have been clouded because there are so many diets for reducing weight, diets for building muscle tissue and so..."
"In my opinion, eating healthy is eating in way that maximizes from food choices maximizes your health whether.... But for the average consumer it's really confusing because of food labels that probably even more confusing than what the media states about the various diets."
"I think that the education is lacking, we're not educating our kids, we're not educating our kids, not only on fitness and nutrition.... We're educating them in passing the FCAT."
"It's too convenient to eat, unhealthy, you can always go to McDonald's or Subway when it's real convenient but to actually eat something healthy to go to the grocery store to get something you can cook up that's going to be real healthy for you that's just too much effort."
"Junk food is cheaper."
You now there is so many different kinds of diets you hear about this one and you really don't know which is the best for you... its like you know you want to do something but who do you listen to."
"Everything to be healthy is pricey these days."
"Umm, I love my fruits and vegetable but the healthy stuff is harder to get than the junk food stuff, if you're in a hurry it's easier to have French fries than a bake potato."

What are the major perceived barriers to eating healthy posed by Broward County Residents?

"Time I think is umm is a matter too, because companies now just give you like an half an hour for lunch, what can you grab in an half-hour for lunch you can just grab anything put in your mouth and you go back quickly."
"I think a lot of it does come down to cost and umm I even think about poor families that umm they're not unhealthy because they're uneducated it's because they, that's what they can afford and umm especially if you know you're on government assistance."
"I think for me the big barriers are the availability of something nutritious that s affordable, that's quick."
"That's the thing you need to have healthy choices, healthy foods cheaper and that's the biggest barrier."
"I think a lot of people that I work with or that I'm around they equate eating healthy with a diet or my gosh I have change my whole eating habits and they don't realize that cutting the extra coffee or soda or not having the third piece of chocolate cake or something like that that's eating healthier or a lot of people may say that I'm too busy can't shop the right way or I don't have the time to cook and things like that."
"I was always taught that eating healthy was from when I was younger, was kind of following the food pyramid and making sure you have the fruit and vegetables and at least a servings of each that was eating healthy but now that I' m older I don't follow that when I was younger it was a lot easier. But like you were saying time constraints, you don't have the time to make that you get each one of the food groups in, especially with other things on your mind and then having to cook and then with time it's a major problem."
"...You don't know what is what, you compare two things at the supermarket and knowledgeable consumer and still leave extremely confused as to which one is actually better for my body and food labels are so confusing and one company may follow one set of standards and another company may follow another set, so they both can say low carb but have totally different meanings."
"I think that food labels and food companies lie to you and that they say less fat or new no fat product or something like that when in reality there may be one percent difference out of 15 grams or something like that that is really not that significant and it's fooling you To think that this is the new thing and I need that like yogurt; and yogurt is good for you but depending upon which brand you choose, it's difficult to really get what's best."

What are the major perceived barriers to eating healthy posed by Broward County Residents?

"I think for a lot of adults they don't understand about nutrition and health, and they don't realize, they're on a diet, they don't realize how horrible that diet is that they're on, that's a whole other area I could talk about that forever but, I think it's, we just a lot of adults are ignorant when it comes to nutrition and health, they think there're doing something good for their body when in fact they're making things worse and making it more difficult to lose weight or to be healthy."

"That's the thing you need to healthy choices, healthy foods cheaper and that's the biggest barrier because have you a had a bag of salad that's a dollar, fruits that are like thirty-nine cents a pound then you're going to get that as oppose to you know a bag of chips that is two fifty you know what I mean like."

How do personal values and beliefs surrounding eating healthy and participating in physical activity influence the decision of whether to engage in a healthy lifestyle?

Values and Beliefs on Nutrition

"In my opinion, eating healthy is eating in way that maximizes from food choices maximizes your health whether that's some red meat or no red meat or whatever food choices you make to optimize your health and for me that's vegetarianism that's my choice."

"Fine, my downfall is beer, I drink beer on the weekends but I don't want to stop (laughter)...I eat really good all the rest of the time... I haven't figured out how not to be able to have a couple of beers, if I don't then I my weight goes down a little, when I do my weight goes up a little."

"I also participate in yoga and I'm into ballet, and it helps me to try to focus on eating right, because my teacher emphasizes the importance of putting good things into your body so that you could be able to that energy."

"Well normally I like to pick foods that I know are considered healthy...I go on a detox diet, which I cleanse my body, I don't eat red meat, I don't eat refined umm, umm refined sugars I don't eat anything that contains caffeine or alcohol or anything that comes in a can so pretty much is to purify your body of anything that has preservatives or anything like that and that if people did that everyday, you would have so much more energy and your skin would look so much better, and you'll feel so much better..."

"I just feel like I have all this energy and just wanting to get my body healthy, cause this is the only body we get, this is the one shot we get to stay alive and as healthy as we can so might as well take care of it."

" I love my fruits and vegetables and I prepare them appropriately."

"Umm also the fear of undue unnecessary suffering, uh I had a friend, have a friend and she's obese and all things, health problems that she has because of this condition, you see the pain and the suffering not only physical but emotional suffering too, it makes you not want to go down that road."

"I think it has a lot to do with self-respect, if you respect yourself and you love yourself, you're going to do what to take good care of yourself."

"The issues that are involved with eating healthy have been clouded because there are so many diets for reducing weight, diets for building muscle tissue and so forth yes we have a general idea for what we should no eat but generally it's what I call the three S's-Starches, Sugars and Um, there is one I can't remember right now, but it's not a clear plan in our minds anymore, maybe for the older generation, it's not clear anymore but for the younger generation it may be clear but they just don't practice it, there is a lack of discipline in their lives."

"Uh, I cook most of my meals from basic ingredients; don't buy anything in boxes really. Exercise maybe a half hour five days a week; tend to eat more smaller portions, more often throughout the day then oppose to larger meal. That's about it."

How do personal values and beliefs surrounding eating healthy and participating in physical activity influence the decision of whether to engage in a healthy lifestyle?

Values and Beliefs on Physical Activity
"I think some do it just to stay healthy and stay fit."
"Because they enjoy it."
" I believe in lifestyle exercise like sweeping is a exercise, mopping the floor requires effort, vacuuming or washing windows or things like that those are just lifestyle, washing a car those are lifestyle activities that are actually exercise."
"I think for me, only when I get sick do I realize how important exercise can help me, when I am healthy."
"It's really internal motivation to keep; it's about you, your body and keeping you healthy."
"I think it's to relieve stress, umm I you know whether you're in college and you're dealing with exams or just all your insecurities that you deal with you go for a long walk and everything seems to go out of your mind."

How do family values and beliefs influence the decision of whether to engage in a healthy lifestyle?

"I think that that whole traditional family picture being changed and Mom was the nutritionist in the family in the old days and that's not there anymore. And Mom may have even had some limited number of nutritional training in her home ec class."
"I won't let my child go outside and play in those parks."
"For nutrition I'm a vegetarian, umm I have been a stay at home mom for the last seven years.... My three children can look at every meal they have and tell you what part of the food pyramid it comes from. And identify what is junk food from what is healthy food. Umm I cook almost every meal they eat umm, they eat, they are allowed to eat out twice a week and even then, we try to still move towards healthy choices."
"For me it's having an older mother whose never exercising and stuff and a lot of problems today, I feel if she was more active and umm that we wouldn't have as many and so I mean because like I said I have a mom umm I don't want to age and have aches and pains knowing that I could have done something about it."
"And like my grandma umm eat like, no it's something like that, umm she has diabetes and I sure as anything don't want to catch diabetes because of obesity."
"If I don't kick my three grandchildren outside on Sunday, they stay inside (Right) I tell them to go out, and they, and I mean they're out, and once they go out they're out And they're not like back in. (Right)"

How do family values and beliefs influence the decision of whether to engage in a healthy lifestyle?

"I agree that the schools and society has to be involved and informed and umm and feed the society, it also comes from home, lack of time, mom and dad they're working they just stop by Mc Donald's and that's going to be their dinner, they grab the phone order take out, chicken wings whatever garbage there is out there, just pay and that's there daily meals sometimes people do not cook at home or if they do they grab the TV meals or TV dinners whatever which is another fast food frozen, unfrozen when you open it, but there's nothing in it that's worth it so kids grow thinking that cooking is not important, nutrition is not important, they have that information at school, they reinforce it at home, when they get to teenagers, they you know go to adults that's what they know and they have pass the key. They go from obese teenagers to obese adults to having obese children again and that's a cycle that we have to break like name mentioned was saying, kids do not eat vegetables because at home they don't, if you fed them from the beginning to the middle umm Gerber you know foods, that's junk food for kids. Moms do not have the time, give the time to cook a decent, umm boil a potato, and mash it up to put something decent in the kids mouths, it comes directly from home, it's reinforced at school and the cycle starts all over and over again. So as far as if we could do something in our society and the schools could be, we could be stronger even as far as to you know ask them, feed them better, but time in this society itself has made us like this."

"I've always had the mind set that I should be active, because that's how I was raised, my mom danced and I you know dancing, swimming, do gymnastics you know all sort of active things from childhood, umm so that has always been a part of my life, umm I think as an adult I've always done walking."

"At this point I'm glad my parents were so concerned with me eating healthy and it carries over now."

"The importance of family at home setting that tone for a proper nutrition and exercise. I have a friend and I really admire that family a lot, just the way the eat you know, and she tell me that when her kids were smaller, she trained them to eat fruits and vegetables, eating proper even that they are in their teens, early twenties those the boys still and girls still eat healthy. It's good to see they snack on fruits and vegetables and as a results of that they're healthy, she says she rather spend the money on the food, then the doctor's bill."

"If mom provides lunch from home they're eating fruits and all different healthy things that mom sends, so I think it is a matter of education from the parents to teach their children what is acceptable and not acceptable to put in their body."

"I was raised in a low fat home but our like there was so much food like you could see why there was no portion control. Like there was so much food there and like everything would be fat free and low fat but if you eat ten it doesn't matter like now when I cook I do a lot of substitution."

"And in addition to that in terms of marketing to children it's even more confusing for them for trying to discern what's good for them because I have three young children and they will say, because I encourage eating fruits and vegetables and they will say "Mommy it's fruit "and on the commercial they have a lemon that turns into the yellow fruit loop and an orange that turns into the orange fruit loop, is that the same because of the way food is marketed to children, it's even harder for them to recognize that this is a commercial. Fruit roll ups are not fruit but it will say 100% fruit juice and you know that fruit loop roll up is 90% sugar and at the most 10 % fruit juice so it's even more confusing for the younger ones to understand what is healthy because of the way food is marketed towards children."

"But what about the parents my mother never took me, you know my mother didn't have go to the city to tell me to go outside and play, if that park was in your community, you just went to it. So what about the parent's role in making sure that their children get the exercised required on Saturday mornings we can watch TV for a period after that you had to go out, you know after you finished your chores you went out to play and that was a given and my mother would say you get outside and play and right now the weather is very nice but you still, drive around and I'll bet 50% of the parks are empty."

How do family values and beliefs influence the decision of whether to engage in a healthy lifestyle?

"I have one, since you mentioned culture I think that one of the things is that does lack is that we do give out information it's kind of general, we don't take into account African Americans, Bahamian, Haitians, Cubans we don't take into account those cultures and those different lifestyles because their foods are all different than you know my foods are so giving them that options, my girlfriend her family 's Cuban, I mean never seen so much rice consumed, her parents are always like eat, I'm like no I can't eat anymore rice, I mean there's so much of starches and just the sauces and things like that and that's a part of their culture and its part of also teaching you can still have that but you can do it in a bigger way, and I don't think that has been addressed and I know that we don't address and we started thinking about that because we do get such a high population in my city, they come but they say that's great but this is how I cook, how do I do it like this, or how do I whatever."

"And this is, we have I have to go back to cultural differences but, you know where she live 20, 30 years ago that was fine because we were more physically active. Carbohydrates metabolized and there gone and as long as you use them they're not stored, when you don't use them that's when your body stores them. So they're not bad as long as you use them and that's what media, go back to my first point is, media has done a terrible job kind of just throwing this information out there, cause carbohydrates are not bad for you as long as you use them for physical activity."

When is search of information where do Broward County Resident go to get more information on exercise and eating healthy?

"I would ask my doctor..."

"As far as eating is concerned I watch like those healthy, health program on TV that allow me to see risky ideas on eating anything."

"I get a lot of my information from the internet actually, I have a friend actually who sent me a couple of different websites, like video fitness, they have forums and stuff for people who go on there and just talk about exercise and say things to do, things like that I guess umm also magazines I subscribed to a couple of fitness magazines and that where I get most of my information as well."

"Uh, just uh TV shows, occasionally you're watching a talk show and people just touch on the subject, but I can't say I really am one day like in your case subscribe to fitness magazines or goes on the internet, I use the internet a lot but mainly for business related things. I think it's just a occasionally talk show I watch the news and uh one guy that comes to mind is umm on CNN, I don't know if you'll watch CNN, but there's a, I think it's Saturday, there's a doctor called Shanjay Gupta, who has some pretty good information umm I think they, and I'm glad that they're doing more some of the networks are doing more this, umm that where I started get my information."

"I have a friend that's a I always forget a dietician or a nutritionist anyway and she works at a hospital or my personal trainer who is you know he's been a trainer for 20 some odd years so I trust him with exercise component, and my yoga instructor goes to all kinds of umm I'm forgetting the word, but uh conferences and things that like where he learns quite a bit about yoga so I try to go to people that are knowledgeable on topics that I trust and talk to them about it."

"I get a lot of my information from the internet actually, I have a friend actually who sent me a couple of different websites, like video fitness, they have forums and stuff for people who go on there and just talk about exercise and say things to do, things like that I guess umm also magazines I subscribed to a couple of fitness magazines and that where I get most of my information as well."

"I think especially can you teach your doctor, especially, when you go there, they're suppose to let people know what's wrong, what's right, exercises that they need to do."

"I read fitness magazines and if I have a question I will ask a personal trainer."

"I read things on the internet, I mean Chinese internet and I always try to find what experts say and what they say what are the vegetables that are you know nutritious that do good to your health."

When is search of information where do Broward County Resident go to get more information on exercise and eating healthy?

"I turn to people who are in shape. People who live that lifestyle, like I mean if I have a question I'm going to turn to a person who I know is in good shape like I mean like I was telling you my ex-boyfriend is in excellent shape and that's his major, that's what he majored in, that's what life profession is going to be so if I have a question I ask him, you know I don't like umm I think or even like referable research on the internet I mean there is just a lot of, there are a lot of different places that are trying to get the message out but I mean so few and far between you think of all the people in this country, a lot of people are not looking to be healthy, they're just looking to be skinny for a quick period of time."

What would Broward County residents like to see in a lifestyle program designed to meet the needs, challenges and strengths for healthier living?

"Well I think first of all whatever program it has to be free, for anybody that wanted to come and do it. I mean that's like I think the key point is if even if you go to a community center or a park or whatever you know for a class or you know cooking class or nutritional class you're still paying you know minimally 5 dollars you know maximum for a six week class you could be paying over 50 dollars. But also have it not you know here's Broward County and have one center at you know at the centermost point and one center at the northernmost point, you know there would have to be enough places, convenience to be able to go to, to get information, or go to a class, or you know have that motivator you know maybe come to your community and do something there. I mean that's what I think---distance, time and money are three key things with any program."

"And this brings me to my point, were I wanted to bring in, if you had all the money in the world, I would probably invest in more psychological help for people to not particularly per say to lose weight but to really understand what the implications of not being physically active or not necessarily being ideal weight cause there isn't, I personally believe there isn't such a thing umm my ideal weight is 140 pounds, I was a 140 pounds when I was 12 years old you know, according to the charts I'm 40 pounds over weight, and I don't personally feel that I am 40 pounds over weight, but I don't agree with the ideal body weight system, so I think that if we had all the money in the world I would personally encourage everyone or give some kind of emotional, psychological, mental health, whatever you want to call it, so that people understood what the needs and the benefits are for being physically active and for keeping some what of a meal plan or nutrition habits or whatever you want to call it, that's."

"I think that's a excellent idea and I think, I think parent need to be aware of the long term, long term impact of feeding their children things that could lead to obesity, they need to be aware of the long term impact of those diet decisions on their children health, like nobody would give their child poison, no parent would ever give their child arsenic, but if you feed your child a diet coke, candy bars and Mc Donald's it's almost equivalent, because that's a death sentence for that child you know over the long term. The parents have to become, it has to be stated kind of like really like those terms if you give your child that diet, what you're sending them to school with everyday, cheese doodles, Capri Sun everyday and fruit rollups."

"I would like a nice group of people it could be thirty they don't have to be old like me, but they need to do some lesser things that aren't the new high tech stuff."

"I would like a nice low impact aerobics like they use to have."

"More child involved in activities such as football, basketball for free cause I have my son and I try to put him to a program for football, the money they asking you is unbelievable and I think we need more free program like you said for our children."

What would Broward County residents like to see in a lifestyle program designed to meet the needs, challenges and strengths for healthier living?

"The city that I work for we do a lot of programs and different awards and we have a really good center everything, but everyone doesn't, so a suggestion would be going on the whole conform throughout the county would be if the cities and the counties got on the same page."

"Something came to mind that has been bothering me, that I wanted to reinstitute, that is I wanted to have more sit down meals, uhh it's more organized, it provides greater community within your family and it's gone away TV has become too important. Electronics not just TV, electronics, telephones, telephone I think the cell phone is at this point in time in our history is probably second to the worst invention other than TV, as far as our children and our own lives are concerned. At this point I have more relationship with people that I relate to."

"Umm I was thinking more on the lines of something simple like maybe a daily nutritional newspaper that gets stopped, dropped off to everybody in the morning that would umm... You know it could almost be like a chart, if you're Oriental, if you're Caucasian, if your African American possible, if you're under this weight, under that weight how your looking to lose and something that would put, something that you know moderate, you know if you want to, week this goal try to walk at least fifteen to twenty minutes, and if that was dropped off at your door every morning. If you've been thinking about it and if you truly care about changing I mean there's a good chance you're going to read it or you're going to skim through it. It might say list your favorite foods, and like you said earlier, it might say pick three, out of these foods pick three and try to eat at least twice a week or something like that."

"If there was a need insurance coverage or if it was reasonable price, if you had all the money you could make it reasonable priced uhh have someone available to help with motivation and training and helping out with exercise plan and nutrition."

"As far as cost is concern, I think for exercise the only thing that could be done is maybe having gyms use a sliding fee scale based on income."

"I agree, that is an individual responsibility, but I also believe that lack of education, if you do not know the impact, when you think of what's happening on the weight of society, everything know with the health cost of obesity is having I think in the last year perhaps, it was like 8.7% of the national income you know for health care, then we realize that it has to be more than an individual responsibility, the society, the larger community has to help the individuals to take care of ourselves you know."

"I think that one of the most unlikely personal trainer, personal fitness people famous that is that I ever seen is Richard Simmons, and yet his following was so vast that when I think of personal trainers and so forth that his name comes to mind, and the people that were in his classes were anything but models and it was fun, he made it fun."

What would Broward County residents like to see in a lifestyle program designed to meet the needs, challenges and strengths for healthier living?

"For me personally, I like group settings I would like a class that suggestions that were made that really, you guys bring up things like ohh yeah that's true I didn't even think of it, like the labeling I thought of it before maybe for myself but I didn't realize other people have the same problem too. So group setting for me is a lot different as far as nutrition or just like I enjoy running and just sometimes people don't know and where do you go to run and as for fitness for me I've been umm if was to see other people like in The marketing that were my size, if it was a very diverse setting and there were many people there, It depends on how on I guess how you market, or how you reach out, if you're only marketing to people that are already physically fit or if I'm looking at a program or advertisement and I only see skinny girls, most likely I'm not going to go cause I won't feel like I don't know I am going to be the prettiest person there or if I go to class and it's a whole bunch of nutrition professors there and I don't know anything about nutrition I'm going to feel very uncomfortable so, that's I think that umm the way the market, like everything that everybody has touched on so far, the way that we market to people that would not help me feel better and anybody that's in the same situation as me, if you had all the money in the world, market in a way that it's available to everybody umm like even with the focus group we have so many different people here today and getting different opinions and stuff like that helps other like you too perhaps."

"I think you'll have to teach people what trans fat is, and how it affects them and like what is that, what unsaturated fats or poly saturated fats are."

"I think I mentioned them, if there were truly low cost or least inexpensive or affordable if you want to use that word, umm healthy options that umm you know for drive thru."

"I'm sorry insurance and doctors can be more educated about dealing with the problems. When you are, your kids, or your family member goes to the doctor instead of giving you a pill, try to send you to a nutritionist or to a fitness professional so they can deal with the situations instead of giving all the money to these companies that invent this medicine that's going to kill you at the end of the day or make you so dependent that if you don't take it you're washed. They can pay for that service through the insurance instead of giving you that medicine card so you can go lie to yourself that you're better when you're not getting better."

"But that's a whole other issue to be considered in the focus group is that there is a big contingent out there of people who, I mean I'm saying I can't afford to buy healthy they can't afford to buy food period and what is being given to them is the worse food in the world you know it's the white breads, it's the, I have a family that goes and they get uh I'm trying to think I think they go to the Mental Health Association and they'll come home with and I am not exaggerating maybe five or six containers of some type of pastry or umm or cakes or something because of a lot of our social services agencies because I work for one a lot of our social service agencies can get umm like from Publix or Albertson's or Winn Dixie the grocery store the uh products left over from the day earlier so they get the Danishes and they hand this out which is great, I mean the food isn't going in the garbage but the people that's being given to are the most disadvantage, not only economically but these are the people who are the greatest risk for diabetes and high blood pressure and all of your huge debilitating diseases that need to really eat healthy and we're giving them stuff that's really killing them and that's the big problem out there, big problem I see it every day."

What would Broward County residents like to see in a lifestyle program designed to meet the needs, challenges and strengths for healthier living?

<p>"I also feel maybe they should have different classes, like for those like me that need to lose a hundred pounds, those that have to lose under fifty pounds, those who only want to lose 5 or 10 pounds because the motivation for each group and the lifestyle for each group is different, you wouldn't want to go to somebody who only wants to shed 5 pounds, like that commercial goes, this pill is only for you if you need to lose excessive amount of weight to fit your vanity of five points, don't pay the 150 dollars for the pills. And there is too much pill pushing on TV now, I have thyroid and I'm scared to try any diet pill, because of my thyroid."</p>
<p>"That's why I think the government should have some social welfare or something that have money to establish some program, you know to encourage the general well being of society rather than give the way to individual patient for the drug companies."</p>
<p>"Instead of seeing a nutritionist, why don't dial into one because by time you're done at work at 5 o'clock most offices are closed people are working overtime now, have a 800 number, if you want the personal trainer have different numbers that you can call as a assist, like a phone buddy who will say, Yes, name mention you're doing a good job, no."</p>
<p>"But there is somebody there, and they're with you while you're exercising telling you what to do and not to do and the right ways to do it. I've had six heart attacks, three strokes, two back surgeries, neck surgeries how do I know what to do, I'm on insulin, I could give you a list of things, how do I know what to do."</p>
<p>"Yeah you don't need that if you have a list of healthy foods to eat and then you pick the ones you like and then you cook them, and even like people will say they don't have time to cook, you must have at least one hour and you can make stuff and cause you're making it the healthy way, then you freeze it individual, I mean there are ways, it's just a matter of wanting to do it and my motivation for me is, like I said before I want to live as long as I can but I don't want to be all crippled up if I can help it, because I want, you want to be obviously everybody wants to be pain free to the best that we can, and there's no 100%, but we can at least try, the end results is the end results."</p>
<p>"I think that one of the solutions is to start in the schools and introduce the PE at least once a week for kids, including high schoolers. "</p>
<p>"What companies can do, they can be more sensible to the time they give you and what they offer you, because what you find over there in those vending machines, they sell garbage and that's what you put into your stomach all the time because you do not have the time."</p>
<p>"Well if there was more mass transit, then you would have to walk people would be more incline to walk to the transit to get to where they're going."</p>
<p>"I think that we need more programs in education about nutrition."</p>
<p>"And the budget for the cafeteria food would really need to increase and education to the people that are making the decisions in the cafeterias."</p>

DISCUSSION

Perceived Barriers

The majority of focus group participants were able to articulate perceived barriers to not engaging in eating healthy and physical activity. When the researchers posed the question "Why do you even think we are studying nutrition and physical activity?", many of the residents answered by stating that the reason we are studying nutrition and physical activity is to improve health associated with poor nutrition and lack of regular physical activity due to the rise in overweight and obesity. For example, one participant stated the following: "I do, I think it's because everybody is talking about fitness and nutrition because not only obesity but because diabetes, high blood pressure, everything is going up." Another respondent stated "The problem with obesity, nationwide [umm] and probably because our culture has changed so much, that people are more likely to sit in an office and not be very active in their lifestyle and its probably leads to a lot of health risk." These views highlighted the participant's awareness of the obesity epidemic.

In the discussion of perceived barriers the majority of focus group participants noted that time and cost were major barriers that contributed to poor nutrition and lack of regular physical activity. Many respondents wanted to engage in eating healthy and physical activity but noted that time constraints and limited money impeded their ability to participate such behaviors. In addition, for those who desired to participate in a healthy lifestyle an additional barrier that was noted involved the confusing messages that are provided by the media. In essence, some participants felt that media has done a poor job by delivering mixed messages on what is necessary to move towards improving their health. One participant stated the following:

"I think the media has done a really bad job by portraying what the real truth is and um and you know putting out the information that we all need, the citizens need to say hey, you need to make some small changes you don't have to go on the Atkins diet, you don't have to go on the South Beach diet you don't have to go to Weight Watchers, Jenny Craig and spend all these thousands and thousands of dollars a year to lose 20 pounds you don't have to do that. If you just exercise and cut your portions you will achieve that. Whatever your ideal weight is or whatever your goal is that you want to reach."

Furthermore, accesses to nutritious and affordable meals were consistently stated throughout the focus groups. Participants discussed the irony of how inexpensive it is to purchase unhealthy meals versus being able to afford healthier meal alternatives. Access to physical activity resources was also a noted concern of participants. One participant stated the following:

"... in the north, south central why doesn't that complex have something there, why doesn't my little community, my little small community, I have to go outside of it to get what I want or what I need. It's not completely close, it's not within our circle work, you know whatever that circle is were we spend our time, it's not convenient for us we don't, that's maybe that's where the learning needs to be too."

Cultural and family influences were also detailed by the focus group participants. Participants stated that cultural norms and beliefs contributed to their current nutritional diet. Additionally, participants spoke of how they were able or unable to modify their eating habits due to their cultural background. Some of the following quotes express their views.

"I want to eat this, not eat that, because if I don't eat the rice, my culture we eat rice every single day, if I don't eat rice for two days I was, I was having like cold turkey, so I have to get my rice and I go back and eat the whole pot rice instead of a plate of rice so it was just like that, so I made it little by little and slowly and I got to the point were I'm comfortable and happy and healthy and this is my routine for the last year and it worked for me."

This participant discussed the transition from her native countries portion sizes in comparison to the portion sizes that are a part of the American custom by discussing how she can now eat greater portions of food.

"I agree, I think that in general Americans, the size are bigger and when I living in some other countries, when I first come here I saw Americans eat to much, I cannot finish that bigger plate, now I get use to it, I can finish."

Family influences were also a major part of the focus group discussion; participants recounted childhood memories of their caregivers making home cooked meals that included elements of the food pyramid and furthermore, they noted that participating in outside activities were a given and not an option in their households. Many participants expressed the current lack of family influence in their child's diet and physical activity lifestyles due to issues of time, cost and access in addition to less family time due to technological influences such as television and video games.

"But what about the parents, my mother never took me, you know my mother didn't have go to the city to tell me to go outside and play, if that park was in your community, you just went to it. So what about the parent's role in making sure that their children get the exercise required on Saturday mornings we can watch TV for a period after that you had to go out, you know after you finished your chores you went out to play and that was a given and my mother would say you get outside and play and right now the weather is very nice but you still, drive around and I'll bet 50% of the parks are empty."

"Something came to mind that has been bothering me, that I wanted to reinstitute, that is I wanted to have more sit down meals, uhh it's more organized, it provides greater community within your family and it's gone away TV has become too important. Electronics not just TV, electronics, telephones, telephone I think the cell phone is at this point in time in our history is probably second to the worst invention other than TV, as far as our children and our own lives are concerned. At this point I have more relationship with people that I relate to."

Children's Future Health

Children's future health was also a key point of discussion in the focus group. Participants highlighted the major concerns that were held such as the lack of structured programs within the school system. Participants noted that the menus that are offered to the children are not adequate in meeting healthy nutritional guidelines. Many even felt that the combination of unhealthy food choices offered in schools coupled with the decreased amount of available physical activity during school hours contributed significantly to childhood overweight and obesity. One participant stated:

"And the budget for the cafeteria food would really need to increase and education to the people that are making the decisions in the cafeterias umm I think a big problem is that our food is perishable and so we get what we can store for the long periods of time those with all the preservatives and yeah so, even increase the delivery of more fresh foods that would mean a bigger budget so that kids could umm could have, and even the convenience of like the Lunchables, the parents do send the kids they may send them with Lunchables umm kids don't have dessert at every sitting, so maybe more healthy choice for those convenient types of things so parents can pull kids."

Another stated:

"I think in the past 10 to 20 physical fitness has been excluded from the school system it's not a part of their daily schooling an importance has gone away so the kids aren't learning the skills they need to participate in leisure sports so they go and watch a softball game instead of playing a soft ball game because they don't know how to hit a ball."

Solutions for Improvement

Solutions for improvement were also posed by the participants in response to the following questions posed by researchers "What would you want to see in a lifestyle program designed to meet Broward County residents needs, challenges and strengths for healthier living?" The participants gave very thoughtful and provocative potential solutions to improving the health of Broward County citizens. The majority of the participants discussed the need to improve access to current facilities within Broward County to promote increased physical activity. In this discussion, cost was a factor, as participants felt that free or low cost facilities were important to providing such access. Furthermore, the participants felt that involving local community centers to promote healthy lifestyles through free educational classes are also necessary. When participants spoke to improving

access, transportation to these facilities were also mentioned. The lack of convenient public transportation and the poor environmental set up for pedestrians were also a part of the discussion on improving access to physical activity facilities. Other issues noted by participants, included the possible need for governmental intervention that would be necessary to create such facilities and programs and/or to subsidize the cost for those who sought such services to improve their overall health. Another suggestion proposed by the respondents was the apparent need for a psychological intervention, participants spoke to either their own personal insecurities or the insecurities of others surrounding not feeling comfortable in environments where they felt that others were watching them as they engaged in physical activity. Many suggestions were proposed during the focus groups as they relate to needs of children. Participants suggested various interventions particularly to be utilized in the school setting such as increasing cafeteria budgets to facilitate healthier food choices and to reinstitute physical activity in the school setting at a minimum of five days a week and to include programs that focus on making healthy nutritional choices for both the students and their families.

LIMITATIONS

This study suffers from limitations as does any other. One limitation of the study is the potential that the focus group setting contributed to respondents engaging in socially desirable responding. Views on nutrition and physical activity that were not well developed at the beginning of the focus group may have been swayed, particularly to support increased healthy eating or increased physical activity by the end of the focus group. Moreover, the researchers explained that the purpose of this phase of the study was to understand respondents' attitudes, beliefs, and experiences, but they could no doubt surmise that the overall purpose of the study was to positively impact views eating healthier and engaging in increased physical activity. Although the moderator worked hard to create a neutral atmosphere that respected all views on nutrition and physical activity, it is unclear to what extent respondents felt pressured to make positive statements about eating healthier and engaging in increased physical activity.

The intent of this study is not to generalize findings to Broward County residents. Moreover, by virtue of their willingness to volunteer it might be that the Broward County residents participating in this study are more open to discussing health-related issues as compared to Broward County residents who did not agree to participate in the study. It might also be that the overrepresentation of women among our sample of Broward County residents impacted the findings. However, these findings further the development of knowledge of the attitudes, beliefs, and experiences of a particular group of individuals with the goal of developing intervention messages that positively impact their views on improving health by engaging in healthier eating and increased physical activity which can be modified and transferred to other populations of Broward County residents contingent upon additional research on its effectiveness.

CONCLUSION

The major goal of this investigation is to develop a lifestyle enhancement health program for Broward County residents. Specific objectives included examining health status, practices, readiness for change, and identifying culturally competent, evidenced-based factors to incorporate into a health intervention program. Thus, conducting this formative research using the target population as a basis for developing an intervention was very important. The researchers believe that the views, attitudes and beliefs articulated by the participants surrounding nutrition and physical activity will serve to enhance programs developed for Broward County citizens that reflect their needs, strengths and challenges.

Appendix

Discussion Guide for Focus Groups

As you know, the purpose of this study is to learn more about your views and experiences with exercise and nutrition. But before we get to those issues, I wonder if you could tell me what you think the major issues are surrounding exercise and nutrition.

1. Opening Question

- a. What are the major barriers to exercising? What are the major barriers to eating healthy?
- b. Why do you think people who engage in eating healthy and exercising do it?
- c. Why do you think we're even talking about exercise?
- d. Why do you think we're even talking about eating habits?

2. Views regarding Nutrition/Exercising

- a. What do you think about the statement that, "the majority of American's are obese"?
 - o Do you agree with this statement?
 - o Disagree with this statement?
 - o Why?
- b. Tell me about your personal thoughts on exercise and eating habits.
 - o What is your opinion on exercise and eating healthy?
 - o How did you develop that belief?
 - o How does this belief fit with your current life style?
 - o How much have you discussed your view on exercise and nutrition with your family, friends?

3. Knowledge of Exercise & Eating Healthy

Now I'd like to go around the room and have each person tell me what he or she knows about healthy exercise and nutrition plan. I'm not looking for more than a few sentences here.

- a. What's the purpose of exercise?
- b. What's the purpose of eating healthy?
- c. Who benefits from exercise?
- d. Who benefits from eating healthy?
- e. Where would you go to get more information on exercise and eating healthy?
- f. Who would you go to for more information on exercise and eating healthy?

4. Personal Thoughts/Experiences Surrounding Exercise and Nutrition

- a. What are your thoughts about your weight?
 - o Is this something you think about?
 - o If so, how often?
- b. What are your thoughts about eating healthy?
 - o Is this something you think about?
 - o If so, how often?
 - o What does healthy eating mean to you?
 - o What is your favorite food?
- c. What are your thoughts about exercising?
 - o Is this something you think about?

- If so, how often?
- What does exercising mean to you?
- What type of exercises or physical activities do you enjoy most?

5. Solutions for Improvement

- a. What would you want to see in a lifestyle program designed to meet Broward County residents needs, challenges and strengths for healthier living? For example,
 - What should be included about better eating habits?
 - What should be included about exercise?
 - What type of eating activities would you want to take part in?
 - What type of physical activities would you want to take part in?
 - What are some incentives to make you definitely take part?
 - How often would you want to meet with the group?
 - Would you take part in a buddy or partnering system?

- b. Is there anything else that you would like to share with the group about your thoughts on exercise and eating healthy?

- c. Do you have any questions for me?

Broward County Nutrition and Physical Activity Focus
Groups

**Coding Structure
&
Code Lexicon**

Institute for Child Health Policy
Doldren
March, 2006

Nutrition & Physical Activity (NAPA) Coding Structure

<i>Full Mnemonic Codes</i>	Line Abbreviation
<i>What do respondents know about NAPA?</i>	WHATKNOW
Where do respondents go for information about NAPA?	WHEREGO
<i>Views/Experiences on about NAPA</i>	VIEWS
Personal Views/ Experiences on Nutrition	VIEWNT
Personal Views/ Experiences on Physical Activity	VIEWPA
Others' Views/Experiences NAPA	OVIEW
Rationale for Engaging/Not Engaging in Exercise or Nutrition	
Education	EDU
Motivation	MOTIVATE
Employment	JOB
Access	ACCESS
Safety/Environment	SAFETY
Health	HEALTH
Social Support	SUPPORT
Taste	TASTE
Questions that participants posed	INQUIRY
Time	TIME
Choice	CHOICE
Efficacy	EFFICACY
Discourage	DISCOURAGE
Commitment	COMMIT
Esteem	ESTEEM
Race/Class	RACECLASS
Society	SOCIETY
Family Influences in the Decision Making Process	FAMILY
Not thinking about NAPA until something happens	NOTTHINK
Taking Care of Your Body	TAKECARE
Development/Dissemination of Intervention	DEVMESSAGE
Benefits of NAPA	BENEFIT
Costs Associated with NAPA	COST
Organizations associated with NAPA	ORGS
Media Influences in the role NAPA	MEDIA
Generational/Historical Influences on NAPA	HISTORY
Past vs. Current Behavior	CHANGE
Schools role in NAPA	SCHOOL
NAPA's role in the life of children	CHILD

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Where do respondents go for information about NAPA? [WHEREGO]	
Views/Experiences on general issues surrounding NAPA [VIEWS]	
Personal Views/ Experiences on Nutrition [VIEWNT]	
Personal Views/ Experiences on Physical Activity [VIEWPA]	
Others' Views/Experiences on NAPA [OVIIEWS]	
Education surrounding NAPA [EDU]	
Motivation surrounding NAPA[MOTIVATE]	
Employment related issues surrounding NAPA [JOB]	
Access surrounding NAPA [ACCESS]	
Safety surrounding NAPA [SAFETY]	
Health surrounding NAPA [HEALTH]	
Social Support surrounding NAPA[SUPPORT]	
Taste issues surrounding Nutrition [TASTE]	
Questions posed by participants [INQUIRY]	
Choice issues surrounding NAPA [CHOICE]	
Efficacy surrounding NAPA [EFFICACY]	
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Organizations associated with NAPA [ORGS]	
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Generational/Historical Influences on NAPA [HISTORY]	
Past vs. Current Behavior [CHANGE]	
Schools role in NAPA [SCHOOL]	
NAPA's role in children's life [CHILD]	

Coding Instructions

1. Code lines of text with multiple codes as necessary.
2. Indicate code words when assigning codes to text.

Code Lexicon

What respondents know about NAPA? [WHATKNOW] = This code should be used to describe respondent's knowledge surrounding NAPA or lack thereof. This code will primarily be used for the response to this specific question, but not necessarily so. Code all text that demonstrates respondents level of information surrounding nutrition and physical activity (NAPA) or text in which the respondent implicitly or explicitly discusses any level of information surrounding NAPA. This may include a respondent's personal experiences, a story or a general explanation not involving a respondent directly. Also code in places where the respondent provides descriptions and details regarding a need for education for themselves or others surrounding NAPA. May include: education in the home, school, community or other settings.

Example:

R: Not always laziness, people just have certain conditions that sometimes don't know either the proper way of exercising, they don't know what they can and cannot do or there is laziness involved in it, but there is also the need for motivation, and if they had the proper knowledge someone can say, well with this condition you can do this and this, if you had a heart problem, if you had diabetes, if you had back problems, you don't always know what you can and cannot do, so you need some type of knowledge on what can be done.

Where to go for information? [WHEREGO] = This code should be used to describe where respondents would go to receive information/ resources regarding NAPA. This code will primarily be used for the response to this specific question, but not necessarily so. Includes text in which the respondent describes the need to discuss issues with others surrounding NAPA.

Example:

Well, I would ask my doctor cause it's each individuals health and like mine is cholesterol so I am trying to follow that I ask myself why do I have that but I do, so it's hard.

Views/Experiences on general issues surrounding NAPA [VIEWS] = This a broad code that should be used to describe the extent to which the respondent is sharing views/experiences on NAPA. This can include perceived misperceptions.

Example:

R: I agree, I think that in general Americans, the size are bigger and when I living in some other countries, when I first come here I saw Americans eat to much, I cannot finish that bigger plate, now I get use to it, I can finish (Laughter)

Personal Views/ Experiences on Nutrition [VIEWNT] = Generally, this code covers the description of an event or personal views towards Nutrition and includes having personally experienced some aspect of the NAPA process. Always include references to when, where, and with whom the event took place. However, it may also include knowing someone who has been through the process if the respondent explicitly states that for this reason it has affected his/her personal view.

Example:

R: Like me I'm kind of overweight, I love to eat fruits and vegetables. I do love to eat healthy food even though I do kind go and eat the Mc Donald's and whatnot, but I do love to eat fruits and vegetables, I love them so that's me personally.

Personal Views/ Experiences on Physical Activity [VIEWPA] = Generally, this code covers the description of an event or personal views towards Physical Activity and includes having personally experienced some aspect of the NAPA process. Always include references to when, where, and with whom the event took place. However, it may also include knowing someone who has been through the process if the respondent explicitly states that for this reason it has affected his/her personal view.

Example:

R: Of course, I ride my bike three miles collectively, a mile and half each day to my school and then I ride a mile and a half back so it's three miles each day.

Others' Views/Experiences on NAPA [OVIWS] = Generally, this code covers the description of an event or description of other people's views/experiences towards NAPA and includes speaking of what they heard someone else share or more general descriptions of others' perceptions surrounding NAPA. Always include references to when, where, and with whom the event took place.

Example:

R: My sister in law went so deep over the edge she went up into carotene poisoning her lungs are orange from too many carrots.

Education surrounding NAPA [EDU] = This refers to respondents' discussion on education or lack thereof on NAPA.

Example:

R:

Motivation surrounding NAPA[MOTIVATE] = This refers to respondents dialogue on the motivation factors or lack thereof in NAPA.

Example:

R: I think it's also if you see other people go to the gym, kind of motivates you to go yourself and especially if you have someone to work out with, it help you do it yourself

Employment related issued surrounding NAPA [JOB] =This refers to respondents dialogue on the worksite health promotion activities or lack thereof in addressing NAPA.

Example:

R:

Access surrounding NAPA [ACCESS] =This refers to respondents dialogue on access issues and concerns surrounding NAPA.

Example:

Safety surrounding NAPA [SAFETY] =This refers to respondents dialogue on safety issues and concerns surrounding NAPA.

Example:

Health surrounding NAPA [HEALTH] =This refers to respondents dialogue on health issues and concerns surrounding NAPA.

Example:

Social Support surrounding NAPA [SUPPORT] =This refers to respondents dialogue social support issues surrounding NAPA.

Taste issues surrounding Nutrition [TASTE] =This refers to respondents dialogue on time or lack thereof as a factor in NAPA.

Example:

Questions posed by participants [INQUIRY] =Code participant questions or inquiry posed ensuring the focus group as that relate to some aspect to NAPA.

Example:

Choice issues surrounding NAPA [CHOICE] =This refers to respondents dialogue on choice as a factor in NAPA.

Example:

Efficacy surrounding NAPA [EFFICACY] =This refers to respondents dialogue on efficacy as a factor in NAPA.

Example:

Discouragement in the NAPA process [DISCOURAGE] =This refers to respondents dialogue on factors that cause discouragement in the NAPA process.

Example:

Commitment in NAPA [COMMIT] =This refers to respondents dialogue on commitment or lack thereof as a factor in NAPA.

Example:

Esteem issues surrounding NAPA[ESTEEM] =This refers to respondents dialogue on self-esteem issues as a factor in NAPA.

Example:

Race/Class issues surrounding NAPA [RACECLASS] = Code places in the text where race based OR class-based social inequalities are described by respondents in relation to NAPA.

Example:

Societal issues surrounding NAPA [SOCIETY] =This refers to respondents dialogue on societal influence as a factor in NAPA.

Example:

Family Influences in NAPA Decision-Making Process [FAMILY] = This code is a used to denote a respondents dialogue on family influences in the NAPA decision making process.

Not thinking about NAPA [NOTTHINK]= This code describes hypothetical or actual crisis situations that help a person develop his or her decision surrounding NAPA.

Example:

Taking Care of Your Body [TAKECARE]= This code is used to describe a respondent's discussion on taking care of your body and how taking care of your body or not taking care of your body relates to NAPA situations. Will also include any discussion of health issues/concerns with others. May include discussion of the use of alcohol, smoking, or drugs as not taking care of your body.

Example:

Development/Dissemination of Intervention [DEVMESSAGE] = This refers to respondents' description of ways to implement our NAPA project. This includes questions, statements, or opinions that respondents' have regarding the implementation of our project. Please include

respondent questions that are posed during the focus group that can be utilized in the development of our intervention. This can include coder perceptions of respondents' comments to help with the development of the intervention.

Example:

Benefits of NAPA [BENEFITS] = This code is used to note respondents' dialogue in relation to the benefits of NAPA. It is usually found in responses from a question posed by the moderator, but not necessarily. Can include but not limited to receiver, family, community.

Example:

Costs associated with NAPA [COSTS] = This is a broad that code refers to the respondents description of cost or potential costs of the NAPA process. It usually stems from a moderator posed question, but can occur in other dialogue. Can include but not limited to monetary costs, follow-up cost or the life costs.

Example:

Organizations associated with NAPA [ORGS] = This is a broad code that refers to organizations that respondents identify as institutions that focus on the NAPA system. It usually stems from a moderator posed question, but can occur in other dialogue.

Example:

Media Influences surrounding NAPA [MEDIA] = This refers to respondent dialogue that focus on media influences on the NAPA process.

Example:

Generational/Historical Influences on NAPA [HISTORY] = This is a broad code that is used to capture respondent dialogue on the generational/historical influences that have shaped respondent's views. May include discussion on tradition and culture and beliefs being passed down from generation to generation.

Example:

Past vs. Current Behavior [CHANGE] = This is a broad code that is used to capture respondent dialogue on individual change that is NOT influenced by culture, tradition & beliefs.

Example:

Schools role in NAPA [SCHOOL] = This is a broad code that is used to capture respondent dialogue on the schools role or influence on NAPA.

Example:

NAPA's role in children's life [CHILD] = This is a broad code that is used to capture respondent dialogue on the NAPA role in the life of a child.

Example:

Broward County Nutrition & Fitness Project

What is the 'NUTRITION & FITNESS PROJECT'?

The NUTRITION & FITNESS PROJECT is a study sponsored by the Broward Regional Health Planning Council, Nova Southeastern University and the Health Foundation of South Florida. This study is designed to learn more about Broward County including community strengths, attitudes, practices, and beliefs regarding nutrition and fitness. We want to learn more about this community's health behaviors, barriers, stressors and successes to living a healthier lifestyle! All aspects of health will be discussed, including views about best and worst eating, exercise, and relaxation practices.

Where will 'NUTRITION & FITNESS PROJECT' take place?

The first part of NUTRITION & FITNESS PROJECT is focus-group sessions, which will be held at select locations throughout Broward County.

When will 'NUTRITION & FITNESS PROJECT' start?

Recruitment for NUTRITION & FITNESS PROJECT will start in September 2005 and continue until a total of 40-community member's participate in the focus group sessions.

Why is the 'NUTRITION & FITNESS PROJECT' important?

The NUTRITION & FITNESS PROJECT is important because it will help us understand what health issues are important to community members in Broward County. Through NUTRITION & FITNESS PROJECT, we hope to learn what are the challenges and successes, and unique experiences of Broward County residents. We also will learn about simple, successful elements for improving health, all of which will be incorporated into a lifestyle program specifically designed to improve the communities' health!

Is there a cost to participate?

There is no cost for to you to participate and the focus group sessions they are expected to be fun and interactive. In addition, for your time, YOU will receive a \$25 gift certificate for your participation in this study and it will take no longer than 1 ½ hours and refreshments will be served.

Questions?

For more information about NUTRITION & FITNESS PROJECT, please contact Deborah Mulligan, MD at (954) 262-1942 or e-mail at NAPA@ichp.nova.edu.



THANKS FOR YOUR PARTICIPATION!