

This document reports findings of the formative inquiry conducted prior to developing and implementing a walking campaign aimed at preventing diabetes among Hispanic women, ages 35-54, who live in the Las Cruces, NM area. Inquiry conducted by Ana Consuelo Matiella and Associates under contract with the New Mexico Diabetes Prevention and Control Program. 2003

Summary: Values, Motivators and Barriers

Overview:

The purpose for conducting three focus group interviews in Southern New Mexico with Hispanic women ages-35-55 with diabetes in their family was to begin to get an idea of what values, motivators and barriers would play a role in a social marketing strategy for a pre-diabetes campaign. Two groups were conducted in English and one was conducted in Spanish. The levels of education varied from low education monolingual Mexican immigrants to a semi-professional group of women in Las Cruces with some college education.

There were many similarities and few differences among the three groups. Below are the most salient ones:

- ② Most of the women identified health and family as the most important things in their life. Similarly they all expressed a concern that if you didn't take care of yourself, you couldn't care for others.
- ② When it came to defining what it meant to be healthy, across the three groups, being active and energetic was of the highest expressed value and women had examples, mostly of elderly aunts and mothers who were a picture of this energetic, active, positive woman.
- ② The term pre-diabetes was confusing and caused a lot of discussion. Overall, the impression of this consultant is that it the term "pre-diabetes" sounds like jargon to most women and that the condition is better explained or couched in talk about risk factors. Introducing this term is not recommended at this time.
- ② Although focus group interviews should not be used to assess knowledge, the overwhelming impression that this consultant had from all three groups is that these women know the connection between exercise and food and diabetes. I would recommend that we do some kind of knowledge assessment survey to confirm what I suspect is true.
- ② The biggest barrier across the board to exercising and healthy eating was time. However, there was a concern about money and buying good food in the monolingual Spanish group.
- ② Another overwhelming similarity among all groups was the expressed desire for group interaction, buddy system, comadre system, and word of mouth, as a way to get support and information. An oversight on the part of this consultant was to omit "word of mouth" from the list of sources of information. (mea culpa)
- ② The elder wisewoman archetype was the most preferred spokeswoman although I would like to suggest a refinement of this in subsequent formative research efforts. We did have several women express a desire for a mother daughter team

and I would like to further explore combining the wise older woman character with a daughter character.

- ② Telenovelas were watched by all three groups.
- ② The need to simplify terms, explain them, avoid jargon and lower the readability was expressed mostly by two out of the three groups, although the third group did have quite a long discussion about the meaning of pre-diabetes, even after it was explained, and there was still confusion.
- ② There was a slight thread of fatalism running through the three groups, and I think it is worth deeper exploration, perhaps in a survey. Expressions such as – are we all going to get diabetes anyway no matter what so why go to the doctor - why try to get in shape when you are never going to look thin like that thin model- why deprive ourselves if we are all going to get diabetes anyway.
- ② Concern about habits and cultural norms, *costumbres*/ customs, the way we are, the way we were brought up and the way we eat...also a slight thread but worth paying attention to.

Recommendations for future social marketing efforts:

- ② **Omit the term pre-diabetes and focus in on risk factors.**
- ② **Conduct a survey to assess knowledge and awareness about prevention among our target group. We may find that the target group is more ready for action than we think.**
- ② **Provide materials that are easy to read in Spanish.**
- ② **Put in “word of mouth” as a viable way of getting information in future formative research efforts. Test the concept of “the comadre network.”**
- ② **Do a readability, educational level and literacy level analysis of our target area to make sure materials are relevant to the needs of the population we are targeting. . This consultant did a first glance analysis at literacy levels in Las Cruces and found that half of the adults in Las Cruces are functionally illiterate. Half of the population speaks another language besides English. There are implications here for materials development – to develop easy to read materials in both English and Spanish.**
- ② **When choosing a spokesperson, keep in mind preference for elder wise woman, but consider further testing of a mother/daughter duo, and perhaps mother/daughter/granddaughter trio.**
- ② **Suggest ways to motivate women to make time for exercise. Test these ideas in the next round of formative research.**
- ② **Test out the motivating value of suggesting fast, healthy foods, and culturally normative foods.**
- ② **Address the issue of “cemented customs” and “habits” in the next round of formative research. I think in the future, we should explore a bit more the psycho-social-cultural aspects of food and delve more into finding out what would motivate our target group to exercise.**